₹	Yes	pendent child	wities of a spouse or dep Committee on Ethics.	W (2)	es you have f	er assets, "und wer "yes" unk	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liable because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the
<u>₹</u>	Yes 🔲	of be	cepted trusts" need no	ics and certain other "ex- r spouse, or a depender	nittee on Ethi	d by the Comi	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?
S	QUESTION	FTHESE C	ANSWER EACH OF THESE QUESTIONS	1	T INFOR	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	esponse.	each "Yes" re	ule attached for e	appropriate sched	d and the	e answere	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response
S	Yes 🔀	\$5,000 from	ompensation of more than \$5,000 from two prior years?	VI. Did you receive com a single source in the two If yes, complete and at	No M	Yes	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III.
No No	Yes 🔲	angement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	V. Did you have any reputith an outside entity? If yes, complete and at	No No	Yes	II. Did you, your spouse, or a dependent child receive "unearned" 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? If yes, complete and attach Schedule II.
₈	Yes 🔲	efore the date r two years?	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	IV. Did you hold any report of filing in the current cal	S S	Yes 🔀	I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.
				ANSWER EACH OF THESE QUESTIONS	OF THES	R EACH	PRELIMINARY INFORMATION — ANSWE
	o days late.	more than 30 days late				Office:	employee Employing Office:
assessed who files		A \$200 penalty shall be against any individual	Check if Amendment	on: May 20,2014	Date of Election:	Disme-	Filer Candidate for the State: Use House of Representatives District:
	(Office Use Only)	\mathcal{U}_{\sim}					
E CO	OFFICE STRESENTATIVES	A A		Daytime Telephone:	Daytime		Name: William Jason yates
Page 1 of 6 E CENTER	<u> </u>	LEGISLA 2014 A	I B and new employees	FORM B For use by candidates and new employees		TATIVES	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2014 - Poril 15, 2014
	APR 2 1 2014	AD SO SO SO SO SO SO SO SO SO SO SO SO SO					

SCHEDULE I -- EARNED INCOME (INCLUDING HONORARIA)

	Name
(William Jason Unites

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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.	retirement programs, and benefits	received under the Social S	ecurity Act.
Source (include date of receipt for honoraria)	Type	Amount	nt
	. 100	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Examples: First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
_	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
The Real Bus Busters Inc.	Hourn Income	89,20	\$23,748.55
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			JT 1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP, Mega Corp. Stock	nomes and vacation homes (unless 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.	Exclude: Your personal residence, including second	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 reports in Place.	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.	Provide complete names of stocks and mutual funds (do not use ticker symbols).	Identify (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.	BLOCK A Asset and/or Income Source
			×	Indefinite	X	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		A B C D E F G H	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.	BLOCK B Value of Asset
			×	Royalties	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Inc	ome)		if reinvested, must be dis- closed as income. Check "None" if the asset generated no income during the reporting period.	plans or IRAs), you may check the "Tax-Deferred" column. Dividends, interest, and capital gains, even	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)).	BLOCK C Type of Income
			X	×	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000* None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$5,000 \$201 - \$1,000 \$1,001 - \$5,000 \$1,001 - \$5,000 \$201 - \$1,000 \$1,001 - \$5,000 \$1,001 - \$5,000 \$50,001 - \$15,000 \$15,001 - \$15,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*		Current Year Preceding Year	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 rains, even if reinvested must be disclosed as	BLOCK D Amount of Income

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name William Jason Yates

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

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SCHEDULE III — LIABILITIES

Name William Jason Yates

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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 owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furnitive. ling 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. 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 sib-

		,		 _		
					SP, DC, JT	
				Example: First Bank of Wilmington, DE	Creditor	
		į		May 1998	Date Liability Incurred mo/year	l
				Mortgage on 123 Main Street, Dover, DE	Type of Liability	
					\$10,001— \$15,000 >	
					\$15,001— \$50,000	
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	f :	ŀ			Spouse/DC Liability over 💢	i

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 nonorary nature.	ature.
Position	Name of Organization

SCHEDULE V - AGREEMENTS

Name William Jason Yates

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			Date	Identify the date, parties to, and general to service; continuation or deferral of paymer efft plan maintained by a former employer.
			Parties To	general terms of any agreement or arrangement with it of payments by a former or current employer other that remployer.
			Terms of Agreement	Identify the date, parties to, and general terms of any agreement or arrangement 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.

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 I.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
The Real Bus Busters Inc.	Past control - I dentifying and eliminating past issues in hyman spaces,

GPO: 2013

78-995 (mac)