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 because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be	Each question in this part must be answered and the appropriate schedule attached for e	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes No 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 III.	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? Yes No With an outside entity? If yes, complete and attach Schedule II.	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? Yes V No V If yes, complete and attach Schedule I.	PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS	In all sections, please type or print clearly in blue or black ink.	Filer Candidate for the State: ALE BOXSKQ Date of Nov.4,2014 Check if House of Representatives District: CD 1 Election: Nov.4,2014 Amendment Status employee Employing Office:		Name: Denni's P. Crawford Daytime Telephone:		UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2012 - ソルル、 シュスの13 For use by candidates and new employees
Yes pendent child Yes	THESE Q	e attached for each "Yes" response.	5,000 from Yes	angement Yes	efore the date Yes			A \$200 penalty shall be against any individual more than 30 days late.	(Office Use Only)) N	OFFICE OF THE CLERK	LEGISLATIVE RESOURCE CENTRAGO 1 of LO
	STIONS	ISe.			見			\v	e Only)		ERK	H: 55
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SCHEDULE I -- EARNED INCOME (INCLUDING HONORARIA)

Name Dennist. Crawford

Page 2 of 10

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or
more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income
exceeding \$1,000. See examples below.
Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

exceeding \$1,000. See examples below. Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	ment programs, and benefits re	ceived under the Social (Security Act.
Course (include date of receipt for homograph)	Two	Amount	unt
Source (include date of receipt for frontierial)	Туре	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Examples: First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
ATZ Irade Association, Criticago, IL (necu December 2) Harris County, Texas Public Schools	Spouse Salary	NA.	NA NA
Country Law Offices, Lincoln, LE	Salary	*50,000	155,000
Crawford Law Offices, Lincoln, NE	Souse Salary	*.500	\$ 550
Crawford how Offices, Lincoln, DE	Divided 0	\$ 406 000	£ 251 000

57 Fideling Magellan	Tr Fidelity China	IT Fidelity Contractural	51 DuPort Stock	IT Senes EE Bond	IT Berkshire B Stock	SP, SP Mega Corp. Stock DC, Examples: Simon & Schuster 1st Bank of Paducah, KY accounts	Asset and/or income Source 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 during the year. Provide complete rames of stocks and mutual funds (do not use ticker symbols). 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. For rental or other real property held for investment, provide a complete address or a description, e.g., "rental impoenty," and the city and state. 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. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental 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 booldet.
X						Indefinite	None *1-\$1,000 \$1,001 - \$15,000 \$15,001 - \$100,000 \$15,001 - \$250,000 \$1,000 - \$1,000,000 \$250,001 - \$5,000,000 \$250,001 - \$5,000,000 \$250,001 - \$5,000,000 \$250,001 - \$5,000,000 \$250,001 - \$5,000,000 \$250,001 - \$5,000,000 \$250,001 - \$5,000,000 \$250,001 - \$5,000,000 \$250,000 - \$5,000,000 \$250,000 - \$5,000,000 \$250,000 - \$5,000,000 \$250,000 - \$5,000,000 \$250,000 - \$5,000,000 \$250,000 - \$5,000,000 \$250,000 - \$5,000,000
						X Properties	Type of Income Check all columns that apply. For retirement accounts that do not a slow you to choose specific investment income (such as 401(k) plans or IRAs), you may check the Tax-Deferred column. Dividends, interest, and capital gains, even if the asset generate tax choiced as income. Check Thone of the state o
×						×	## Pror assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, inclicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated. ### Current Year Current Year

Crawford

Continuation Sheet (if needed)

8 Ę, ş Asset and/or Income Source troctor+Camble Stock is stack BLOCK A None \$1.-\$1,000 ₿ ဂ \$1,001 - \$15,000 \$15,001 - \$50,000 Ö Value of Asset \$50,001 - \$100,000 BLOCK B \$100,001 - \$250,000 G \$250,001 - \$500,000 \$500,001 - \$1,000,000 I \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 ス Over \$50,000,000 Spouse/DC Asset over \$1,000,000* NONE **DIVIDENDS** Type of Income RENT BLOCK C INTEREST CAPITAL GAINS **EXCEPTED/BLIND TRUST** TAX-DEFERRED Other Type of Income--(Specify: e.g., Partnership Income or Farm Income) None \$1 - \$200 \$201 - \$1,000 **=** \$1,001 - \$2,500 X V V V V Current Year \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 Amount of Income × \$1,000,001 - \$5,000,000 Over \$5,000,000 BLOCK D × Spouse/OC Income over \$1,000,000* None \$1 - \$200 \$201 - \$1,000 X XI IIIM IIM W X X X **Preceding Year** \$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*

Continuation Sheet (if needed)				Name De h	nnis P. Ca	rawford P	Page 5 of 1)
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Asset and/or Income Source	Value of Asset	sset	Type of Income		Amount	Amount of Income	
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C	0,000 0,000 50,000	\$5,000,00 \$25,000,0 \$50,000	LIND TRI ED	come or Fa	000 ,000 000,000 5,000,000	0	000,000 5,000,000 0
	None \$1 - \$1,000 \$1,001 - \$15,0 \$15,001 - \$50 \$50,001 - \$10 \$100,001 - \$2 \$250,001 - \$5 \$500,001 - \$1	\$1,000,001 - \$5,000,001 - \$25,000,001 - Over \$50,000, Spouse/DC As NONE	DIVIDENDS RENT INTEREST CAPITAL GAIL EXCEPTED/B TAX-DEFERR Other Type of	Partnership Inv None. \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000	\$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$1000 \$100,001 - \$1,000,001 - \$1,000,001 - \$1,000,001 \$5,000,000 - \$5,000,000	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,00	\$15,001 - \$50,0 \$50,001 - \$100 \$100,001 - \$1,0 \$1,000,001 - \$2,0 Over \$5,000,00 Spouse/DC Income
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Royce Fund	*		×			7,46	, , , , , , , , , , , , , , , , , , ,
Alliant	***					*	
Apple	*		×			2	
Bucke	34		×	1 (2)		&*.	
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General Electric	*	0 %	×				
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<u> </u>					4	*	- //
Micosoft	£		X *		14.5		

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	Asset and/or Income Source	_			<	<u>a</u>	ē	으	Value of Asset	Š	~					-₹	Ą	0	<u>₹</u>	2	Type of Income	9										b	Ę	2	Amount of Income	윽	ᇫ	ğ	3									
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5		None	\$1 - \$1,000	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,00	\$250,001 - \$500,00	\$500,001 - \$1,000,	\$1,000,001 - \$5,00	\$5,000,001 - \$25,0	\$25,000,001 - \$50,	Over \$50,000,000	Spouse/DC Asset ov	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND	TAX-DEFERRED	Other Type of Inco	Partnership Income	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 - \$1,000,00	\$1,000,001 - \$5,000,0	Over \$5,000,000	Spouse/DC Income over \$1,	None	\$1 - \$200	\$201 - \$1,000	\$1,001 \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$15,000 \$15,001 - \$50,000		\$50,001 - \$100,000	\$100,001 - \$1,000,00	\$1,000,001 - \$5,000,	Over \$5,000,000	Spouse/DC Income over \$1,
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NEDULE II — ASSETS AN	ASSETS AND "UNEARNED" INCOME		Name Dennist. Craw	Page 7 of D
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SCHEDULE III — LIABILITIES

Name Dennis & Clawford

Page D of 10

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 sibowed 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 ling 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.

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Example:	Example:					
Creditor First Bank of Wilmington, DE	First Bank of Wilmington, DE					
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SCHEDULE IV — POSITIONS

cer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. 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-

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

Position	Name of Organization
and Associate Chair	Nebraska Democratic Party
member Board of Director	member Board of Directors Nebraska Association of Trial Atherneys
trustee	Nobraska Association of Trial Attorneys PAC
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