8 ⊠	Yes	spendent child	ities of a spouse or de committee on Ethics.	"unearned" income, transactions, or liabilities of a spouse or unless you have first consulted with the Committee on Ethics	arned" income ss you have fir	ner assets, "une swer "yes" unle	m this report any oth xemption? Do not an	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.	EXEMPTION because they
₹ ∑	eg	ot be	ccepted trusts" need nont child?	s and certain other "ex spouse, or a dependen	nittee on Ethics	ed by the Comr h a trust benefi	Blind Trusts" approve report details of suc	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?	TRUSTS-De disclosed. Hav
<u>w</u>	QUESTION	OF THESE	SWER EACH OF THESE QUESTIONS	MATION - ANS	T INFORM	OR TRUS	DEPENDENT	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANS	EXCLUSIO
	esponse.	each "Yes" r	tule attached for each "Yes" response	ppropriate sched	d and the a	e answered	this part must b	Each question in this part must be answered and the appropriate schedu	
8 ⊠	Yes 🔲	\$5,000 from	npensation of more than \$5,000 from vo prior years? ttach Schedule VI.	VI. Did you receive comps a single source in the two If yes, complete and atta	§	Yes 🔀	reporting 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.	III. Did you, you able liability (mo if yes, complete
8 <u>></u>	Yes	rangement	Did you have any reportable agreement or arrangement th an outside entity? yes, complete and attach Schedule V.	V. Did you have any reportable agreemer with an outside entity? If yes, complete and attach Schedule V	₹	Yes	nid receive "unearned" beriod or hold any the end 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.	II. Did you, you income of more reportable asser
<u>8</u>	Yes	before the date or two years?	N. 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.	IV. Did you hold any rep of filing in the current cal if yes, complete and at	₹	Yes X	ome (e.g., salaries or e reporting period?	 Did you or your spouse have "earned" income (e.g., salaries or tees) of \$200 or more from any source in the reporting period? Yes, complete and attach Schedule I. 	I. Did you or yo tees) of \$200 or If yes, complet
			-	EACH OF THESE QUESTIONS	OF THESI		ION — ANSWER	PRELIMINARY INFORMATION	PRELIMIN
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who files	· — a	against any individual more than 30 days late	Amendment	<u>. 11.4.14</u>	Election:	: 2-\ ying Office:	District Emplo	House of Representatives New officer or employee	Filer Status
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SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name RENTERIA

Page 2 of S

exceeding \$1,000. See examples below.	more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list	List the source, type, and amount of earned income from any source (other than the filer's current employ	
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	only the source for other spouse earned income	syment by the U.S. Government) totalling \$200 or	
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Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

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Source (include date of receipt for honoraria)	ation, Houston	Trust, Housto	ssociation, C	Harris County, Texas Public Schools				:						:		
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paythex, yolk,	_	THRIPT	SCHATE	BANK OF			DC Examples:		income during the reporting \$5,000 or less in accounts; and any fit derived from, a federal the Thrift Savings Plan. If you so choose, you income source is that to dent child (DC) or is joil in the optional column of the optional	clude: Your pa	For an ownership in that is not publicly that is not publicly ness, the nature concation in Block A.	count that exce count that exce r rental or othe wide a comple ntal property," a	(do not use ticker symbols). For all IRAs and other retire	ntify (a) each a income with a i end of the roortable asset cortable asset cortable complete	Asset ar	
yolk, American Public	ING, AOIK, VANGUARED INST.	savings run, 401k	CREDIT UNION	America, Savivies	Bank of America, catacking	1st Bank of Paducah, KY accounts	Simon & Schuster	SP Mega Corp. Stock	income during the reporting period), any deposits total- ing \$5,000 or less in personal checking or sevings accounts; and any financial laterest 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 depen- dent child (ICC) 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 bones and vacation homes (unless there was restal	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.	account that exceeds the reporting thresholds. 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.	(do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the	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	Asset and/or Income Source	BLOCK A
ļ									None		>	*This column is for assets solely he by your spouse or dependent child.	ing year and is included only because it generated income, the value should be "None"	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 report		
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\preceq	×	X			ļ	1_	<u> </u>	<u> </u>	None		-		This column is for income derived from assets solely held by your louse 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 income. Check "None" if no income was earned or generated.	Amount of Income	BLOCK D
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

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SCHEDULE III - LIABILITIES

Name RENTERIA-

Page Y of S

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-

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٦ <u>,</u> 8	Creditor	Incurred mo/year	Type of Liability	\$10,001 \$15,000	\$15,001— \$50,000	\$50,001— \$100,000	\$100,001— \$250,000	\$250,001	\$500,000		\$500,000 \$500,001—	\$500,000 \$500,001— \$1,000,000 \$1,000,001—	\$500,000 \$500,001— \$1,000,000 \$1,000,001— \$5,000,000	\$500,000 \$500,001— \$1,000,000 \$1,000,001— \$5,000,001— \$25,000,001— \$25,000,001—
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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, director, 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.

Exclude: Positions listed on Schedule 1; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization); and positions solely of an honorary nature

ally positions solely of all horlorary hardre.	ature.
 Position	Name of Organization
BORRD MEMBER	HAAS PUBLIC SERVICE CENTER, STANFORD WIVERSITY, STANFORD, A