No X	Yes		Committee on Ethics.	because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the C	ss you have fire	wer "yes" unle	tion? Do not ans	three tests for exempt	hey meet all t	because t
\$ \$		ot be	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? EXEMPTION—Have you excluded from this report any other assets "unearned" income, transactions, or liabilities of a spouse or dependent child	s and certain other "excepted to spouse, or a dependent child? Transactions or liabilities of a	nittee on Ethica iting you, your a	approved by the Committee on Ethics and certain of such a trust benefiting you, your spouse, or a street assets "unearned" income, transaction.	Trusts" approve	TRUSTS—Details regarding "Qualified Blind Trusts" a disclosed. Have you excluded from this report details	-Details rega Have you ex	TRUSTS- disclosed.
, J	QUESTION)F THESE (ANSWER EACH OF THESE QUESTIONS	1	TINFORM	OR TRUS	PENDENT,	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	SION OF	XCLU
	esponse.	each "Yes" r	ule attached for each "Yes" response	Each question in this part must be answered and the appropriate schedu	and the a	e answerec	part must b	question in this	Each	
× K	Yes 🔲	}5,000 from	VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Schedule VI.	VI. Did you receive compensation of more a single source in the two prior years? If yes, complete and attach Schedule VI.	s □	ž Z	ve any report- ting period?	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III.	your spouse, (more than \$1 plete and attack)	III. Did you able liability If yes, com
₹ ⊠	Yes	angement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	V. Did you have any reportable agreemer with an outside entity? If yes, complete and attach Schedule V.	<u>s</u>	Yes X	eive "unearned" or hold any nd of the period?	II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule II.	your spouse, oner than \$200 asset worth models and attach	II. Did you, income of n reportable a If yes, com
ĕ ⊠	Yes	efore the date r two years?	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	IV. Did you hold any rep of filing in the current cal If yes, complete and at	\$	Yes	e.g., salaries or rting period?	I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	or your spouse 00 or more from plete and attac	l. Did you c fees) of \$20 If yes, com
				ANSWER EACH OF THESE QUESTIONS	OF THES	ER EACH	- ANSWI	PRELIMINARY INFORMATION — ANSW	INARY IN	RELIM
							a black ink			
assessed who files	10	A \$200 penalty shall be against any individual more than 30 days late.	Check if Amendment	NOV 4, 2014	Date of Election:	TX 27	State:X District: Employing Office:	Candidate for the House of Representatives New officer or employee	I R Ca	Filer Status
	(Office Use Only)	() () () () ()		Dayune releptione:	Dayunie			CANG RES	MESTEN	Name:
	E CLERK ESENTATIVES	OFFICE OF THE CLERK HOUSE OF REPRESENTATIVES	U.S.F							
age 1 of <u>'</u>	LEGISLATIVE RESOURCE CENTER Page 1 of 2	2014 MAY 20 PM 12: 13	B nd new employee	FORM For use by candidates a	קד. קד	VIIVES	EMENT	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2013 - MAY 10, 2014	STATES SIAL DISC Overed: Jar	UNITED FINANCE Period co
)	107	MAI : 4								

- VANDUMO SMALLAD LAGGE TWO	- VANGLAGE ALD CAR INDEX FORD	- Invitation (NST. INDEX FUND	DEFINES CONTRIBUTION PLAN	DEFINED BENEAT PLAN	JT 1st Bank of Paducah, KY accounts	Examples:	SP, SP Mega Corp. Stock	normes and vacation normes (unness triene was remain income during the reporting period); any deposits totaling \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule II requirements, please refer to the instruction booklet.	Exclude: Your personal residence, including second	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and the city and state.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use ticker symbols).	Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	Asset and/or Income Source	BLOCK A
× ×	~	*		DESERVED A RETIREMENT	×		×	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 Spouse/DC Asset over \$1,000,000*		B C C D E F C C C C C C C C C C C C C C C C C C	*This column is for assets solely held by your spouse or dependent child.	it generated income, the value should be "None."	If an asset was sold during the report- ing year and is included only because	Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used.	Value of Asset	вгоск в
× ×		κ.	*	×	×	Royalties	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Inc	come)		during the reporting period.	if reinvested, must be dis- closed as income. Check "None"	plans or IRAs), you may check the "Tax-Deferred" column. Dividends,	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k))	Type of Income	BLOCK C
8 4			*	7.	×	×	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*		Current Year		spouse or dependent child.	income. Check "None" if no income was earned or generated.	For assets for which you checked check the "None" column. For all c income by checking the appropria and capital gains, even if rei	Amount	ВГС
× *	*	>	~	*	×	×	X	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*		Preceding Year		tor income derived from assets solely held by your dent child.	me was earned or generated.	For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as	Amount of Income	BLOCK D

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Wesy Curis Reas

Page 3 of 5

K2	7.7													SP, JT, DC			
VANNIMARD WITH VALUE FUND		Univers Heaverland Tono	- VANDEMAR SMALL CAR LOSEY FUND	- VANDELMO CAPTIAL VALLE TO SO	CORT /CA	MANEWARD WELLDAM FORD	JANLUADO SMALLOD LAREY RUND	- United PRINCEAR Forms	- Unusures INTL VALLE FUNS	- Upwarpa hat hope Tuns	Feser 401(L)	5	- Whally per Torac line Stock hims			Asset and/or Income Source	BLOCK A
X		2	X	>		*	V	×	*	**		*	^	\$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000	A B C D E F G H I J K L I	Value of Asset	BLOCK B
*	*	×	×	×	×	*	*	7		×	\hat{\chi}	\ \rangle	*	Spouse/DC Asset over \$1,000,000* NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income(Specify: e.g. Partnership Income or Farm Income)		Type of Income	вгоск с
	ж.	× .	2	×	*	×	*	*	*		>	<u> </u>	X	None		Amount c	BLO
χ	*	>	>	*	X	X	*	*	~	*	X	*	×	None -	:	Amount of Income	BLOCK D

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

8

Ξ

ŞP

PC3 VANTUARD ENDO STACK MEX FUR · Vousemas lung begunde to USAA FEDERAL JAMME BANK VANTUARD SMALL CAP LANCE FUND REWIND HAME, CONDUATED CLASSITEX BYRRY INC VANIMARD REST LANGER FAMO CHUNK MIDSTREAM LLC KERYX BIOZHATMACENTICALS Asset and/or Income Source Vantumo Euro Stave (more Fo Amerinane **BLOCK A** bush bunity b Fueller Trus ⋗ ⋉ None В \$1 -- \$1,000 C 又 \$1,001 - \$15,000 ō \$15,001 - \$50,000 Value of Asset Ш \$50,001 - \$100,000 Ŧ **BLOCK B** \$100.001 - \$250,000 ~ \$250,001 - \$500,000 G I \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 ے \$5,000,001 - \$25,000,000 ㅈ \$25,000,001 - \$50,000,000 Over \$50,000,000 _ ≤ Spouse/DC Asset over \$1,000,000* NONE ス DIVIDENDS Type of Income RENT BLOCK C **INTEREST** ~ **CAPITAL GAINS** EXCEPTED/BLIND TRUST TAX-DEFERRED \mathbf{x} Other Type of Income--(Specify: e.g., Partnership Income or Farm Income) 寒 \succ 木 None 7 $\boldsymbol{\varkappa}$ ス \$1 - \$200 × \$201 - \$1,000 \$1,001 - \$2,500 ₹ **Current Year** \$2,501 - \$5,000 < \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 MIG \$100,001 - \$1,000,000 ⋝ Amount of Income \$1,000,001 - \$5,000,000 × Over \$5,000,000 × BLOCK D × Spouse/DC Income over \$1,000,000* 2000 ス None Ľ \$1 - \$200 > 夾 ᆽ = < \$201 -- \$1,000 Preceding Year \$1,001 - \$2,500 \$2,501 - \$5,000 < ¥ VIIVIII X \$5,001 - \$15,000 ズ \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*

×

VANW ARD

Ş

SS

VALLOWARD

S

SS

B

This page may be copied if more space is required

·.
\mathbf{c}
¥
_
m
Ë
U
≓
<u></u>
m
_
_
=
=
_
_
╛
m
111
S

Name WESLEY CRAIG PLEAS

Page 5 of 5

ture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000. owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furni-Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount

								Amo	unt of	Amount of Liability	Ţ			
SP,		Date Liability		٨	В	ဂ	0	m	TI	ဂ	Ι		ے	*
JT DC,	Creditor	Incurred mo/year	Type of Liability	\$10,001 \$15,000	\$15,001— \$50,000	\$50,001— \$100,000	\$100,001— \$250,000	\$250,001— \$500,000	\$500,001— \$1,000,000	\$1,000,001 \$5,000,000	\$5,000,001— \$25,000,000	\$25,000,001— \$50,000,000	Over \$50,000,000	Spouse/DC Liability over \$1.000.000
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE				ļ,							
37	NATIONISM MUSTRACE	Juylos	JUYLOS MURTHAGE ON RENTH PROTECTY CARONATA				>							
57	BERLA BANK	July Yous	JULY DOUS MORTHAGE ON CENTRIC PROPERTY CONDOVATIO	·	×									

SCHEDULE IV - POSITIONS

any nonprofit organization, any labor organization, or any educational or other institution other than the United States. cer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an offi-

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization); and positions solely of an honorary nature

_		 		
			Position	and positions solely of an nonorary nature.
			Name of Organization	aure.