E. Did you hold any reportable positions during the reporting period or in A. Did you, your spouse, or your dependent child: EXEMPTION - Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or your dependent child because they meet all this report details of such a trust that benefits you, your spouse, or dependent child? IPO – 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. IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS the current calendar year up through the date of filing? 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, exchange any securities or reportable real estate in a transaction B. Did you, your spouse, or your dependent child purchase, sell, or PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS honoraria, or pension/IRA distributions) of \$200 or more during the exceeding \$1,000 during the reporting period? Name: LEON (UNN) ACTON WE THOREWAY Daytime Telephone 2014 FINANCIAL DISCLOSURE STATEMENT UNITED STATES HOUSE OF REPRESENTATIVES three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics 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 reporting period? REPORT TYPE FILER STATUS a. Own any reportable asset that was worth more than \$1,000 at the Make more than \$200 in unearned income from any reportable end of the reporting period? or asset during the reporting period? U.S. House of Representatives 2015 Annual (Due: May 16, 2016) Member of or Candidate for District: State: 2 Yes × Yes Yes Yes X \leq Armendment 몽 ₹ Z Š Š For Use by Members, Officers, and Employees X $\overline{\times}$ F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing? 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 reportable travel or reimbursements for travel totaling more than \$375 in value from a single source during the reporting period? H. Did you, your spouse, or your dependent child receive any G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$375 in value from a single reporting period? source during the reporting period? Form A Employee Officer or Employing Office: Termination Date of Termination: 017 JAN 26 AM 9: 44 A3209 penalty shall be assessed against any individual who files more than 30 days late. MAND DELIVERED Yes Yes Yes Yes és Yes ¥85 × ż 충 Z 중 중 č ş

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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Ϋ́		5			1			\top	OO, I have been an owner of the sale of th	the account that exceeds the reporting thresholds. For bank and other cash accounts, total the amount in all interest bearing accounts.	Provide complete names of stocks and mutual funds (do not use only licker symbols). For all IRAs and other retirement plans (such as For all IRAs and other retirement plans (such as for each asset held in the plans) provide the value for each asset held in the plans of the pla	klonity (a) each asset held for investment or production of income and with a fair market value exceeding \$1.00 at the and of the reporting pendighed and cloth any other reportable asset or source oil income that generated more than \$200 in "unearned income during the year."	≿	
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İ									that exceeded \$1,000.	Leave this column blank if there are	period. If only a portion of an asset was sold please indicate as follows: (S (part)).	Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,0 in the reporting	Transaction	R OCK F
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Use additional sheets if more space is required.

SCHEDULE C - EARNED INCOME

Name: LEDIL (YNN) PETON Page 3 of 5

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 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: The 2014 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited.

	Source (include date of receipt for honoraria)	Type	Amount
1	Koeno State State of Meryland	Approved Teaching Fee	\$6,000
Examples.	CNI Wer Roundtable (Cct. 2) Ontario County Board of Education	Spouse Spech	\$1,000 NVA
Share	STATE of GEORGIA REMANNENT PLAN	RETIREMENT	アンスタス

SCHEDULE D - LIABILITIES

LEON (4) ACTON WESTMAKERALD Page 4 of 5

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. 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		77			
		Example	8 ONE			
	Creditor	First Bank of Wilmington, DK:	BONE of AMERICA 3.06			
Date	Liability Incurred MO/YR	5/98				
	Type of Liability	Mortgage on Rental Property, Dover, DE	MORTEAGE ON	PERSONA ARSIDERA		
>	\$10,001- \$15,000			1		
œ	\$15,001- \$50,000					
G	\$50,001- \$100,000					
	\$100,001- \$250,000	×				
m	\$250,001- \$500,000			X		
E F G	\$500,001- \$1,000,000					
e 1	\$1,000,001- \$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 Listbility)	1				

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

held in any religious, social, fraternal, or political entities (sur	held in any religious, social, fraternal, or political entities (such as political parties and campeign organizations); and positions solely of an honorary nature.
Position	Name of Organization
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SCHEDULE F - AGREEMENTS

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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
1204	HORDED TO STATE YOUR	BETIAGNENT PLAN

SCHEDULE G - GIFTS

Report the source (including name, city, and state), a brief description, and the value of all gifts totaling more than \$350 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the

Source	Description	Value
Exemple: Mr. Joseph Smith, Arlington, VA	Silver Platter (determination of personal friendship received from the Ethics Committee)	\$400
NIA		