E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? Name: MICHBL RIGHT TOLDO 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, EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? Did you, your spouse, or your dependent child purchase, sell, or 2013 FINANCIAL DISCLOSURE STATEMENT **UNITED STATES HOUSE OF REPRESENTATIVES** EXEMPTION – Have you excluded from this report any other assets, "uneamed" 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. 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 dependent child? C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the exceeding \$1,000 during the reporting period? exchange any securities or reportable real estate in a transaction A. Did you, your spouse, or your dependent child: PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS REPORT TYPE FILER STATUS b. Make more than \$200 in unearned income from any reportable a. Own any reportable asset that was worth more than \$1,000 at the asset during the reporting period? end of the reporting period? or U.S. House of Representatives 2013 Annual (Due: May 15, 2014) Member of or Candidate for District: State: Yes ₹ |<u>|</u> N N N Y95 No. Yes No Daytime Telephone: Amendment Ž 20 Š For Use by Members, Officers, and Employees 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? Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period? G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$350 in value from a single source during the reporting period? ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" reportable travel or reimbursements for travel totaling more than \$350 in value from a single source during the reporting period? H. Did you, your spouse, or your dependent child receive any Employee Officer or Employing Office: Termination Date M.S. HOUSE OF REPRESENTATIVES HAND DELIVERED LEGISLATIVE RESOURCE CENTER 2014 MAY 13 AM 10: 17 (Office Use Only) ¥85 **≨** ¥85 Yes Yes Yes Yes

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Name: MICHAPL
RICHARD POUPED
Page 2_ of//

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·	KROWLR (TK)	Kle	JBCST BOY STK	Marriagemo Mosal Ad	ABC Hedge Fund ×	Examples: Simon & Schuster	SP. Maga Corp. Stack BF	For bank and other cash accounts, total the amount in all inversibleaving accounts, if the total is ever \$5,000, list every francish institution where there is more than \$1,000 in interest bearing accounts. For rental and other read property hads for investment, provide a complete address or description, e.g., "and a new property," and a city and state. For an exemplity traded, state the name of the business, the name of the advisions, the state of the state of the property," and a city and state. Exclude: Your perturnal realshance, including second homes and vacuation homes (sheates there was revisit income during the reporting period); and any femoral interest in, or income demand from a selected relitement program, including the Thirth Savings Plan. If you have a privately-traded fund that is an Excepted hivest in the program, and the program and the program of the program of the property o	For all IRAs and other retrement plens (such set 401(x) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.			Identify (a) each asset held for investment or production of income end with a fair market value.	Asset and/or income Source
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				\times			×	None		*Column XII is for assets held by your spouse or dependent	category of income by checking the appropriate box below Dividends, interrest, and capital galon, even if notineested must be disciplated as income for assets held in taxable appounts. Check "None" if no income was asked a generated.	For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets indicate the	Amount of Income
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: MICNAROL RICHARD POUPED Page 4 of 11

SCHEDULE B - TRANSACTIONS

Name: MICHARL RICHARD Page 5 of 11

	1						1			,	,	ı I					
Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period of any security or real property held by you, your spouse, or your	Į.	Type of Transaction	nsactio	3		Date				Am	oun <u>t</u>	of Tran	ransaction	ř			
dependent child for investment or the production of income. Include transactions that resulted in a capital loss. Provide a brief description of an exchange transaction.							>		c	0	m	יור	ø	I	-	٠	*
Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose 'partial sale' as the type of transaction.					pital Gain	(MO/DA/YR) or Quarterly.										00	
Capital Gaina: if a sales transaction resulted in a capital gain in excess of \$200, check the 'capital gains' box, unless it was an asset in a tax-deferred account, and disclose the capital pain income on Schradule A.	hase		al Sale	ange	k Box if Ca eded \$200	wooldy, if applicable)1-)00	001- 000	001- ,000	,001- ,000	,001- ,000	,001- 00,000	00,001- 00,000	00,001- 000,000	000,001- 000,000	\$50,000,0	\$1,000,00 uee/DC Aa
* Column K is for assets solely held by your spouse or dependent child.	Purc	Sale	Part	Excl	Che Exce		\$1,0 \$15,	\$15, \$50,	\$50, \$10							Ove	
SP. DC, JT Asset																	
SP Example Mega Corp. Stock			×		×	3/5/13		×									
FHERICE BAUK TRA																	
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VED HID-CAD		×				10/22/13	X										
YEA ST. INV. GRADE		X	:			10/22/13	X										
SPAR GLA SHARRS		X				6/10/13	×										
PIMO TTL RIN		X				10/22/13		×									
DARAMANAS DEL'HERS.	X					10/22/13	×										
CONVORGENCE CORE PIOS	X					10/22/13	X										
VCD ERUTH IDEN AUM.	X					10/22/13	×										
DONG FLOX FUL FO	X	-				10/22/13		X									
EATON VANCE FITH. RIN.	X					10/12/13	×										
GS STEMBAIR INC.	X					16/22/13	×										
LAND ABBOTT SHOOT DURNTUN	X					10/22/13	×										
Wisayu TREE EMPING, MES.	X					10/22/13	×		·								
AMPRICAD CONTROL HORMAGE	X					10/22/13	X										

SCHEDULE C - EARNED INCOME

Name: HICHAL RICHARD POHPES Page 6 of

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	ist the source, type, and amount of samed 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	
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List the source, types of income (n	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: The 2013 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.	niment) totaling \$200 or more during the selow. Social Security Act. Instated at or above the "senior staff" rate to tasky prohibited.	ng \$200 or more during the reporting period. For a spouse, list ity Act. above the "senior staff" rate was \$26,955. In addition, certain bited.
	Source (include date of receipt for honoraria)	Туре	Amount
Examples:	Kenne State State at Maryland Chil Wair Regundaria (Oct. 2)	Approved Teaching Fee Legislative Pensten Spouse Speech	\$6,000 \$16,000 \$1,000
	Ontaris County Board of Education	Aees sanods	WA
	Nowe		
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SCHEDULE D - LIABILITIES

Name: MICHAEL RICHARD POLIPED Page 7 of 11

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 at 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 liabilities owed to you by a spouse or the child, perent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of reporting period exceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

				4	l.	SP.		
			_	CAD	Example			
			<u></u>	ADITAL FORMAL SAVINGS	First Bank of Wilmington, DE	Creditor		
				92/9	5/98	Date Liability Incurred MO/YR		
			J ' '	MOMINGE 13D PORNIT.	Mengage on Rental Property, Dover, DE	Type of Liability		
	и.	£	i, F.			\$10,001- \$15,000	>	
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1						Over \$50,000,000	-	
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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, pertner, 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

listed in Schedule C; positions held in any religious, social, fit	usted in Schedule C; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.
Position	Name of Organization
None	

SCHEDULE F - AGREEMENTS

Name: MICHARL RICHARD Page 8 of 11

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continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfs	Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment, a leave of abserv	
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Date	Parties to Agreement	Terms of Agreement
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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 rule.

	Source	Description	Value
Example:	Mr. Joseph Smith, Arlington, VA	Silver Platter (determination of personal friendship raceivad from the Ethuca Committee)	\$400
	None		

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

G	
Name:	
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ICHAR BUREO	
Page 7 of //	

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

EXCLUDE: Privately-sponsored travel approved by the Ethics Committee, if post-travel disclosure was filed with the Clerk; travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

I						
	Source	Date(s)	City of Departure – Destination — City of Return	Lodging? (YAI)	Food? (YN)	Family Member Included? [Y/N]
	Government of China (MECEA)	Aug. 5-11	OC-Bajing, China - DC	٧	*	z
clain, es.	Habital for Humanity (charity fundmised)	Nar. 3-4	DC-Buston-OC	4	*	*
	None					
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SCHEDULE I - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of paying an honorarium to you. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.	or of an event to a charitable organ	ization in lieu of paying an	honorarium to you. A
Source	Activity	Date	Amount
Association of American Associations, Washington, DC	Speech	Feb, 2, 2013	\$2,000
	Article	Aug. 13, 2013	\$500
None			

Name: MICXARL RICHARD RHARD Page 11 of 11

								NOTE NUMBER
	: 		!					
						•	None	
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								35