<b>₹</b>	hild Yes	dependent ch	income, transactions, or liabilities of a spouse or dependent child have first consulted with the Committee on Ethics.	" income, tranu have first oc	r assets, "unearned" wer "yes" unless you	<b>EXEMPTION</b> —Have you excluded from this report any other assets, "unearned" income, transactions, or liab because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the	<u></u>
N <sub>o</sub>	Yes 🔲	not be	nd certain other "excepted trusts" need use, or a dependent child?	on Ethics an	d by the Committee a trust benefiting y	<b>TRUSTS</b> —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?	
IS	EACH OF THESE QUESTIONS	OF THE	TION — ANSWER EACH	NFORMA	OR TRUST INFORMATION	EXCLUSION OF SPOUSE, DEPENDENT, OR	l m
•	"Yes" response.	r each "Ye	appropriate schedule attached for each	the	answered and	Each question in this part must be	
S D	Yes	an \$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.		Yes No	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.	
<b>№</b>	Yes	arrangement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.		Yes No	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.	
<u>₹</u>	ate Yes	r before the dat prior 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.		Yes No	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.	
			QUESTIONS	THESE (	EACH OF	PRELIMINARY INFORMATION — ANSWER	l 70
	more than 30 days late.	more th			Mice:		
assessed who files	A <i>\$200 penalty</i> shall be a against any individual w	A \$200 against	L 6, 20/2 Check if Amendment	Date of Election Ab I	HIED N	Filer Candidate for the State: 444  House of Representatives District: 2  Status	
2012 MAY 23 PH 1: 2  **Click Only)************************************	LEGISLATIVO  2012 MAY  0.5 1-0	C.	Telephone	Daytime Tel		Name: RAYMOND G. BOLAND	
. 1 of 6	MAY 15 201290-1 of 6		FORM B For use by candidates and new employees	For us	TIVES	FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2012 - MAY 15, 20	

## SCHEDULE I -- EARNED INCOME (INCLUDING HONORARIA)

Name PRYMOND G. BOCAND Pag

Page 2 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.

Tables military buy (such as reasonal duals of resource buy), reasonations	Š	Amount	Amount
Source (include date of receipt for honoraria)	Type	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
WISCONSIN RETIREMENT SYSTEM	LETINEMENT PAY	\$13,500	¥38,752
			*62, 257
ARE			4 7,600
	MA WITHDILAWAL		\$ 6,000
-			

	MACKS FAMUS DAMEGA	LARGE CAP VALUE RUS	BEAN SMALL CAP GALWIH	LINGES THOUGHTHINGS IN	MULTIMANASER COME BOND		DC, Examples: Simon & Schuster	SP, SP Mega Corp. Stock	ness, 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 III requirements, please refer to the instruction booklet.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the busi-	account and its value at the end of the reporting period.  For rental or other real property held for investment, provide a complete address.	BLOCK A  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 which generated more than \$200 in "unearned" income during the year.  Provide complete names of stocks and mutual funds (do not use ticker symbols).  For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the
×	×	×	×	×	×	×	Indefinite	×	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		A B C D E F G H I J K L	BLOCK B  Value of Asset 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.  If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."
						×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST  Other Type of Income (Specify: e.g., Partnership Income or Farm I	Income		Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments of that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
* - - -	₹   	メ ・ メ	× × × × × × × × × × × × × × × × × × ×	X	X		X	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$15,000 \$100,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000  None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$5,001 - \$15,000 \$5,001 - \$15,000 \$15,001 - \$15,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000		Current Year Preceding Year	Amount of Income  For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), 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 income. Check "None" if no income was earned or generated.

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name (RAYMOND 5. BOCAND Page 4 of 6

Mone   None		-				ם און	S D	
Single				Medial Sulvis	Adaile Raill Saux			BLOCK A  Asset and/or Income Source
DIVIDENDS   RENT   INTEREST   CAPITAL GAINS   EXCEPTED/BLIND TRUST					\$1 - \$1,00 \$1,001 - \$15,001 \$50,001 \$100,001 \$250,001 \$500,001 \$5,000,00 \$5,000,00 \$000,000 \$000,000 \$000,000 \$000,000 \$000,000 \$000,000 \$000,000	\$15,000 - \$50,000 - \$100,000 - \$250,000 - \$500,000 - \$1,000,000 01 - \$5,000,000 01 - \$25,000,000 001 - \$50,000,000	B C D E F G H	BLOCK B  Value of Asset
S1-\$200					DIVIDEN RENT INTERES CAPITAL EXCEPT Other Type (Specify: e	GAINS ED/BLIND TRUST De of Income .g., Partnership Income		BLOCK C  Type of Income
					\$1 - \$200 \$201 - \$1, \$1,001 - \$ \$2,501 - \$ \$5,001 - \$ \$15,001 - \$ \$100,001 - \$ \$1,000,001 - \$ \$201 - \$1, \$1,001 - \$ \$2,501 - \$	000 ≡ 2,500		BLOCK D  Amount of Income

This page may be copied if more space is required.

#### SCHEDULE III — LIABILITIES

Name PCA YMUND G BOCAND

Page 5 of 6

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 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-

	_	 	,,,,,,	ır.
				SP, DC, JT
		CHASE CARD SERVICES	Example: First Bank of Wilmington, DE	Creditor
		JAN. ZUIZ	May 1998	Date Liability Incurred mo/year
		VANIUIT REVOLVING CHANGE ACCT	Mortgage on 123 Main Street, Dover, DE	Type of Liability
-		X		\$10,001— \$15,000
				\$15,001— \$50,000 <b>D</b>
	!			\$50,001— \$100,000 O \$100,001—
	:		×	\$250,000 D S250,001
		 	_	\$500,000 m = 9
				\$250,000 m st of Liability  \$1,000,001 G \$5,000,000 G
				\$5,000,000 \$5,000,001— <b>±</b>
:				\$25,000,001— \$50,000,000
				Over \$50,000,000

#### SCHEDULE IV — POSITIONS

cer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, 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);

### SCHEDULE V — AGREEMENTS

Name PAYMOND G. BOCAND

Page 6 of 6

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

# 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 Schedule I.** 

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
BOOZ ALLEN HAMILTON HERNDON, VA. CONSULTING	CONSULTING SERVICES