			MAY 12 CUM
UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	For New Members, Ca	FORM B For New Members, Candidates, and New Employees	TO THE MAY 20 PM 12: 01
Name: Raymond Heal Notherwood	Wellerwood Daytime Telephone		OFFICE OF THE CLERK
New Member of or Candidate for State: F1 U.S. House of Representatives District: 19 Candidates – Date of Election: Tuntum	bu 14	Check if Amendment	(Office Use Only)
STATUS New Officer or Employee Employing Office:		Period Covered: January 12014 to 1144 157 2014	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	F THESE QUESTION	NS	
A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Make more than \$200 in unearned income from any reportable asset during the reporting period?	No U	E. Did you hold any reportable positions durin or in the current calendar year up through the	during the reporting period Yes X No No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes reporting period?	8	F. Do you have any reportable agreements or arrangements with an outside entity?	r arrangements with Yes No
D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	No .	J. Did you receive compensation of more than source in the current year and two prior years?	than \$5,000 from a single Yes No No
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER " THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED	RESPONDING SCHED		'ES" TO COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>BOTH</u> OF THESE QUESTIONS	TINFORMATION - A	NSWER <u>BOTH</u> OF THESE	E QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed this report details of such a trust that benefits you, your spouse, or dependent child?	on Ethics and certain other "exi ld?		Have you excluded from Yes No No
EXEMPTION - Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or dependent child be tests for exemption? Do not answer 'yes' unless you have first consulted with the Committee on Ethics.	income, transactions, or liabiliti e Committee on Ethics.		cause they meet all three Yes No 🔀

SCHEDULE A - ASSETS & "UNEARNED INCOME"

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د على وكا	₹.,	l.	BB+T account	Har Russ Room, IT	ABC Hedge Fund	Examples:	SP, BF Legg Corp Stock BF	For bank and other cash accounts, total the amount in all interest-bening accounts. If the total is over \$5,000, list every limancial institution where there is more than \$1,000 in riverest bening accounts. For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a 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 bornes and vacation homes (unless there was rental income during the reporting period), and any financial income during the reporting period), and any financial income during the reporting period, and envy financial income a privately-finated fund that is an Excepted Investment Fund, please check the "EIF" box. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (CC), or infully held with anyone (JT), in the optional column on the far left.	401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Identify (a) each asset hold for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in "unearned innonne during the year. Provide complete names of stocks and mutual funds (do not use only tacker symbols).	Assets and/or Income Sources	BLOCK A
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SCHEDULE C - EARNED INCOME

Name Raymond Heath Page_ 6 <u>°</u>

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's 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.

INCOME LIMITS and PROHIBITED INCOME: The 2013 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. It is unchanged in 2014. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

2017. Ili dudiloti, cetali fi pes di licolte (licolte) individia, di colora i pes, dita popincina di processorial servica inventity a indevidip iciandicini	Cappoint actained manager		Amount
Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	30	3 500
Examples: State of Maryland	Salary Snoute Speech	\$20,000 \$0	\$78,000 \$1 000
L	Spouse Salary	NA	NA
Disper Cher Sene (14)	Spouse Peuson	\$3,200	00t.tg
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SCHEDULE D - LIABILITIES

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Nollawad	
Lagger L	

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New 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 you rent it out or are ammber); loans secured by authoribles, socusehold furniture, or appliances, liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

Ехаприю	SP, DC, JT			exceeded \$10,000.
Example First Bank of Wilmington, DE	Creditor			, out. Column K is for liabilities neid solely by your spouse or dependent child.
5,98	Date Liability Incurred MO/YR			ry by your spous
Mortgage on Rental Property, Dover, DE	Type of Liability			e or dependent child.
	\$10,001- \$15,000	>		
	\$15,001- \$50,000	8		
	\$50,001- \$100,000	c		
×	\$100,001- \$250,000	0	A	
	\$250,001- \$500,000	m	moun	
χ	\$500,001- \$1,000,000	F	Amount of Liability	
	\$1,000,001- \$5,000,000	G	ability	
	\$5,000,001- \$25,000,000	Ξ		
	\$25,000,001- \$50,000,000	-		
	Over \$50,000,000	د		

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions listed in Schedule C; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization
Member	Flying BS, UC