₹ ₹ □ □ □	Yes OUESTION: Yes OUESTION:	each "Yes" rue the pendent child	No with an outside entity? If yes, complete and attach Schedule V. 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. Pered and the appropriate schedule attached for each "Yes" response. RUST INFORMATION — ANSWER EACH OF THESE QUESTINEOUTH Committee on Ethics and certain other "excepted trusts" need not be benefiting you, your spouse, or a dependent child? "unearned" income, transactions, or liabilities of a spouse or dependent child test you have first consulted with the Committee on Ethics. Yes [Insurance of the committee on Ethics]	with an outside entity? If yes, complete and attach Schedule v. VI. Did you receive compensation of more a single source in the two prior years? If yes, complete and attach Schedule vi. Dpropriate Schedule attached Dpropriate Schedule vi.	No N	Yes Yes OR TRUS: OR TRUS or a trust benefit or a ssets, "unea wer "yes" unles	In come of more than \$2.00 in the reporting period? Yes \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	I. Did you, ye she liability (ref yes, compte f yes, compt
₽	es —	efore the date r two years?	E QUESTIONS 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. V. Did you have any reportable agreement or arrangement	EACH OF THESE QUESTIONS IV. Did you hold any rep of filing in the current ca fi yes, complete and at V. Did you have any rep	OF THES		In all sections, please type or print clearly in blue or black ink. PRELIMINARY INFORMATION — ANSWER 1. Did you or your spouse have "earned" income (e.g., salaries or tees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule 1. II. Did you, your spouse, or a dependent child receive "unearned"	PRELIMIN Did you or y tees) of \$200 or it yes, comple
assessed who files	0	A <i>\$200 penalty</i> shall be against any individual more than 30 days late	Check if Amendment	: 29 MAY 2012	Date of Election:	SXAS Office:	Candidate for the House of Representatives District: 15 New officer or employee Employing Office:	Filer Status
12: 10	2012 NAY -7 PH 12: 10 OFFICE OF THE CLEAR TIVES U.S. HOUSE OF REPRESENTATIVES (Office Use Only)	0 201 u.s. r		Daytime Telephone:	Daytime		RUBEN R. RAMIKEZ	Name:
Page 1 of 5	APR 3 0 2012 Page 1 of 5	APR 3	M B and new employees	FORM B For use by candidates and new employees		ATIVES	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2012 - 29 ぬない 20	UNITED : FINANCI. Period cov

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name RUBEN R. RAMEREZ

Page 2 of 5

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# 6,000	* 2 000 B	Sole Peop.	Rabbit Booths (PHOTO BOOTHS)
40,273.73	\$ 13,056.52	Kaeles	ECISO, Edinburg, Tx.
NA	NA	Spouse Salary	Harris County, Texas Public Schools
\$1,000	0	Honorarium	XYZ Trade Association, Chicago, IL (Rec'd December 2)
\$3,200	\$ 400	Director's Fee	- 1
\$28,450	\$6,300	Salary	XYZ Corporation, Houston, TX
unt Preceding Year	Amount Current Year to Filing	Туре	Source (include date of receipt for honoraria)
security Act.	ceived under the Social S	ement programs, and benefits re	Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act
use earned income	the source for other spou	amount of any honoraria; list only	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.
าt) totalling \$200 or	ent by the U.S. Governmer	than the filer's current employme	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

	,						
7	ले 🖈	JT	DC, Examples:	SP,	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. Exclude: Your personal residence, including second homes and vacation homes (<i>unless</i> 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 III requirements, please refer to the instruction booklet.	account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address.	Asset and/or Income Source Asset and/or Income Source 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 "unearmed" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self-clirected (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the
PHOTO S	Encher	_		SP N	publicly tra- publicly tra- publicly tra- publicly tra- publicly tra- plock A. Block A. If four perso I vacation ing the rep I or less in and any tangent and the I and the I and the I sell the I sell tra- I column ou I discuss I to the ins	or other re	BLOCK A Asset and/or Income Source lifty (a) each asset held for investment or produc come with a fair market value exceeding \$1,00 end of the reporting period, and (b) any c ertable asset or sources of income which gener than \$200 in "unearned" income during the y ide complete names of stocks and mutual fu tot use ticker symbols). II IRAs and other retirement plans (such as 40 s) that are self-directed (i.e., plans in which the power, even if not exercised, to select the investments), provide the value for each asset e account that exceeds the reporting threshe the count which are not self-direct ide only the name of the institution holding
800T)	2	st Ban	Simon & Schuster	SP Mega Corp. Stock	arest in ided, si its actifits actifits actifits actifits actification of its actifica	at the e al property and proper	BLOCK A for Inco for
	Retirement (TX)	k of Pa	s Schi	òrp. S	is a privitate the vities, vities, (unle period) onal condica indica ind	perty t	r investigation of the control of th
	ر. 13-44	ducah	ster	Š.	rately-le name and it and it and it and it and it as the state it, any of heckin progrete that itse (Si your syour subject.	held fo	titution
	+	, ?			held be of the of the of the of the second in great deposition, or arm, in arm	orting or inve	OUT or produced in the produce
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					None	> 8	of I ma
		┢	Ę		\$1 - \$1,000 \$1,001 - \$15,000	<u>~</u>	BLOCK B Value of Asset 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 reporting year and is included only because it generated income, the value should be "None."
			indefinite		\$15,001 - \$50,000	0	Vale value v
	+	×	ह	×	\$50,001 - \$100,000 \$100,001 - \$250,000	TII.	BLI lue (lu
	-	Ĥ			\$250,001 - \$250,000	<u></u>	BLOCK B Value of Asset at value of asset at ting year. If you used in method other the value, please specused. Set was sold during year and is inclusive the value should the
					\$500,001 - \$1,000,000	Ι	B set
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					Over \$50,000,000	Γ.	i
	7			×	NONE		the as as received the second
		U		-	DIVIDENDS	·····	Type of In Type of In Check all columns retirement accounts allow you to che investments of that deferred income (si plans or IRAs), you. "None" column. Divest, and capital greinvested, must as income. Check asset generated no the reporting period
	1	×		\dashv	RENT		all all you ment sted or IRR
					CAPITAL GAINS		De columnicolumnicolumnicon to
					EXCEPTED/BLIND TRUST		e of Ince blumns the accounts to choos or that go ome (such as), you ma must be Check "It atted no ince it period.
Augustoa			Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Incom	e)	Type of Income Type of Income 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 "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
	7				None Communication Communication		
			H	1	\$1 - \$200 =	-	
	+	H		×	\$201 - \$1,000 \(\equiv \)	10	
		×	×	7	\$201 - \$1,000 \(\equiv \) \(\frac{1}{2}\) \(\frac{1}{2}\),001 - \$2,500 \(\frac{1}{2}\) \(\frac{1}{2}\) \(\frac{1}{2}\),501 - \$5,000 \(\frac{1}{2}\)	Current Year	Amount of Income For retirement accounts that do not allow you to choose specific investments <u>or</u> that generate tax-deferred income (such as 401 (k) plans or IRAs), 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.
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					\$15,001 ⇒ \$50,000 ≦] 🔀	reme se si defer defer other by Divier ever as was
				\prod	\$50,001 - \$100,000 <u></u>] ă	Ar spe erre
		>.:			\$100,001 - \$1,000,000 \(\sigma\) \$1,000,001 - \$5,000,000 \(\sigma\)	-	Amount of Income Amount of Income For retirement accounts that do not allow you to choose specific investments <u>or</u> that generate tax-deferred income (such as 401(k) plans or IRAs), 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.
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				1	\$1 - \$200 =	1	Inc Inc Inc Inc Inc Inc Inc Inc Inc Inc
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Contir	Continuation Sheet (if needed)	ad one anne income		Name	Pageof
	BLOCK A	вгоск в	вгоск с	BLOCK D	
	Asset and/or Income Source	Value of Asset	Type of Income	Amount of Income	
SP,		A B C D E F G H I J K L	9	Current Year Prec	Preceding Year
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DC		None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,00 \$250,001 - \$500,00 \$1,000,001 - \$5,000 \$5,000,001 - \$25,00 \$25,000,001 - \$25,00 \$25,000,001 - \$50,00	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND Other Type of Incom (Specify: e.g., Partners or Farm Income)	\$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,00 Over \$5,000,000 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 \$1,000,001 - \$5,000,000 Over \$5,000,000
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SCHEDULE III — LIABILITIES

Name Ruber R. Ramzaez

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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 furniling 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-

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					JT OC SP,
			Sallie MAE	Example: First Bank of Wilmington, DE	Creditor
		•	July 2005	May 1998	Date Liability Incurred mo/year
			July 2006 STudent LOANS	Mortgage on 123 Main Street, Dover, DE	Type of Liability
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SCHEDULE IV — POSITIONS

cer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. 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 offi-

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.

and positions obtain or an include of indiano.	ideric.
Position	Name of Organization
PRESIDENT/DIRECTOR	HOME OWNER'S ASSOCIATION - NORTHANTE CROSSING
Compete .	RASSIT PHOTO ! BOOTAS
FERCKER.	Edinburg CISD.

SCHEDULE V — AGREEMENTS

Name Ruber R. RAMTRER

Page 5 of 5

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.

	()		
	Date	Parties To	Terms of Agreement
		NORE	
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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 I.

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