C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the A. Did you, your spouse, or your dependent child: **UNITED STATES HOUSE OF REPRESENTATIVES** PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS Name: FINANCIAL DISCLOSURE STATEMENT FILER STATUS end of the reporting period? or b. Make more than \$200 in unearned income from any reportable asset during the reporting period? a. Own any reportable asset that was worth more than \$1,000 at the ANDREW L. WARREN \times U.S. House of Representatives **Employing Office:** New Officer or Employee Candidates - Date of Election: New Member of or Candidate for State: District: Yes Yes <u>×</u> × × Daytime Telephone: For New Members, Candidates, and New Employees <u>×</u> F. Did you have any reportable agreements or arrangements with an outside entity during the reporting period or in the current calendar year up through the date of filing? E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? FORM B Period Covered: January 1, 2005 to 146. 2015 Amendment Check if A \$200 penalty shall be assessed against any individual who files more than 30 days late. TEGISLATIVE RESOURCE CENTO 2015 AUG 10 PM 12: 12 AU6 03 2015 Page 1 of 6 Office Use Only) Yes Yes <u>₹</u> ٥ ٥

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?

Yes

J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?

Ύes

tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics **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 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 your dependent child? Yes Yes Š ö 凶

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Page_

잋

0

	AC, E	Commy Bucks Passed	PM. PENSEEN GRE	ABC Hedge Fund X	Examples: Simon & Schuster	SP, EFF. DC, Mega Corp Stock	For bank and other cash accounts, total the amount in all internst-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 ental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state. 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. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); and any financial income during the reporting period); and any financial interest in, or income derived from, a fedderal reternent program, including the Thrift Savings Plan. If you have a privately-traded fund that is an Excepted Investment Fund, please check the "EIF" box. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), 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.	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 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 period, and (b) any other reportable asset or source of income which generated more than \$200 in "uneamed" income during the year.	Assets and/or Income Sources	BLOCK A
	X	×	×	×	Indefinite	*	None > \$1-\$1,000 ∞ \$1,001-\$15,000 ○ \$15,001-\$50-000 □ \$50,001-\$100,000 m \$100,001-\$250,000 ¬ \$250,001-\$100,000 □ \$500,001-\$1,000,000 □ \$1,000,001-\$5,000,000 □ \$25,000,001-\$50,000,000 □ \$25,000,001-\$50,000,000 □ \$25,000,001-\$50,000,000 □ \$25,000,001-\$50,000,000 □ \$pouse/DC Asset over \$1,000,000* □		"Column M is for assets held by your spouse or dependent child in which 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 "None."	Value of Asset	BLOCKB
				Partnership Income	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)			f Check all columns that apply. For accounts that generate tax-deferred income (such ass. 401(k), IRA, 529 accounts), you may check the "Tax-Deferred" column. Dividends, inferest, and capital gains, even if reinvested, must be disclosed as income for assets.	Type of Income	BLOCK C
				×	×	×	None			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 for assets held in taxable accounts. Check 'None" if no income was earned or generated. "Column XII is for assets held by your spouse or dependent child in which you have no interest.	Amount of Income	ВГОСК D

SCHEDULE A – ASSETS & "UNEARNED INCOME"	
Name:	
ANDOEN	
7.	
WAREN	
Page	
Page 3 of	
6	

															78.4						_
										(SANSE (MI)	VILLE FREW AMERICA	(SPOWER RETURE)	DEA VALUE BURIDED	WEUS FARGO (SWAG)	ASSET NAME EF					Assets and/or income Sources	BLOCK A
						-						+				None	>	>			_
					İ	╆	╁						+-	+		\$1-\$1,000		-	ĺ		
		_		 		╁	1			┼		+	-	*		\$1,001-\$15,000		,	ł		
			<u> </u>	 	<u> </u>	-	1			 	 -		1			\$15,001-\$50,000		,	ł		
				ļ	<u> </u>	₩	-	<u> </u>		 			-			\$50,001-\$100,000		n	ł	_	
			 -	 	 -	├	1	-			 		-			\$100,001-\$250,000		n	ł	<u>a</u>	_
			<u> </u>	 		-							-						ł	<u> </u>	Q B
				-		₩	-		ļ			-	-	-		\$250,001-\$500,000			ł	Value of Asset	BLOCK B
				-		₩	ļ	-				-	-	+		\$500,001-\$1,000,000			ł	888	w
				-		<u> </u>	<u> </u>		ļ	ļ <u> </u>		-	-	1		\$1,000,001-\$5,000,000			ł	*	
						ļ	,			<u> </u>	ļ	-	ļ	↓		\$5,000,001-\$25,000,000					
					ļ	↓	ļ	ļ				 	ļ	ļ		\$25,000,001-\$50,000,000		`			
				ļ	ļ	<u> </u>				<u> </u>		ļ	ļ			Over \$50,000,000					
					<u> </u>											Spouse/DC Asset over \$1,000,000*	\$	•			_
																NONE					
] ,		ļ	ļ	Γ]						Ţ		J	DIVIDENDS			J		
																RENT			•	. 	
			ļ. —		<u> </u>	1	1			İ		†				INTEREST			1	즇	_
						-	1			 				1		CAPITAL GAINS			ł	<u>Q</u>	8
		<u> </u>			ļ	<u> </u>	ļ			_	<u> </u>	 	ļ						ł	Type of Income	BLOCK C
						Ļ		ļ								EXCEPTED/BLIND TRUST				ğ	•
										<u> </u>						TAX-DEFERRED				ĕ	
																Other Type of Income (Specify: e.g., Partnership Income or Farm Income)					
																None	-				
		Ċ														\$1-\$200	=				
																\$201-\$1,000	≡				
						1	1									\$1,001-\$2,500	Ν				
				1	T	1	1					1		ľ		\$2,501-\$5,000	<	S C			
						1							†			\$5,001-\$15,000	≤	rre			
-						T	†					T			l	\$15,001-\$50,000	≦				
					†	+						 	†			\$50,001-\$100,000	¥	Current Year			
				T		\top	 		 		<u> </u>	 				\$100,001-\$1,000,000	<u>-</u>				
					t	 		 				t	-	+		\$1,000,001-\$5,000,000	×			2	
						-	1			 		\vdash		+		Over \$5,000,000	<u>×</u>		1	ğ	
				 		+	1		\vdash		 	\vdash	+	+	\vdash	Spouse/DC Income over \$1,000,000*	<u>-</u>			Ĭ	BE
			-		-	+	+	 				\vdash	+	+		None	_		1	으	BLOCK D
	<u> </u>		-		-	-	+				-		-	+	╂─┤	\$1-\$200	_			Amount of Income	Ö
				 	-	₩	 	-	\vdash	 	 	-	-	+		\$201-\$1,000	=			ş	
					ļ	┼	1			-		-	-	+		\$1,001-\$2,500	~			•	
		ļ				₩	\vdash	-		-		+	 	+		\$2,501-\$5,000	٧	Pr	ŀ		
		 	_	-		\vdash	+-			-	 		\vdash	+			< <	Preceding Year	l		
			-	-	-	₩	1	-		 	-	-		+		\$5,001-\$15,000	-	ğ			
		<u> </u>	ļ	-	-	 	╁		-	 			 	 		\$15,001-\$50,000	≦ <	ΥB			
		ļ	_	-	-	₩	1			ļ	<u> </u>	-	-	+	_	\$50,001-\$100,000	IIIA	ear			
					<u> </u>	_	 	1					-	1		\$100,001-\$1,000,000	~		l		
		ļ		_					<u> </u>		<u> </u>	<u> </u>	ļ	<u> </u>		\$1,000,001-\$5,000,000	×		I		
			<u> </u>		$oxed{oxed}$					<u> </u>		$oxed{oxed}$		<u> </u>		Over \$5,000,000	×				
	"	Ι ີ				1					_		1		I	Spouse/DC Income over \$1,000,000*	¥				

SCHEDULE C - EARNED INCOME

Name: ANDREW L. WARREN <u>°</u> 0

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act. 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 both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2014 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. The 2015 limit is \$27,225. In addition, certain types of income (notably honoraria, director's fees, and payments for

professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

				HAMELTON TWP. SCHOOL DIST. HAMILENING		PENJEROEL COUNCIL PARIA. PR.	Ļ	Examples: State or maripating (Cod. 2)	ABC Trade Association, Baltimore, MD (July 15)	Source (iliciade date of receipt for Horioralia)	Source (include date of receipt for hoperatio)
			/	S Ruse SMACY	/	SMÆV	Spouse Salary	Spouse Speech	Honorarium	lype	Type
				849 8co 4	,	840,000.E	ÑA	\$20,000	\$0	Current Year to Filing	Am
			•	83,000		60,000, e	N/A	\$1,000	\$500	Preceding Year	Amount

SCHEDULE D - LIABILITIES

Name: AMAGEL L. WARREN	Page S of 6
g the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting	ount owed during the reporting
red by real property including mortgages on their personal residence. Exclude : Any mortgage on your personal residence	taage on your personal residence

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

				SP, DC, JT		
	Alu	CA	Example	.,		
	AN CREOTY CAROS	CHASE MORTGAGE	First Bank of Wilmington, DE	Creditor		
	Bêlew	2/04	5/98	Liability Incurred MO/YR	,	
	2, cca e	Moeth Age Langua	Mortgage on Rental Property, Dover, DE	Type of Liability		
				\$10,001- \$15,000	>	
				\$15,001- \$50,000	00	
		X		\$50,001- \$100,000	n	
			×	\$100,001- \$250,000	D	
				\$250,001- \$500,000	ш	moun
				\$500,001- \$1,000,000	п	t of Li
				\$1,000,001- \$5,000,000	G	Amount of Liability
Ī				\$5,000,001- \$25,000,000	Ŧ	
				\$25,000,001- \$50,000,000	_	
ŀ						4
				Over \$50,000,000	-	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, 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 held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

SCHEDULE F - AGREEMENTS

I terms of any agreement or arrangement that you have with respect to: future employment, a leave of absence during the period of	Nam	
to: futur	ĕ	
e employment; a le	MOREY	
eave of absence during the period o	Name: MNDEEU L. WARRY	
ਸੰ government service;	Page 6 of 6	

Identify the date, parties to, and general terms of any agreement or arrangement that you have 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 Agreement	Terms of Agreement
%	MYSELF + STATE of PA.	PENSEEN PLAN
1/95	My SELF + COUNTY of BUCKS	PRISTED PLAN
,	/ / /	

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise 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 C.

government and any illiormation considered confidential as a result of a	governitent and any information considered continental as a result of a privileged relationship recognized by faw. То нострева инфинация выстание вы
Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
PENTERDEL COUNCEL PHAN. B.	EXECUTIVE OFFERA