#### D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? B. Did you, your spouse, or your dependent child purchase, sell, or **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. E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? 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 **UNITED STATES HOUSE OF REPRESENTATIVES 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 **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? IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS reporting period? Name: 2014 FINANCIAL DISCLOSURE STATEMENT three tests for exemption? REPORT TYPE FILER STATUS b. Make more than \$200 in unearned income from any reportable Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or asset during the reporting period? < 7 Do not answer "yes" unless you have first consulted with the Committee on Ethics U.S. House of Representatives 2014 Annual (Due: May 15, 2015) Member of or Candidate for BNS District: \_ State: Calmonia 8 Yes 🔀 Ύes ¥ 85 × Yes Yes P Daytime Telephone: 202-225-8104 × Amendment Z Š 8 몽 증 For Use by Members, Officers, and Employees 又 X G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$375 in value from a single source during the reporting period? 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" lieu of paying you for a speech, appearance, or article during the reporting period? 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 Did any individual or organization make a donation to charity in Form A Employee Officer or Employing Office Date of Termination: Termination U.S. HOUSE OF THE CLERK LEGISLATIVE RESOURCE CENTS 2015 MAY 13 PM 12: 56 DELIVERED Office Use Only Yes Ύes Yes Yes Yes Yes Yes 중 Š 중 8 Ş X Z X K

## SCHEDULE A - ASSETS & "UNEARNED INCOME"

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₹1	1	7	[7.5]		7		Exan	$\top$	aireme	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.	If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.	Exclude: Your personal residence, including second fromes 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.	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.	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 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 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).	exceeding \$1,000 at the end of the reporting bence, and (b) any other reportable asset or source of income that generated more than \$200 in "unearned" income during the year.	Identify (a production	Þ	
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### SCHEDULE C - EARNED INCOME

Name: And Georges Zshoo Page 4 of 7

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. governr the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples belease the source for other spouse earned income exceeding \$1,000. See examples belease the source for other spouse and benefits received under the Sc
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#### SCHEDULE D - LIABILITIES

period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting	Name and Georges Shoo
nount owed during the reporting	Page 5 of 7

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

			SP. DC, JT		
Los Angeles, Califor	Wells Fango Bank	Example First Bank of Wilmington, DE	Creditor		
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(Personal - not rented Washington, D.C.)	Mortage on Residence	Mortgage on Rental Property, Dover, DE	Type of Liability		
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			Over \$1,000,000* (Spouse/DC Liability)	*	

#### **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 (such as political parties and campaign organizations); and positions solely of an honorary nature.

Position	Name of Organization
	- None -

#### **SCHEDULE F - AGREEMENTS**

Name: DRY Georges 25	
Color	•
Page 6 of 7	

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.

		2014	Date
		Country of San Matro ( California)	Parties to Agreement
		Legislative tension	Terms of Agreement

#### **SCHEDULE G – GIFTS**

Report the source (by name), a brief description, and the value of all gifts totaling more than \$375 received by you, your spouse, or your 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 \$150 or less need not be added towards the \$375 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 received from the Ethics Committee)	\$400
- None -		
:		

# SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name: NDA
Cesses
Sshoo
Page 7 of 7

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-refated expenses totaling more than \$375 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**: 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.

	•		City of Departure - Destination —	Lodaina?	Food?	Family Member
	зоится	Date(s)	City of Return	(Y/N)	(Y/N)	ilicidaear (Tiri)
	Government of China (MECEA)	Aug. 6-11	DC-Beijing, China - DC	Υ	Y	z
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