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UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	For New Members, Car	FORM B For New Members, Candidates, and New Employees	MAY 15 2015Page 1 of <u>Y</u>
Name: Joral Steve Mictall	Daytime Telephone:	•	2015 MAY 22 PM 1: 40
New Member of or Candidate for State: 12 Curve U.S. House of Representatives District: 2 D Candidates – Date of Election: 11-8-16	Mex/co	Check if Amendment	U.S. HOUSE OF REPRESENTATIVES (Office Use Only)
New Officer or Employee Employing Office:		Period Covered: January 1, <u>2015</u> to May 15, 2015	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	THESE QUESTION	NS	
A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Make more than \$200 in unearned income from any reportable asset during the reporting period?	No E. Dio	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	g the reporting period Yes No No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes reporting period?	No F. Dic an ou calen	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?	r arrangements with Yes No No
D. Did you, your spouse, or your dependent child have any reportable iability (more than \$10,000) at any point during the reporting period?	No J. Dic	Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	n \$5,000 from a single Yes No
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	ATTACH THE CORRESPONDING SCHEDULE IF YO	OULE IF YOU ANSWER "YES"	S" COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	INFORMATION - A	NSWER BOTH OF THESE	E QUESTIONS
TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" n this report details of such a trust that benefits you, your spouse, or your dependent child?	n Ethics and certain other "exc child?	cepted trusts" need not be disclosed. Have you excluded from	ave you excluded from Yes No No
EXEMPTION – Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	come, transactions, or liabilitie Committee on Ethics.	es of a spouse or dependent child because they meet all three	se they meet all three Yes No No

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Jerold Steve Mctall

Page 2

Rontal Hosso-Retan	Land Spinger	Ford Runger	L	Examples:	SP, DC, Mega Corp Stock EFF	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 rental 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 interest in, or income derived from, a federal retirement 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 esset or income source is that of your spouse (SP) or dependent child (DC), or pinitly 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 expeeds the reporting thresholds	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. Provide complete names of stocks and mutual funds (do not use only ticker symbols).	Assets and/or Income Sources	BLOCK A
*	×	X	×	Indefinite	×	None > \$1.\$1,000 to \$1,001-\$15,000 C \$15,001-\$50-000 C \$50,001-\$100,000 m \$100,001-\$250,000 T \$250,001-\$1,000,000 C \$500,001-\$1,000,000 T \$5,000,001-\$5,000,000 C \$5,000,001-\$25,000,000 C \$25,000,001-\$50,000,000 C \$5,000,001-\$50,000,000 C \$5,000,001-\$50,000,000 C \$5,000,001-\$50,000,000 C \$50,000,001-\$50,000,000 C \$50,000,001-\$50,000,000 C		indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, the 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." Column M is for assets held by your spouse or dependent child in which you have no interest.	Value of Asset	вгоск в
*			Partnership Income	Royalbes	*	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, 528 accounts), you may check the "Tax-Deferred" column. Dividents, interest, and capital gains, even if relivested, must be disclosed as income for assets held in taxable accounts. Check "None" if the asset generated no income during the reporting period.	Type of Income	BLOCK C
X			× ×	× ×	× ×	None		Its For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all assother assets indicate the category of income by checking the appropriate box below. Dividends, interest, chand 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. The "Column XII is for assets held by your spouse or dependent child in which you have no interest.	Amount of Income	BLOCK D

SCHEDULE C - EARNED INCOME

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an the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer	Page 3_ of _4	
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filer		

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					Blackstein Formand Cothe Inc	High Country Ski Romital (L.P&Jentrimis solle	Civil War Roundlable (Oct. 2) Ontario County Board of Education		Source (include date of receipt for nonoraria)		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. 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: 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.
						Salara	Spouse Speech Spouse Salary	Honorarium Salary	Туре		employment by the U.S. governing se earned income exceeding \$1, depends a penefits received under the Souncome may apply to you after you limit is \$27,225. In addition, cert staff.
					1140.00	# 264 700 ja	N/A	\$20,000	Current Year to Filing	Am	ient) totaling \$200 or more during to 200. See examples below. Sal Security Act. The 201 are on House payroll. The 201 ain types of income (notably honoral)
					6210.00	4269.00	\$1,000 N/A	\$76,000	Preceding Year	Amount	ernment) totaling \$200 or more during the reporting period. For both the filer \$1,000. See examples below. Social Security Act. Brown are on House payroll. The 2014 limit on outside earned income for certain types of income (notably honoraria, director's fees, and payments for certain types.

SCHEDULE D - LIABILITIES

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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.

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HEDI				11	Example	<u> </u>		
SCHEDULE E - POSITIONS			hater 11 m 87740	International Book	ກຸກ/ອ First Bank of Wilmington, DE	Creditor		
		`	11/13		5/98	Date Liability Incurred MO/YR		
			Mortgalio		Mortgage on Rental Property, Dover, DE	Type of Liability		
						\$10,001- \$15,000	>	
		į	X			\$15,001- \$50,000	00	
						\$50,001- \$100,000	ဂ	
					×	\$100,001- \$250,000	D	
						\$250,001- \$500,000	т	Amount of Liability
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						\$5,000,001- \$25,000,000	I	
						\$25,000,001- \$50,000,000	_	
						Over \$50,000,000	٠.	
						Over \$1,000,000* (Spouse/DC Liability)	~	

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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 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 the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years

	_	_		_	,
				Position	
				Name of Organization	John the property of the party

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CAMPAIGN NOTICE REGARDING FINANCIAL DISCLOSURE REQUIREMENT

If you have not yet raised (either through contributions or loans from yourself or others) or spent in excess of \$5,000 for your campaign, or if you have withdrawn your candidacy, please indicate your status and sign and date below.

The Honorable Karen L. Haas, Clerk

	Office of the Clerk, U.S. House of Representatives Legislative Resource Center	S. HOUS	2015 H	LEGISL/						
	135 Cannon House Office Building	E OE	X	VIIV						
	Washington, DC 20515-6601	OF THE	15 MAY 22 F	E RESO						
ndicate Your Status: Select One)	Dear Madam Clerk:	CLERK ESENTATIVE	PM 1: 40	LEGISLATIVE RESOURCE CENTE						
<u>-</u> _	This is to notify you that I have not yet raised (either through contributions o	floans	from	myself						
Over \$5,000 Threshold Not	or others) or spent in excess of \$5,000 for my campaign for the U.S. House of	f Repr	esenta	atíves.						
Exceeded	I understand that when I do raise or spend in excess of \$5,000 for my campaign, I must file a Financial									
	Disclosure Statement with the Clerk of the House of Representatives according to the deadlines									
	set out on pages 2 and 3 of the Financial Disclosure Instruction booklet, a copy of which has been									
	provided to me by the Clerk.									
	- -									
	This is to notify you that under the laws of the state of			,						
Withdrawal of Candidacy	I withdrew my candidacy for the U.S. House of Representatives on			•						
	[Note: If your Financial Disclosure Statement was due before the date on which you withdrew									
	from the race, you still must file a Financial Disclosure Statement with the Hou	ise.]								
	Name (Please Print or Type): <u>Derald Steve McFa</u> State: <u>New Mexico</u> District:	/)								
	State: New Mexico District:	3								
	Date: 5-15-15									

(THIS PAGE WILL BE MADE PUBLICLY AVAILABLE)

RETURN COMPLETED STATEMENT TO: The Clerk, U.S. House of Representa

The Clerk, U.S. House of Representatives Legislative Resource Center 135 Cannon House Office Building Washington, DC 20515-6601