₹	child because Yes	sactions, or liabilities of a spouse or dependent with the Committee on Ethics.	" income, trans	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.	EXEMPTION—Hathey meet all three
No V	closed. Have you Yes	d certain other "excepted trusts" need not be disclosed. Have you	on Ethics and dependent chil	TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	TRUSTS—Details excluded from this
No 🗸	Yes		blic Offering?	IPO—Did you purchase any shares that were allocated as a part of an Initial Public Offering?	IPO—Did you purc
SNC	EACH OF THESE QUESTIONS	- ANSWER	T INFORI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLUSION
nd the sponse.	on in this part must be answered and the chedule attached for each "Yes" response	Each question in this part in appropriate schedule attache	N _o	V. 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 V.	V. Did you, your sp iability (more than if yes, complete a
*	arrangement with	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	8 □	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	IV. Did you, your spouse, or a depe or exchange any reportable asset in \$1,000 during the reporting period? If yes, complete and attach Schen
~ S	or before the date	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	§ 	III. 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 III.	III. Did you, your st income of more the reportable asset w If yes, complete a
No K	d receive any n the reporting Yes	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)? If yes, complete and attach Schedule VII.	<u>s</u>	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	II. Did any individu lieu of paying you reporting period? If yes, complete a
No 🗸	receive any regating more Yes	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VI.	N _o	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 Yes	I. Did you or your stees) of \$200 or m
		E QUESTIONS	OF THESE	Y INFORMATION - ANSWER EACH	PRELIMINARY
53 more man	30 days late.	Termination Date:		Annual (May 15, 2013) Amendment	Report Type
be assessed	A \$200 penalty shall be	r Employing Office:	Officer or Employee	Member of the U.S. State: Aransas House of Representatives District: 1st	Filer Status
jiwe /	S. HRUCE OF REMACSENTATIVES (Office Use Only)				
) M 30	2013 JUN 12 AM 10: 06	Daytime Telephone:	Daytime T	Eric Alan Crawford	Name:
	HAND DELIVERED	Form A For use by Members, officers, and employees	MENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT	UNITED STA

Name Eric Alan Crawford	
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SCHEDULE I—EARNED INCOME

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.

Exercise williary pay (such as realized character pay), redefal fellent programs, and perfetts received when the come coverns, when	נים ופטפואפים מוימכו יויס סספימי ספפי	ionity i with
Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
	Legislative Pension	\$9,000
Examples: Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
Families Inc of America	Spouse Salary	N/A

Page 3 of 9

SCHEDULE II—PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. A green envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
_	Speech	Feb. 2, 2012	\$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2012	\$500
N/A			
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	Mickey Seeman	Halsey Outdoor Advertising	Agri-Advertising, Jonesboro, AR	Farmhouse Media, LLC	1st Bank of Paducah, KY Accounts	Examples:	SP Mega Corp. Stock	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 a personal checking or saving 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 III requirements, please refer to the instruction booklet.	For rental or other real property held for investment, pro- vide a complete address or a description, e.g., "rental property," and a 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 licker 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
		×	×					None >		 This column is for assets held solely by your spouse or dependent child. 	If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	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.	
					L	Ē		\$1 - \$1,000		nis (n ag I is	ë mar icar	
					L	Indefinite		\$1,001 - \$15,000		호텔	, #indet	. rket	
					L	ਰ		\$15,001 - \$50,000	_	de min	included the value	val val	
					L		×	\$50,001 - \$100,000 m	_	onde	If an asset was sold during the rep and is included only because it income, the value should be "None."	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
				ļ	Ľ	_		\$100,001 - \$250,000	4	ras ento	only because it should be "None."	asse valu plea	ue of As
		ļ		ļ	╀	_		\$250,001 – \$500,000 ග	_	hiid	ld be	et a ation)
					╀	-	_	\$500,001 - \$1,000,000		· he	ĕ ca ÷u =	္ နည္း အေ	SS
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		<u> </u>		-	╁			\$5,000,001 = \$25,000,000		olel)	", ≓ ÿ or	돌 전 역	
					╂			Ψ23,000,001 — ψ00,000,000) by	orting year generated	ther rep	
					-			Over \$30,000,000		ž	rate	et ha	
				1	┢			Spouse/DC Asset over \$1,000,000* ■ NONE	٠,	-			
				<u> </u>	-	-	×	NONE DIVIDENDS		vested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	IRAs), you may check the "Tax- Deferred" column. Dividends, inter- est, and capital gains, even if rein-	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) plans or	
				-		-		RENT			ned y	mer you s or ne (-
				 	×	-	_	INTEREST	-	급유		that	Ϋ́
				 	+	 	×	CAPITAL GAINS		3 5 2	may	all columns ant account no choos of that gene (such as	Type of Inco
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				 				TAX-DEFERRED		47	s, eck	spec fire ta	on (
	& &	<u>φ</u> φ	in C	<u> </u>	╁	₽				if the asset during the	en i	s that apply For nts that do not se specific invest- erate tax-deferred 401(k) plans or	me
	See Schedule IX	See Schedule IX	Income			Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		g ass	inte	nveg	
	×	ㅈ		<u> </u>	-	Š		None –	4				
		l	×	<u> </u>	-			#4 #000		* This assets		appr Nor Per Per Per Per Per Per Per Per Per Pe	
				 	╂	-		\$1 - \$200 = \$201 - \$1,000 =	dependent cillia	8 8	cap fisci	For assets for which Deferred" in Block C, "None" column. For all of the category of incorpopriate box below.	
-			-	 	 	-		\$1,001 - \$2,500	┨┋	column is for held solely	ital . lose	ets Fin Fin Solun Sory	≥
			ļ	.	╁		×	\$2,501 - \$5,000	- }	SS TE	gain dax	o e for	₽
		ļ		 	×	-	-	\$5,001 - \$15,000 \leq	\dashv	s for	s,e	whi or a inc	E F
			<u> </u>	 	t^	-		\$15,001 - \$50,000 <u>\leq</u>	-	Ş. Ş.	con o	× ŏm €.C.S Tomace y	unt of Ir
		×	 	 	1	-	_	\$50,001 - \$100,000	1	yor.	r ge	her by	ਰ
	×	·			T	×	-	\$100,001 - \$1,000,000 ×	1	income generated by your spouse	and capital gains, even if reinvested be disclosed as income. Check "ho income was earned or generated.	che may asse 'ch	Amount of Income
					t			\$1,000,001 - \$5,000,000 ×	1	nera spor	ted * tec	cker che eckii eckii	Ō
					T			Over \$5,000,000 ≚	7		and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income 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,	
		<u> </u>						Spouse/DC Income over \$1,000,000* ≚	1	ð À	# St	* = = = = = = = = = = = = = = = = = = =	
			S				S (partial)		If only a		\$1,000 in reporting year.	asset had purchases (P), sales (S), or exchanges (E) exceeding	Transaction Indicate if the

SCHEDULE IV— TRANSACTIONS

Name Eric Alan Crawford Page 5 of 9

							Enterprises,	(which HO	Halsey Ou	Term of	SP Example:	SP DC. JT	Capital Gains — if a sa \$200, check the "capital	purchase or sale of your persincome. If only a portion of an tial sale"). See example below.	in a capital loss. Provide Exclude transactions betw	Report any purchase, s dependent child during held for investment that
							Enterprises,	(which HO	Halsey Ou	Term of s	\top	nn is for asse	ins — if a sa k the "capital	or sale of you only a portion See example to	I loss. Provide Insactions betw	purchase, s child during estment that
	ş l	- 1					Enterprises, LLC on 12-27-12)	(which HOA converged to Halsey	Halsey Outdoor Advertising (HOA) agreement	Term of sale to Mickey Seeman of	Mega Corporation Common Stock (partial sale)	This column is for assets solely neid by your spouse or dependent child. Asset Asset	Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "par- tial sale"). See example below.	in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the	Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted
					 1				nent		sale)	io.	E ess E es		or the	
			 -							×	×		SALE			Type Transa
												-	EXCHA	NGE		Type of Transaction
					 								Objects 5	it C		L
													Check B Gain Ex			
										12-27-12	10-12-12		Monthly, or Bi-weekly, if applicable	or Quarterly,	(HA/AVD/OW)	Date
												\$1 \$1	,001 <i>-</i> 5,000		Α	
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SCHEDULE V— LIABILITIES

Name Eric Alan Crawford Page 6 of

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 owed during the year. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal close of the preceding calendar year exceeded \$10,000. *This column is for liabilities held solely by your spouse or dependent child. residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, 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

			,					Am	Amount of Liability	f Liab	iity			
2			Liability		A	8	င	0	E	F G	_	-	_	7
r, S, r		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 St., Dover, DE				×						
	(Liabilitie	Liabilities of) Farmhouse Media, LLC												
	Heritage	Heritage Bank, Jonesboro, AR	Nov 2009	Commercial LOC		×								
	Heritage	Heritage Bank, Jonesboro, AR	Nov 2009	Commercial R/E				×						
	JBZ Fun	JBZ Funding Corp, Arcadia, CA	Nov 2009	Nov 2009 Commercial Personal Property		×								

SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375
N/A		

SCHEDULE V— LIABILITIES

Name Eric Alan Crawford Page 7_of_9

close of the preceding calendar year exceeded \$10,000. This column is for liabilities held solely by your spouse or dependent child 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 owed during the year. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, 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

						1	unoun	Amount of Liability	ability			
SP,		Liability Incurred		A 8	C C	. 0		ю Т	90 ED	100 T	000 —	000 –
JT,C,S	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
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main St., Dover, DE	_	_	×					_	I
Τľ	Liberty Bank of Arkansas	9-2011	9-2011 Debt Consolidation 5.6% I.R.	***************************************		×						
Ţ	US Bank	4-2012	4-2012 Mortgage on personal residence - 34 CR455, Jonesboro, AR 72404 Interest rate: 3.25%			×						
			(Previously with Wells Fargo)	······································		***************************************						
JT	Wells Fargo	1-2005	Mortgage on personal residence - 34CR455 Interest rate: 5.375%			×						
			(Refinanced with US Bank)	***************************************							.	

SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375
A/N		
 and the second s		

SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$350 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

spouse or dependent child that is totally independent of his or her relationship to you. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a

SCHEDULE VIII—POSITIONS

Name Eric Alan Crawford Page 9 of 9

organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

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

ilons), and positions solely or an ilonorary natare.	rai) marero.
Position	Name of Organization
N/A	

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
10-20-11	10-20-11 Farmhouse Media, LLC	Terms of sale to Halsey Outdoor Advertising resulted in monthly payments of \$2508.57 for 10 years beginning Oct. 20, 2011
		(now superseded by lump sum payout by Mickey Seeman from assumption of note agreement between Seeman and Halsey Enterprises, LLC)
9-30-11	9-30-11 Halsey Outdoor Advertising	Monthly payments of \$7525.71 received from 9-30-11 - sale of membership interest in Farmhouse LLC
12-27-12	12-27-12 Mickey Seeman	Lump sum payout of \$114,000 from assumption of note obligation pursuant to agreement between Seeman and Haisey Enterprises, LLC