Form A

UNITED STATES HOUSE OF REPRESENTATIVES

Name SHEILA JACKSON LERPAGEL of

# SCHEDULE I—EARNED INCOME

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.

Source  Keene State  State of Maryland Civil War Roundtable (Oct. 2nd)  Ontario County Board of Education  - Falm; n: 1 frative Ps: time	Type Approved Teaching Fee Legislative Pension Spouse Speech Spouse Salary  Sγουίζο δα Ισω

POHEDIN F III APPETS AND "INFARNED" INCOME	J "INFARATO" INCOME	Name C	TO FILL OF THE PLANT OF THE PROPERTY OF THE PR	<u> </u>
SCHEDOLE III—ASSETS AINE	ONEADNED INCOME			
BLOCK A	BLOCK B	Type of Income	Amount of Income	Fransaction
Asset all wolle could	THE TAXABLE PROPERTY.		The control of the co	Indicate if the
Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at	Indicate value of asset at close of reporting year. If you use a valuation method other than their market value places specify the mathod	Check all columns that apply. For retirement accounts that do not show that the charge propries in the charge that the charge		asset had purchases
reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	used.	or that gene (such as	or appropriate box below. Dividends, interest,	or exchanges (E) exceeding
Provide complete names of stocks and mutual funds (do not use ticker symbols.)	If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."			\$1,000 in reporting year.
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	* This column is for assets held solely by your spouse or dependent child.	income. Check "None" if the asset	* This column is for income g	
For rental or other real property held for investment, provide a complete address or a description, e.g., "rental		-   i	dependent child.	600
property," and a city and state.  For an ownership interest in a privately-held business	B C D E F G H - & K L M			If only a portion of
For an ownership interest in a privately-neid business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	G	come)	= = = = = = = = = = = = = = = = = = =	an asset is sold, please indicate as
Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period): any deposits total-	00*	Farm Inc		(S) (partial)
ing \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	000 ,000		000	for exam- ple.
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.	60,000 00,000 6250,000 61,000,000 - \$5,000,0 - \$25,000,0 - \$50,000	BLIND TF	5,000 5,000 5,000 100,000 \$1,000,00	1 % 7 <del>0</del>
For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	- \$1,000 001 - \$15 ,001 - \$5 ,001 - \$1 0,001 - \$ 0,001 - \$ 0,001 - \$ 000,001 - \$ 000,001 - \$ ,000,001 - \$	EREST PITAL GA DEPTED/ C-DEFERI	- \$200 01 - \$1,00 001 - \$2, 501 - \$5, 001 - \$15, 0,001 - \$1, 0,001 - \$1,00 0,001 - \$1,00 0,001 - \$1,00 0,001 - \$1,00 0,001 - \$1,00	rr
	\$1, \$1! \$50 \$10 \$2! \$5 \$1, \$5, \$2! Ov	REINT CA	\$1 \$2 \$1 \$2 \$5 \$1 \$5 \$1 \$5 \$1	
SP Mega Corp. Stock  Simon & Schuster	Indefinite X	X X Royalties	×	S (partial)
	×	X	×	
50 First Investor Fund		×	<b>X</b>	
So Wood Forest Brank Auct				
4: "MAND (4 EOH) DUI 05	<u></u>		X	
Sp MML Annuality	×			
SP Proncer Mutual Sund			<b>X</b>	

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

NameSHEILA Jackson LEE

Continuation Sheet (if needed)

																	SP,	
				Cupital acdituan	Credit Union	United Energy		WRight Patman	Oce, dental Petrolium	I	5	Markets FOCIASI	nheimer	New Insight CL	- Find elity Advisor	MMLIRA		BLOCK A Asset and/or Income Source
				×	×		X		×							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   \$250,001 - \$1,000,000   \$1,000,001 - \$5,000,000   \$1,000,001 - \$25,000,000   \$25,000,001 - \$25,000,000   \$25,000,001 - \$25,000,000   \$25,000,001 - \$50,000   \$25,000,001 - \$50,000   \$25,000,001 - \$50,000   \$25,000 - \$50,000   \$25,000 - \$50,000    \$25,000 - \$50,000    \$25,000 - \$50,000    \$25,000 - \$50,000    \$25,000 - \$50,000    \$25,000 - \$50,000    \$25,000 - \$50,000    \$25,000 - \$50,000    \$25,000 - \$50,0	BLOCK B Year-End Value of Asset
				×	×		×		×							X	Over \$50,000,000  Spouse/DC Asset over \$1,000,000*  NONE  DIVIDENDS  RENT  INTEREST  CAPITAL GAINS  EXCEPTED/BLIND TRUST  TAX-DEFERRED  Other Type of Income (Specify: e.g., Partnership	BLOCK C Type of Income
					×		×		<b>X</b>								Income or Farm Income	BLOCK D  Amount of Income
-    -																	Spouse/DC Income over \$1,000,000° ≚	BLOCK E

# SCHEDULE IV— TRANSACTIONS

Name SHEILA JACKSON LEE Paged of 8

												Retirement Theirs	Loan Fran Federal	Real Estate	T Purchase of a lot-	SP Example: Mega Corporation Common Stock (partial sale)	ins — if a sales transaction rathe "capital gains" box and on is for assets solely held by	income. If only a portion of an asset is sold, please so indicate ( <i>i.e.</i> , "partial sale"). See example below.	in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the	_
-		<u></u>														×	SALE	HASE		Type of Transaction
											i		-				EXCH.	ANGE		e
																	Check Gain E			
									į				2012	2012		10-12-12	Bi-weekly, if applicable	or Quarterly, Monthly, or	(MO/DAY/YR)	Date
																	\$1,001- \$15,000		>	
<u> </u>													X			×	\$15,001- \$50,000		₩	
<u> </u>											_		<del>                                     </del>	$\times$			\$50,001- \$100,000	· .	<u></u>	Ar
							<u> </u>		-	-			<u> </u>			igwdap	\$100,001- \$250,000 \$250,001-	. ,		Amount
<u> </u>																	\$500,000 \$500,001			으
-						_								-		$oldsymbol{arphi}$	\$1,000,000		<u> </u>	Tran
							<u> </u>	_								H	\$5,000,000 \$5,000,001	)	ਜ ਜ	Transaction
-						<u> </u>		_									\$25,000,00 \$25,000,00	)0 )1-	<u>-</u>	on I
-					<u> </u>								_				\$50,000,00 Over			
	1	l	L	l			<u></u>	L	<u>_</u> .	L	L	ŀ	1	1	1		\$50,000,00	JU		1

## SCHEDULE V— LIABILITIES

Name SHEILA JACKSON LES

Page 6 of 8

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 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 year. 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 it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you close of the preceding calendar year exceeded \$10,000. \*This column is for liabilities held solely by your spouse or dependent child

		,			I		A	2	Amount of Liability	bility V				
SP.		Liability		>	В	င	D	m		Ð	0 <del>*</del> 1-	0 -	y	
JT C.	Creditor	incurred Mo/Year	Type of Liability	\$10,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,001- \$250,000 <b>\$250,00</b> 1-	\$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 Over	\$50,000,000 Spouse/DC Liability	Over \$1,000,000*
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main St., Dover, DE				×							
JE	t Wells FARGO BANK	5hoor	Show Loan			X					i			
8	Sallie MAR SAVINGS COGAILIAM Educahmal Loan	91/1999	Educational Luan		$\times$									
_	Visa - Waight Patman	-	Credit crad		$\leq$			ļ						
	Gaed: + Un. on				1									
95	CHase Manhatter 5/2001	5/2001				$\succeq$								

#### SCHEDULE VI— GIFTS

**Exclude:** Gifts from relatives, gifts of personal hospitality of 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 \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

**Note:** The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

 	 	 _	_	_
		Example: Mr. Joseph H. Smith, Anytown, Anystate	Source	
		Silver Platter (determination on personal friendship received from Committee on Ethics)	Description	
		\$375	Value	

# SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$350 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor

spouse or dependent child that is totally independent of his or her relationship to you. 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 (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a or were paid by you and reimbursed by the sponsor.

Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Number of days <u>not</u> at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	z	z	Z	None
	Aug. 6–11	DC—Los Angeles—Cleveland	Υ	Y	Y	2 Days
Consumer Electronic						
	Jan 8-10th	Jan 8-10th DC - Las Vegus - OC	Y	y	N	2 days
Rogressive Congress	Jan 24-25	Jam 24-25 DC-Pikesvilleimo-DC	~ `	~	5	2 days
						•
				:		
			i			

## SCHEDULE VIII—POSITIONS

Name SHEILA JACKSON LEE

Page & of &

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

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

1 Jonorany CHANES	Bronal of Dinectors	Advisory Board	Stand me Board Member	e D member	J. V. B.	Position
Temporary to situm for non-pubit events or projects	Ensemble Thenhe / Mariera - Ann Museum/ Women's Bacast Cancer	Spending For CHildren / Huston Grand Opera	Stand me Board Member Sam Houston Area Council - Boy Scoute OF America	March of Dimes	University of Houston	Name of Organization

## SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an 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

Date / / 0	Parties To
1/95	Congressionan SHEILA Jacksonlee PAYMent OF Pension at time
,	and City of Houston - I Am
	a Former Houston liky
	Countil member