No	Yes 🔲	lependent child	ities of a spouse or dependent child Committee on Ethics.	EXEMPTION— Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or obscause they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics	arned" income ss you have fii	er assets, "und swer "yes" unte	report any oth	excluded from this e tests for exempti	N—Have you o	EXEMPTIO because the
No	Yes 🔲	not be	cepted trusts" need n	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?	nittee on Ethic iting you, your	d by the Com	Trusts" approve t details of suc	g "Qualified Blind ed from this repor	etails regardin ave you exclud	TRUSTS—D disclosed. H
ร์	QUESTION	EACH OF THESE QUESTIONS	ER	MATION — ANSW	T INFORI	OR TRUS	PENDENT,	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	ON OF SF	EXCLUSI
	esponse.	attached for each "Yes" response.		Each question in this part must be answered and the appropriate schedule	d and the a	e answere	part must b	estion in this	Each qu	
No ×	Yes 🔲	\$5,000 from	pensation of more than o prior years? tach Schedule VI.	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.	S □	Yes X	e any report- ng period?	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.	our spouse, or a nore than \$10,00 the and attach S	Iff. Did you, yo able liability (no if yes, comple
No X	Yes	rrangement	ortable agreement or arrangement tach Schedule V.	V. Did you have any reportable with an outside entity? If yes, complete and attach		Yes X	ive "unearned" or hold any d of the period?	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.	ur spouse, or a c e than \$200 in th et worth more th ite and attach S	II. Did you, yo income of mor reportable ass
№	Yes X	before the date or two years?	ortable positions on or before the date lendar year or in the prior two years? tach Schedule IV.	IV. Did you hold any reportabl of filing in the current calendar if yes, complete and attach to	N _S	Yes X	g., salaries or ting period?	 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 1. 	our spouse have or more from any te and attach S	l. Did you or y fees) of \$200 c
				ANSWER EACH OF THESE QUESTIONS	OF THES	ER EACH	e or black ink. — ANSWI	In all sections, please type or print clearly in blue or black ink. PRELIMINARY INFORMATION — ANSW	JARY INFO	In all sections PRELIMIN
		more than 30 days late.				Office:	Employing Office	ficer or ree	New officer or employee	Status
assessed		A \$200 pena	Check if Amendment	Date of Election: NOVEMBER 4, 2014	Date of Election:	ALABAMA	State:_AI	Candidate for the House of Representatives	X Candid House	Filer
•	(Office Use Only)	() ()		ļ						
/ES	EPRESENTATIV	S. HOUSE OF REPRESENTATIVES		Daytime Telephone:	Daytime)KE	WADE BROOKE	WILLIAM	Name: W
ER 1 of 11	EGISLATIVE RESOURCE CENT 2014 MAY 20 AN 11: 49	LEGISLATIVE RESOURCE CENTER 1 of 11 2014 MAY 20 AN II: 49		FORM B For use by candidates and new employees		ATIVES	PRESENTA EMENT APRIL 1	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2013 - APRIL 15, 2	UNITED STATES HOUSE OF FINANCIAL DISCLOSURE STATE Period covered: January 1, 2013	UNITED S FINANCIA Period cov

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

RIA) Name WILLIAM WADE BROOKE Page 2_ of 11

HARBERT MANAGEMENT CORPORATION Examples: 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. Harris County, Texas Public Schools XYZ Trade Association, Chicago, IL (Rec'd December 2) First Bank & Trust, Houston, TX XYZ Corporation, Houston, TX Source (include date of receipt for honoraria) Salary Director's Fee Spouse Salary Honorarium SALARY Type **Current Year to Filing** \$85,802 \$6,300 \$400 ¥ Amount Preceding Year \$294,177 \$28,450 \$1,000 \$3,200

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					SI		DC, Examples:		ing 3s, uou or less in personal checking or savings accounts; and any financial interest in, or income derived from, a federal refirement 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 income during the reporting period); any deposits total-	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 reat 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	
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\sqcup						 			\$5,001 - \$15,000				This column is for income derived from assets solely held by your spouse or dependent child.	Income. Check "None" if no income was earned or generated.	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		
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HAMC INVESTORS, LIC SERIES 8 [Trust]*
Birmingham, AL

Harbinger Capital Partners Special Situations Fund [Trust]*
Birmingham, AL

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*Partnership investments, 2014 income not yet determined

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SCHEDULE III — LIABILITIES

Name WILLIAM WADE BROOKE Page 9 of 11

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 sibling 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. 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

Creditor Example: First Bank of Wilmington, DE THORNTON FAMILY, LLC	Date Liability Incurred mo/year May 1998 12/09	Liability Incurred mo/year May 1998 Mortgage on 123 Main Street, Dover, DE 12/09 SELLER LOAN ON LAND	DVer, DE	\$10,001— \$15,000 > \$15,001— \$50,000 CD	\$10,001— \$15,000 > \$15,001— \$50,000	\$10,001— \$15,000 > \$15,001— \$50,000 CD
Creditor Example: First Bank of Wilmington, DE	Liability Incurred mo/year May 1998	Type of Liability Mortgage on 123 Main Street, Dover, DE	\$15,000 \$15,001— \$50,000	\$100,000	× \$250,000	\$250,000 F \$250,001— \$500,000 F
THORNTON FAMILY 1.T.C	May 1998	Mortgage on 123 Main Street, Dover, DE				
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SCHEDULE IV - POSITIONS

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, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

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);

Position	Name of Organization
SEE ATTACHED	

Use additional sheets if more space is required.

Name: William W. Brooke 10 of 11

Zeiger Foundation	Trustee
UAB Campaign Executive Committee	Director
Southeast Bio	Director
N Contact, Inc.	Director
McWane Center Endowment	Director
Maxcyte Corporation	Director
Leadership Alabama	Director
Innovative Biosensors, Inc.	Director
Innovation Depot	Director
Harbert Realty Services, Inc.	Chairman
Harbert Management Corporation	Executive Vice President & Director
Economic Development Partnership of Alabama	Director
Cypress Cutoff, LLC	Manager
Culverhouse College of Business Commerce Board of Visitors	Director
Church Resource Ministries	Director
Business Education Alliance	Director
Business Council of Alabama, Inc.	Chairman
tion	President
Aldagen Holdings, LLC	Manager
Aldagen Corporation	Director
Alabama Symphony Endowment	Director
Alabama Symphonic Association	Chairman
Alabama Innovation Council Study Commission	Chairman
Alabama Entrepreneurship Institute	Director
Alabama Business Hall of Fame	Director
Name of Organization	Position

SCHEDULE V - AGREEMENTS

Name WILLIAM WADE BROOKE

Page 11 of 11

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
	NONE	

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
NONE	

GPO: 2013

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