### E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? 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. D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the B. Did you, your spouse, or your dependent child purchase, sell, or 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 that benefits you, your spouse, or dependent child? IPD – Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance. exchange any securities or reportable real estate in a transaction PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS Name: IPO, EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS exceeding \$1,000 during the reporting period? 2013 FINANCIAL DISCLOSURE STATEMENT UNITED STATES HOUSE OF REPRESENTATIVES reporting period? REPORT TYPE FILER STATUS Make more than \$200 in unearned income from any reportable a. Own any reportable asset that was worth more than \$1,000 at the Did you, your spouse, or your dependent child: end of the reporting period? or asset during the reporting period? U.S. House of Representatives Member of or Candidate for 2013 Annual (Due: May 15, 2014) District: State Yes Yes Yes Yes Daytime Telephone: Lat-225-4676 Amendment ₹ 8 S O For Use by Members, Officers, and Employees X X H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$350 in value from a single source during the reporting period? G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$350 in value from a single source during the reporting period? F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the year up through the date of filing? Form A Employee Officer or **Employing Office** Termination Date U.S. HOUSE OF REPRESENTATIVES LEGISLATIVE RESOURCE CENTLS 2014 MAY 15 AM 10: 04 DELIVERED 1 of 5 (Office Use Only) Yes Yes Yes Yes Yes ĕes Yes 존 8 Š 8 증 중 중

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# SCHEDULE A - ASSETS & "UNEARNED INCOME"

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Page Z of S

The Rongick Ray	BY CA COMMANDER	Bank - F Ch' CO	Cato Canadasily Back C	Van. Ch. Feb C. Man	Co Pable Coply-Ru	ABC Hedge Fund X	Examples:	SP Magai Corp. Stock EEF	If you so choose, you may indicate that an asset or income source is that or your spouse (SP) or dependent child (ICL) or jointly held with anyone (JT), in the optional column on the far left.  For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	If you have a privately-traded fund that is an Excepted investment Fund, please check the 'EIF' box	Exclude: Your personal residence, including second nomes and vacation homes (unless there was rental income during the reporting period); and any filancial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	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 and other real property held for investment, provide a complete address or description, e.g., rental property," and a city and state.	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest bearing accounts.	For all IRAs and other retirement plans (such as 401(x) 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 only ticker symbols).	Identify (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting pendo, and (b) any other reportable asset or source of income that generated more than \$200 in unearmed income during the year.	BLOCK A  Asset and/or income Source
X	X	X	<b>X</b>	X	A X	×	indefinite	×	None \$1,51,000 \$1,001-\$15,000 \$15,001-\$50,000 \$50,001-\$100,000 \$100,001-\$250,000 \$250,001-\$1,000,000 \$500,001-\$5,000,000 \$5,000,001-\$5,000,000 \$5,000,001-\$5,000,000 \$5,000,001-\$50,000,000 \$550,000,001-\$50,000,000 Spouse/DC Asset over \$1					оп п п п п п п п п п п п п п п п п п п		you have no interest.	Indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, please specify the method used.  If an asset was sold during the reporting period and is included only because it generated income, the value should be "Yone."  "Column M is for asset hald by your solute or dependent child in which	BLOCK B  Value of Asset
×	X	X	X.	×	<b>X</b>	Parthership income	Reyested	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUS TAX-DEFERRED Other Type of income (Specify: e.g., Partnership		am income)					period		BLOCK C Type of Income
×	X	X	X	X				×	None \$1.4200 \$201-\$1,000 \$1,001-\$2,500 \$2,501-\$5,000 \$5,001-\$15,000 \$5,001-\$15,000 \$100,001-\$5,000,000 \$1,000,001-\$5,000,000 Cver \$5,000,000 Spouse/DC Asset with Inc.	come over \$1	,000,000*			#	ave no interest.	generaled.  *Coturn XII is for asserts held by your spouse or dependent	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, inharest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if no income was earned or	
								S(part)	P, S. S(part), or E					Leave this column blank if there are no transactions that exceeded \$1,000	an asset was sold, please indicate as follows: (S (part)).	period.	Indicate if the asset had purchases (P), sales (S), or sales (B), exceeding \$1,000 exceeding \$1,000 in the asset (B).	BLOCK E Transaction

	\$1,001.\$2,000 = \$2,501.\$1,000 = \$1,001.\$2,500		u.s. s X		- Constant C				×		Day San Care	Sind Was Assessed A	Tithey Children Teacher Teacher Teacher	J. ASSET NAME	None   None	BLOCK A BLOCK B
\$2,501.450,000 < BUDGE	\$2,501.45,000 < S5,001.815,000		×	×	¥,	×	×	<b>( )</b>	X	×		X	*		None	
	\$1,000,001 \$5,000,000   X														\$1,001-\$2,500	

# SCHEDULE C - EARNED INCOME

Name: Cory Gardner Page 4 of 5

the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.
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 a spouse, list

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 types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited.	nsated at or above the "senior staff" rate e totally prohibited.	I at or above the "senior staff" rate was \$26,955. In addition, certain y prohibited.
Source (include date of receipt for honoraria)	Туре	Amount
Keene State	Approved Teaching Fee	\$6.000
Examples: Ovil Yvar Roundable (Oct. 2) Ontario Country Seard of Education	Spouse Speech Spouse Speech	\$1,000 \$1,000 N/A
High Plains Communications, L. C. C.	Same S. L.	N/A
CĂb, LLC.	Spance Sking	NA
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## SCHEDULE D - LIABILITIES

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Page 3 of	<u> </u>

rent it out or 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 Report liabilities of over \$10,000 owed to any one creditor et any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. 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 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 reporting period exceeded \$10,000 \*Column K is for liabilities held solely by your spouse or dependent child.

								Amou	Amount of Liability	iability				
			) ) ) )		<b>&gt;</b>	60	c	æ	Ħ	G	I	_	Ĺ	~
00. J		Creditor	Date Liability Incurred MO/YR	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	\$1,00G,001- \$5,000,000	\$5,000,001- \$25,000,000	\$25,000,001- \$50,000,000	Over \$50,000,000	Over \$1,000,000° (Spouse/DC Liability)
	Example	First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE			×							
	Faboral	Andert Lan	11/2001	Shulant Lana	<b>~</b>	$\triangle$								
44	Ocues 1	Fiameiel	8/2ms	Home Markers - southern I			X	<b>,</b> ,	<u> </u>					
スト	Bankal	had America	2/2007	Marking of Goodsoninday		7	<u> </u>							
#	US Bas	-	3	Zas Protyge .cestone	Y									ĺ
					$\vdash$	$\vdash$	-							
2		DOCITIONS												

### SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year 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.

			Position
			Name of Organization