<u> </u>	ſ		mood you make my	sociation and miscontinuous contractions and an arrangement of the second secon
	pendent child Yes	"unearned" income, transactions, or liabilities of a spouse or depunless you have first consulted with the Committee on Ethics.	nearned" income, less vou have firs	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 "ves" unless you have first consulted with the Committee on Ethics.
N ₀	t be Yes	and certain other "excepted trusts" need not pouse, or a dependent child?	nmittee on Ethics efiting you, your s	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?
SNO	EACH OF THESE QUESTIONS	- ANSWER	ST INFORM	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	lule attached for each "Yes" response.	sched	ed and the appropriate	Each question in this part must be answered
8	5,000 from Yes 🔀	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.	No No	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes If yes, complete and attach Schedule III.
ĭ ₹	ingement Yes	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	š	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 if yes, complete and attach Schedule II.
S D	two years? Yes	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.	\$	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 If yes, complete and attach Schedule I.
		QUESTIONS	1 OF THESE	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS
			·	In all sections, please type or print clearly in blue or black ink.
be assessed al who files e.	A \$200 penalty shall be against any individual more than 30 days late.	MAY 20 Check if Amendment	Date of Election:	Filer Candidate for the State: & B. House of Representatives District: D3. Status New officer or Employing Office:
<u>'</u>	(Office Use Only)			
E CLERK RESENTATIVES	U.S. HOUSE OF REPRESENTATIVES	Daytime Telephone:	Daytime 1	Name CHARLES CHIP EDWARD FLANDERAN
ISLATIVE RESOURCE CENTER	LEGISLATIVE RESOURCE CENTER 2014 MAY 21 PM 1:37	FORM B For use by candidates and new employees		UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, איניאל און איניין
2014	MAY .			

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

	Name
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	FLANEGAN

Page 3 of 6

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

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	irement programs, and benefits re	eceived under the Social S	Security Act.
Source (include date of receipt for honoraria)	Type	Amount	unt
Cource (include date of tecept to florioralia)	- 400	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
	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
JONRSDORD RANTAL CENTER	SALARY	17,000	1025 ha
JONESBORO RENTAL CENTER	SPOUSE SALARY	rŏ/&	N/A
Jut Delwir	Cooker Business	<u>で</u>	n) /A
	•		

Bankof Mouth &A	Sp Heritage BANK	HEWITAGE BANK	JT 1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP Mega Corp. Stock	bexcube: rour 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 booklet.	location in Block A.	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	For all IIAAs 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 property," and the city and state.	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.	BLOCK A Asset and/or Income Source
*	*	*	×	Indefinite	X	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 Over \$50,000,000 Spouse/DC Asset over \$1,000,000*		B C D E F G H	be "None." *This column is for assets solely held by your spouse or dependent child.	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.	BLOCK B Value of Asset
~	*	×	×	Royalbes	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income	ne)		If reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	plans or IRAs), you may check the "Tax-Deferred" column. Dividends, Interest, and capital gains, even	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)	BLOCK C Type of Income
*	*	*		X	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$15,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$100,001 - \$5,000,000 Spouse/DC Income over \$1,000,000* None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$15,001 - \$15,000 \$15,001 - \$1,000,000 \$100,001 - \$1,000,000 \$1,000,001 - \$1,000,000 Spouse/DC Income over \$1,000,000*		Current Year Preceding Year	S		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	BLOCK D Amount of Income

SCHEDULE II—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed) Name (HID) FLANKSON

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Name (HARLIES FLANIEGEN)

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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 reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furnitively. 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. 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 sib-

		Date		>			-	-[]	<u>" </u>		<u> </u>			*
J R,	Creditor	Liability Incurred mo/year	Type of Liability	\$10,001 \$15,000	\$15,001— \$50,000	\$50,001 \$100,000 5	\$100,001— \$250,000 C \$250,001 — _	\$500,000 F \$500,001— _	\$1,000,000	\$5,000,000 E	\$25,000,000	\$50,000,000 TO	\$50,000,000 Spouse/DC	Liability over 7 \$1,000,000
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE						,					
										***			· · · · · · · · · · · · · · · · · · ·	
									<u> </u>					
													:	,

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

The production colors of all trottoral stratages.	AND V.
Position	Name of Organization
DWNER, Phopietor	JOHNESBORO REUTAL CENTER
1 6	

SCHEDULE V — AGREEMENTS

Name CHARIES FLANEGAM

Page 6 or 6

Date	Parties To	Terms of Agreement

SCHEDULE VI — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship

recognized by law. Do not repeat information listed on ocheque i.	
Source (Name and Address)	Brief Description of Duties
Example: Dop Jones & Smith, Hometown, Homestate	Accounting services
James Watson, Ringadale, No	Equipment Reutal
KLLM, mounow, Ha	Equipment Reptol
Robert Turner, "Me Donorwal HA	Equipment Riemfol
Forest LAWN MEMORIAI	Equipment RENTRA
crapasoff I phonomally universe	Equarmet Revotal
Alternative Revial	Equip must Rest Al