<u>8</u>	Yes 🔲	pendent child	ansactions, or liabilities of a spouse or dependent child onsulted with the Committee on Ethics.	arned" income, tra	ner assets, "unea swer "yes" unles	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabi because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the
N _O	Yes 🔲	ot be	nd certain other "excepted trusts" need not be use, or a dependent child?	ittee on Ethics aring you, your spo	ed by the Comm th a trust benefit	TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted t disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child?
Ø	QUESTION)F THESE (TION — ANSWER EACH OF THESE QUESTIONS	TINFORMA	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	esponse.	each "Yes" r	ropriate schedule attached for each "Yes" response.	and the appr	e answered	Each question in this part must be answered and the appropriate sched
×	Yes 🔲	\$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.	No a si	Yes X	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.
₹ K	Yes	angement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	No Kitt	Yes 🔀	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.
N _S	Yes 🗌	efore the date r 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.	No IV.	Yes 🛛	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.
			EACH OF THESE QUESTIONS	OF THESE (PRELIMINARY INFORMATION — ANSWER
	o days late.	more man so days late			Office:	employee Employing Office:
Who files		against any]			
ssessed		A \$200 pen	Check if Amendment	Date of 6 Election:	NM	Candidate for the State:! House of Representatives District:!
	(Office Use Only)					
		^ /	lephone:	Daytime Telephone:		Name: Robert J. Blanch UR
RK	OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES	U.S. HOUS				
: 57	2014 MAY -7 PM 12: 57	2014 M	For use by candidates and new employees	For u	, 2014	Period covered: January 1, 2013 - May 2,
age 1 of CENTER	LEGISLATIVE RESOURCE CENTER	LEGISLA:			ATIVES	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT
	•					

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

	Name	Rober & J. Blanch JR
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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.

exceeding \$1,000. See examples below.			
	- c	Amount	unt
Course (include date of receipt for Horioratia)	Type	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
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
State of New Maxico - 2th Judicial District	5 1 1 2 2	82224	42, 537
Sandia Corporation	Spowe Saley	33,678	85,008
		55 55 55 55 55 55 55 55 55 55 55 55 55	
	7.7		
			0 0 0 0 0 0
			2.0

OPSIX (IRA)	ofocx (IRA)	<i>A</i> .	OF MATERIA (IRA)	JT Cisco Stock CSCO	The Ameritade (TRA)	JT 1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP, Mega Corp. Stock	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.	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental	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.	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.	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 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.	Asset and/or Income Source	BLOCK A
×	*	*	×	×	X	×	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 \$25,000,001 - \$50,000,000 Spouse/DC Asset over \$1,000,000*		A BB C C C C C C C C C C C C C C C C C C	I his column is for assets solely held by your spouse or dependent child.	it generated income, the value should be "None."	If an asset was sold during the report-	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	BLOCK B
×	×	×	×	×	×	×	Royatties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm In	ncome		during the reporting period.	Interest, and capital gains, even if reinvested, must be disclosed as Income. Check "None" if the asset generated no income	plans or IRAs), you may check the "Tax-Deferred" column. Dividends ,	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deterred income (such as 401(k))	Type of Income	вгоск с
X	×	X	×		X	×	×	×	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 - \$1,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*	V V VI VII VII XX	Current Year		* This column is for income derive spouse or dependent child.	income. Che		Amount of Income	вгоск р
X	<i>x</i>	X	*	X	×	×	×	×	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 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*		Preceding Year		This column is for income derived from assets solely held by your bouse or dependent child.	•	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	of Income	CK D

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Kobart J.

Robert J. Blanch JA

Page 2 of 2

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Spouse/DC Income over \$1,000,000*

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0000	0000	1000	1000
\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000
IONE	IONE DIVIDENDS RENT NTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST AX-DEFERRED Other Type of Income(Specify: e.g.,	Type of Income	Type of Type
	Other Type of Income(Specify, e.g.,	Partnership Income or Farm Income) Income	Partnership Income or Farm Income)

SCHEDULE III — LIABILITIES

Name RobertJB12. CJA.

Page ___ of _

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-

			54		JT DC,)	
			Capital One Bank	Example: First Bank of Wilmington, DE	Creditor		
			Dec. Soi 3	May 1998	Liability Incurred mo/year	Date	J
			Revolving Charge account	Mortgage on 123 Main Street, Dover, DE	Type of Liability		
:					\$10,001— \$15,000	•	
			X		\$15,001— \$50,000	D.	
					\$100,000 C	2	
	· · · · · ·				\$250.001		
					\$500,000 \$500,001—		Amour
	,				\$1,000,001—	-	nt of L
					\$5,000,000 \$5,000,001— _	_	Amount of Liability
					\$25,000,001	-	
						_	
					Spouse/DC Liability over 2 \$1,000,000	*	
				Capital One Bank Dec. 3013 Revolving Charge account	Cap: +a1 One Sank Cap: +a1 One	Cap:+41 One Charge Charge Count Charge Count Charge Cap:+41 One Charge Charge Count Charge C	Creditor Creditor

SCHEDULE IV — POSITIONS

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 officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise,

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 Position
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SCHEDULE V - AGREEMENTS

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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
	A/A	
,		
·		

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
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And the second s	

GPO: 2013

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