FINANCIAL DISCLOSURE STATEMENT For New Members,	FORM B For New Members, Candidates, and New Employees	TECHELATIVE RESOURCE CENTER
Name: Michical Esquision Daytime Telephone:	one.	C7 : 2 P. F. O. P. P. F. O.
New Member of or Candidate for State: LA U.S. House of Representatives District: IC Candidates – Date of Election: (a) S	Check if Amendment	(Office Use Only)
STATUS New Officer or Employee Staff Filer Type (If Applicable): Employing Office:SharedPrincipal Assistant	Period Covered: January 1,	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	ONS	
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. Roceive more than \$200 in unbarned income from any reportable asset during the reporting period?	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	positions during the reporting ryear 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 Yes X No your sporting 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?	agreement or arrangement with an Yes No Υ
D. Did you, your spouse, or your dependent child have any reportable Yes \ \ \ No \ \ Si \	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	1 \$5,000 from a Yes X No No
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANS		VER "YES"
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH	0	F THESE QUESTIONS
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?	er "excepted trusts" need not be disclosed. F	Have you excluded Yes No
EXEMPTION - Have you excluded from this report any other assets, "unesmed" income, 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.	pouse or dependent child because they mee	el all three lests for Yes No 📐

SCHEDULE A - ASSETS & "UNEARNED INCOME"

SP, Smort & Struster The Examples Smort & Struster ABC Mapp Lord X The City Hay Light of box The	all interest-bearing accounts if the total is over \$5,000, list newly financial institution whate there is imore than \$1,000 in interest-bearing accounts. For rental and other real properly held for investment provide a complete address or description, e.g., rental properly, and a city and state. For an ownership interest in a privately-field business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic locultion in Block A. Exchade: You presonal residence, including second homes and vication homes (initias there was rental income during the reporting period), and any financial interest in, or income derived from, it deered retilement program, including the Third Savings Plantition. If you so choose, you may indicate that an esset of uncarne source is that of your spouse (\$P) or dependent child (DC), or jointly held with anyone (JT). In the oppositional column on the far left. For a defined discussion of Schodule A requirements please refor to the institution booklet.	401(k) plans) provide the value for each asset held in the account that exceeds the repreting thresholds. For bank and other cash accounts, total the amount in	production of Income and with a fear market value of exceeding \$1,000 at the end of the reporting period sand (this any other reporting belied in the production of the second stranger of the company of the provide complete names of stocks and mutual funds (do not use only ecker symbols). For all IRAs and other retrement plans (such as	BLOCK A Isets and/or Income Sources	SCHEDULE A – ASSETS & "UNEARNED INCOME
Innahius X	None \$1.51.000 \$1.001.515.000 \$15.001.550.000 \$55.001.550.000 \$500.001.525.0000 \$500.001.550.000 \$500.001.525.000.000 \$500.001.525.000.000 \$500.001.550.000.000 \$500.001.550.000.000 \$500.000.001.550.000.000 Spouse*DC Asset over \$1.000.000*	A B C D E F G H 1 J X L M	use a valuation method other than fair market value, please specify the method used. 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 "kurie. "Column M is for assets held by your spouse or dependent child in which you have no interest.		& "UNEAKNED INCOME"
Royaltes Perinershy Income	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTEDIBUND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		check a columns use play for accounts that generals tax deferred frooms (such addition). Play defect the Trax-Deferred column. Dividends, interest, and capital gallin, even freelivested, must be disclosed as income for assets held in taxable accounts. Chock thorn it the asset generated no income during the reporting parted.	BLOCK C Type of Income	Name: Lich
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CHEDULE A — ASSETS & "UNEARNED INCOME" Manual Move		,	,			,			_		_	7				6		-	_				
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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.

San Ca	Examplo	SP. DC. JT			exceeded \$10,000.
Frant of Phrey or a	First Bank of Wilmington, DE	Creditor			Column K is for liabilities held solely by your spouse or dependent child.
	5/98	Date Liability incurred MO/YR			ciely by your spor
Credit Card Credit Cord Cordinary	Mortgage on Rental Property, Dover, DE	Type of Liability			use or dependent child.
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		Over \$50,000,000	ζ.		
		Over \$1,000,000* (Spouse/DC Liability)	*		

SCHEDULE E - POSITIONS

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

	3V. J.	Position
		Name of Organization

& "UNEARNED INCOME" BLOCK B Value of Asset	· 1
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SCHEDULE C - EARNED INCOME

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EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act. 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 spause, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff. Amount	nor stan.	Am	Amount
Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples: Civil Wer Rejudiable (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$0 N/A	\$1,000 N/A
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SCHEDULE F - AGREEMENTS

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Page 7 of C	

employer. 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

Date	Parties to Agreement	Terms of Agreement
	THE REPORT OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLU	

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

Roport sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise 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 C.

government at	id ally implimation considered confloeridal as a lesuit of a	government and any information constitutional as a result of a privileged relationship recognized by law. Do not repeat information listed on scripture c.
	Source (Name and City/State)	Brief Description of Duties
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SCHEDULE F - AGREEMENTS

employer. 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

Date	Parties to Agreement	Terms of Agreement

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

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

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Source (Name and City/State)	Brief Description of Duties
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