					1
UNITED S	UNITED STATES HOUSE OF REPRESENTATIVES	For New Members,	FORM B For New Members, Candidates, and New Employees	LUSEN ATIVE RESOURCE OF THE SO	30 5
Name: Cassie	ssie Felder	Daytime Telephone:	one:	GATIOS OF THE CLERK	TIVES
FLER	New Member of or Candidate for State: LA U.S. House of Representatives District: 6 Candidates – Date of Election: 11/4/2014		Check if Amendment	(Office Use Only)	
STATUS	New Officer or Employee Employing Office:		Period Covered: January 1,	A \$200 penaity shall be assessed against any individual who files more than 30 days late.	inst any s late.
PRELIMIN	PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE)F THESE QUESTIONS	rions		
A. Did you, you a. Own any r end of the b. Make mon asset durit	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? OY b. Make more than \$200 in unearned income from any reportable asset during the reporting period?	No [E. Did you hold any reportable positions durin or in the current calendar year up through the	during the reporting period Yes W No	
C. Did you or you honoraria, or pen reporting period?	r spouse have "earned" income (e.g., salaries, sion/IRA distributions) of \$200 or more during the	Yes No	F. Do you have any reportable agreements or arrangements with an outside entity?	r arrangements with Yes No	<
D. Did you, you liability (more the	D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	✓ No	J. Did you receive compensation of more than source in the current year and two prior years?	e than \$5,000 from a single Yes No	
	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER " THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED	RESPONDING SCH		TO COMPLETE	
EXCLUSION	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>BOTH</u> OF TH	T INFORMATION	- ANSWER <u>BOTH</u> OF THESI	ESE QUESTIONS	
TRUSTS - Det this report detai	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?	on Ethics and certain othe	r "excepted trusts" need not be disclosed. He	ave you excluded from Yes No	\
EXEMPTION -	EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child b tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	income, transactions, or lia e Committee on Ethics.	abilities of a spouse or dependent child becau	ecause they meet all three Yes No	

SCHEDULE A - A

ASSETS & "UNEARNED INCOME"	
Name: Cassie Felder	The state of the s
Page 2 of 5	

		Ŷ				'n	8 8	Assembly the mily products and (b) income in	
		Cb AG C1 A	Cb AG C1 A	Cassie Folde Rouge, LA	, in the second	Francis		Assets and/or Inco dentify (a) each asset he production of income and wi according \$1,000 at the end of the end to not use only ticker symbols to not use only ticker symbols to account that exceeds the relation of the account that exceeds the relation of the end of the real proper or ental and other cash accounts to the end of the end to end of the end to end the end the end the	
		71 A	11 A	Cassie Felder & Associates, LLC, Baton Rouge, LA	ABC Hedge Fund X	Sirnon & Schuster	Mega Com Stock	Assets and/or Income Sources Identify (a) each asset held for investment or production of income and with a fair market value accepting \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in "unearmed ancome during the year. Provide complete names of stocks and mutual funds (do not use only ticker symbols). For sall RAA and other retirement plants (such as \$401(k) plants) provide the value for each asset held in the account that exceeds the reporting thresholds. For bank and other cash accounts, total the emount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest bearing accounts. For rental and other real property hald for investment, provide a complete address or description, e.g., "trainal property," and a city and state. For an ownership interest in a privately-held business that is not publicly traded, sate the name of the basiness, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second formes during the reporting period); and any financial inderest in, or income derived from, a federal reterement program, including the Truitt Savings Plan. If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box. If you so choose, you may indicate that an asset or redependent child (D.), or jortly held with anyone (JT), in the optional column on the far-left.	ococoa
							-	2 111 23	
		200	24.		artical 2	3 E		None Indicate value of asset at close of the reporting period. If you use a valuation method used. If an asset was specify the method seed the first market value, please specify the method used the method used. If an asset was sold during the reporting period and is included only because it generated income, the value first only your spouse or dependent seeds held by your spouse or dependent seeds and is seed to the province of the province of the value seeds and the province of the provin	
			•	<i>2</i> -1 ***	2 % 13	Indefinite		\$1,001-\$15,000 C SC III NO. 1	
				y com	2,34]8	×	\$50,0014100,000 m	<
**				- 200-20				\$100.001-\$5,000.000	
		-		٠,	×	:	- 1 - 1000	\$250,001-\$500,000 G T T T T T T T T T T T T T T T T T	
					7 - 27 2 - 2 - 3	ł. d	\.\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Management and the second seco	A .
					L.,		.,,	\$1,000,001-\$5,000,000 — \$ \$ \$ \$ \$ \$	‡
	1 2 4		· ø. ·		57.	r i		\$25,000,001-\$25,000,0000	
	-	, v	<i>i</i>)	E 7 1/2	- Will	į.	- 45	Che BEOGRAPH	
	10,033	124	3 3 °	- 4 - 6 -	X_40			Spouse/DC Asset over \$1,000,000*	
			7.						
							×	DIVIDENDS SEE TO SEE	
22.22							: 37 37	Rent Control of the c	Į
0720VV					·			DMDENDS Property	3
rees 2		-0.78			1 <u>6</u> 7		Star	EXCEPTEDIBUND TRUST	
	ļ	** . : ·	275	ļ	, 			DIVIDENDS	3
		1	`	7 3		Roy		DAM STATE	5
			_	Partnersh p income	Partnership Income	Royalties			
	,	3.7		8800			, (#	o conditions	
Zer it	ļ,		,			- T	×	\$14200 = 5 4 6 8	
	1					en 3.		AND THE PARTY OF T	
KACAL!	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				250			\$1,001-\$2,500	
	1	areas .	7-17	a 70	a Sili		e de	\$1,001-\$2,500 XI is for which to for which the graduate of the control of the co	
				a **	rich ×	Ě	. 08.	\$1,001-\$2,500 \$1,001-\$2,500 COurren Courren \$5,001-\$15,000 S5,001-\$15,000	
				a -	řá:	Ě	. 08.	S1,51,000 \$1,001-\$2,500 V V V V V V V V V V V V V V V V V V	
					řá:	Ě	. 08.	For assets for which you checked "I other assets indicate the category of and capital gainst, even if relations accounts. Check None' if no income "Column XII is for assets held by your Current Year V V V V V V V V V V V V V V V V V V V	
				•	řá:	Ě	. 08.		•
					řá:		. 08.		•
					×		. 08.		
					×		. 08.		A
					×				A
					×				
					×				
					×				
					×				
					×				
					×			Amount of Income If Tax-Delened in Block C, you may check the "None" column Yes the, must be a propriate but below. Dividends, was asmed or generated. SpouseDC Income ever \$1,000,000" SpouseDC Income ever \$1,000,000" In Tax-Delened in Block C, you may check the "None" column The SpouseDC Income by checking the appropriate but below. Dividends, spouseDC Income ever \$1,000,000" SpouseDC Income ever \$1,000,000" In Tax-Delened in Block C, you may check the "None" column The SpouseDC Income by checking the appropriate but below. Dividends, spouseDC Income ever \$1,000,000 SpouseDC In	
					×			Amount of Income If I av-Deferred in Block C, you may check the "None" columns of Income by checking the appropriate box below. Divident was samed or generated. SpouseOC income over \$1,000,000" SpouseOC income over \$1,000,000" SpouseOC income over \$1,000,000" Preceding Year Preceding Year S\$,001-\$15,000 \$5,001-\$15,000 \$5,001-\$15,000 \$5,001-\$100,000 \$5,001-\$100,000 \$5,001-\$100,000 \$5,001-\$100,000	A section of lands

SCHEDULE C - EARNED INCOME

Name: Cassie Felder Page 3 of 5

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 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.

INCOME LIMITS and PROHIBITED INCOME: The 2013 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. It is unchanged in 2014. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

AUTH, II GARINAI, GEIGHT SPES OF HOWHER (HOMAN) TO INCHES A POST AIR POST INCHES OF PROPERTY OF THE SECTION OF	ioooki aa kiroo ii waxaa igaa ii waxaa	ab) the county pr	
	Type		Amount
Source (include date of receipt for nonoralia)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Battimore, MD (July 15)	Honorarium	\$0	\$500
Examples: Civil War Route Bitchmond, VA (Oct. 2) Child War Route Route Route County Route of February	Spouse Speech	\$0 \$0	\$1,000 NA
Cassie Felder & Associates, LLC, Baton Rouge, LA	Self En	\$71,023	\$54,096
Cassie Felder & Associates, LLC, Baton Rouge, LA Spouse Salary	Spouse Salary	\$10,008	\$3,079

SCHEDULE D - LIABILITIES

Name: Cassie Felder Page 4 of 5

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.

								≥	Amount of Liability	of Lia	bility			
			?		*		es ²	•	m	70	6	*		4 25
рс, л 8 ^р .		Creditor	Date Liability Incurred MO/YR	Type of Liability	\$10,001- \$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	Over \$1,000,000
	Example	First Bank of Wilmington, DE	86/5	Mortgage on Rental Property, Dover, DE	42	- 1.5		×			. ` `			
	Great Lakes	_akes	9/97	Student Loan		, —,-		_					.	
	ACS		5/97	Student Loan		<				ļ				.
SP	Federal Loan	ıl Loan	8/08	Student Loan		ļ., <u>-</u>	<							
SP	Sallie Mae	Viae	8/05	Student Loan		<								
										,				_

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 listed in Schedule C; 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

Position	Name of Organization
Director / VP	Baton Rouge Opera Guild
Director / Treasurer	SENSE Baton Rouge
Director	Catholic Charities
President/Director	Cassie Felder & Associates, LLC

SCHEDULE F - AGREEMENTS

Name: Cassie Felder	
Page 5 of 5	

Identify the da	ate, parties to, and general terms of any agreement or arrangement that you haver defenal of payments by a former or current employer other than the U.S. gow	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 employer.
Date	Parties to Agreement	Terms of Agreement
	None	
<u> </u>		

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.

government and any information considered confidential as a result of a privileged relationship recognized by raw, the not repeat information as	onvileged relationship recognized by law. We not repeat information listed on schedule C.
Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
All sources of income from Cassie	
Felder & Associates, LLC are subject to	
attorney-client privilege.	