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 benefiting you, your spouse, or a dependent child?	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes No W If yes, complete and attach Schedule III. VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Schedule VI.	II. Did you, your spouse, or a dependent child receive "unearmed" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? Yes No V. Did you have any reportable agreement or arrangement with an outside entity? With an outside entity? If yes, complete and attach Schedule V.	i. Did you or your spouse have "earned" income (e.g., salaries or sees) of \$200 or more from any source in the reporting period? Yes No II. Did you hold any reportable positions on or before the date of filling in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	In all sections, please type or print clearly in blue or black ink. PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS	Filer Candidate for the State: MIMPSOTA Date of NOV.5, 2014 Amendment Status New officer or Employing Office:	Name: JAMES H. READ Daytime Telephone:	FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2013 - November 15, 2013 For use by candidates and new employees
ependent child Yes	not be Yes	OF THESE QUE	each "Yes" respo	\$5,000 from Yes	rrangement Yes	before the date or two years? Yes		A \$200 penalty shall be assessed against any individual who files more than 30 days late.	2013 NOV 27 AM 11: 40 OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES (Office Use Only)	MOY 22 2013 Page 1 of LEGISLATIVE RESOURCE CENTER
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N _o	₹	"		8 ⊠	₹	₹		assessed who files	6	9 1 9

SCHEDULE I - EARNED INCOME (INCLUDING HONORARIA)

Name JAMES H. READ

Page 2 of

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. 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.

Exclude: Milliary pay (such as Nauonal Guard of Reserve pay), lederal reurement programs, and		Amount	unt
Source (include date of receipt for honoraria)	Type	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
College of St. Benedict, St. Joseph MN	Salary	152,040	#45,000
Utah State University, Logan, UT	Speaker Fee	37 50	N/A
University of Arkansas Law School, Favetheville AR	Speaker Fee	\$1,500	NA
Michigan State University, East Lansing MI	Speaker Fee	NA	4 750
Liberty Fund, Indianapalis IN	Online Papel Fee	NA	# 600
Sacramento Bee, Sacramento CA	Spouse Salary	NA	NA
Arsalyn Town Hall, Ludwig Family Foln, Pasadera CA	Speaker Fee (Spause)	NA	\$500
		:	

Fidelity Rollover IRA	Avan State Bank CDs	State Farm CD.	NASA Federal Credit Union	TCF Bank		DC, Examples: Simon & Schuster	SP, SP Mega Corp. Stock	Exclude: Your personal residence, including second homes and vecation homes (ursess there was rental income during the reporting period); any deposits totaling \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule II requirements, please refer to the instruction booklet.	location in Block A.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business the natura of its activities and its conversable.	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. For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and the city and state.	Identity (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year. Provide complete names of stocks and mutual funds for not use ticker symbols?	BLOCK A Asset and/or Income Source
					×	Indefinite		None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000		B C D E F G H - L X C	ing year and is included only because it generated income, the value should be "None." *This column is for assets solely held by your spouse or dependent child.	Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold during the report-	BLOCK B Value of Asset
	<	<u> </u>	<u> </u>	<u></u>	×	Royalies	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income	e)	,	Interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	Check all columns that apply, For retirement accounts that do not allow you to choose specific investments of that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "fax-belerred" or imm. Dividence the	BLOCK C Type of Income
						X		None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$5,001 - \$15,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 Spouse/DC income over \$1,000,000* None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$1,000 \$1,001 - \$1,000 \$100,001 - \$1,000 \$100,001 - \$1,000 \$100,001 - \$1,000 \$100,001 - \$1,000 \$1,001 - \$1,000 \$1,001 - \$1,000 \$1,001 - \$1,000 \$15,001 - \$15,000 \$100,001 - \$100,000 \$100,001 - \$1,000,000		Current Year Preceding Year	* This column is for income derived from assets solely held by your spouse or dependent child.	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. Check "None" if no income was earned or generated.	BLOCK D Amount of Income

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Name JAMES H. READ

Page 4 of

Spouse/DC income over \$1,000,000*

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Representation Property Pro											D 7. SP.	
None	CREF Social Choice	CREF Global Equity	CREF Growth	CREF Stock	TIAA Traditional	Select Intl Equity Fund A	Aberdeen	New Persective Find A	Vanguard Retirement 2035	RothIRA		BLOCK A Asset and/or Income Source
DIVIDENDS RENT											\$1 - \$1,000	BLOCK B Value of Asset
\$1 - \$200 = \$201 - \$1,000 = \$3201 - \$1,000 = \$32,500 < \$32,501 - \$5,000 < \$32,501 - \$5,000 < \$35,001 - \$15,000 ≤ \$35,001 - \$15,000 ≤ \$35,001 - \$100,000 ≤ \$3		< <				<					DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income-(Specify: e.g.,	BLOCK C Type of income
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Confir	SCHEDULE II — ASSETS AN Continuation Sheet (if needed)	SCHEDULE II — ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed)		Name JAMES H. READ Page 5 of
	BLOCK A	вгоск в	BLOCK C	BLOCK D
	Asset and/or Income Source	Value of Asset	Type of Income	Amount of Income
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		Over \$50,000 Spouse/DC As	TAX-DEFERF Other Type	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,50 \$2,501 - \$5,00 \$5,001 - \$15,0 \$15,001 - \$10,001 - \$1,00 \$100,001 - \$1,00 \$1,000,001 - \$1,00 \$1,000 - \$1,000 \$1,001 - \$1,000 \$1,001 - \$1,000 \$1,001 - \$1,000 \$1,001 - \$2,50 \$2,501 - \$5,00 \$5,001 - \$15,00 \$15,001 - \$15,00 \$15,001 - \$15,00 \$100,001 - \$1,000 \$1,0001 - \$1,000 \$1,0001 - \$1,000 \$1,0001 - \$1,000 \$1,0001 - \$1,000 \$1,0001 - \$1,000
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	Vanguerd Margan Growth			
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	American Funds EuroPac			
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B	Gamett 401(k)			
	Stable Value Find	S		
	Large Cap Value Fund	<u> </u>	•	
	Large Cap Growth Fund			
	Gamett Stock Fund	•		
Г	Garnett Stack (ESOP) Full	V		

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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed

Name JAMES H. REA

Page b of

Spouse/DC Income over \$1,000,000

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JAMES H. READ

Page 7 of

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SCHEDULE III - LIABILITIES

Name JAMES H. READ

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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 dependent child. Mark the highest amount ture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report *revolving charge accounts* (i.e., *credit cards*) only if the balance at the close of the previous calendar year exceeded \$10,000. owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furni-

			₽ <mark>\$</mark>	
	NA	Example: First Bank of Wilmington, DE	Creditor	
		May 1998	Date Liability Incurred mo/year	
		Mortgage on 123 Main Street, Dover, DE	Type of Liability	
			\$10,001— \$15,000	
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SCHEDULE IV — POSITIONS

Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

and positions solely of an honorary nature.	nature.
Position	Name of Organization
NA	

SCHEDULE V — AGREEMENTS

Name JAMES H. READ

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

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization 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 1.

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		Source (Name and Address)	Brief Description of Duties
	Example: Do	Doe Jones & Smith, Hometown, Homestate	Accounting services
	NA		
	:		