	,	
UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2014 - ブルルと 1, 2014 For use by candidates and new employees	Page LEGISLATIVE RESOURCE CENTER	Page 1 of 5
Name: Howes Team Limits LAWson Daytime Telephone	U.S. HOUSE OF REPRESENTATIVES  (Office Use Only)	RK TATIVES
Filer Candidate for the State: FL Date of House of Representatives District: Election: 9/4/4 Amendment  Status New officer or Employing Office:	A <i>\$200 penalty</i> shall be against any individual more than 30 days late.	be assessed ual who files ate.
in all sections, please type or print clearly in blue or black ink.  PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS		ļ
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?  Yes Wo Would 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.	efore the date r two years? Yes	□ No □
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?  Yes No Did you have any reportable agreement or arrangement with an outside entity?  If yes, complete and attach Schedule V.  If yes, complete and attach Schedule V.	angement Yes	 S 
III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?  Yes 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 III.	55,000 from <b>Yes</b>	□
Each question in this part must be answered and the appropriate schedule attached for	ule attached for each "Yes" response	עי
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS	OF THESE QUEST	SNOI
<b>TRUSTS</b> —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?	ot be Yes	_ №
<b>EXEMPTION</b> —Have you excluded from this report any other assets, "unearned" income, transactions, 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.	pendent child Yes	No C

## SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

	Name
	HOWARD
	LAWSON
I	ጀ

Page Z of S

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

Amount	1	Amount	
<b>Source</b> (include date of receipt for nonoraria)	Type	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
ENERS Infrastructure (spoup LLC	Salaey	\$ 1,400.00	42,662,50

Retirement	STATE OF FLORIDA	D.E.O	STATE OF FLORIDA	whole life Policy	Jackson Netional	JT 1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP, Mega Corp. Stock	Exclude: Your personal residence, including second homes 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.	location in Block A.	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 forces in the product of the second state.	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.	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.	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.	Asset and/or Income Source	BLOCK A
					×	×	Indefinite	×	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$250,001 - \$250,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 Spouse/DC Asset over \$1,000,000*		A B C D E F G H - L K E M	*This column is for assets solely held by your spouse or dependent child.	It generated income, the value should be "None."	If an asset was sold during the report- ing year and is included only because	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.	Value of Asset	BLOCK B
					×	×	Royalties	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income	ne)		during the reporting period.	if reinvested, must be dis- closed as income. Check "None" if the asset generated no income	plans or IRAs), you may check the "Tax-Deferred" column. <b>Dividends</b> ,	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate taxdeferred income (such as 401(k)	Type of Income	BLOCK C
	×		×		*		× ×	X	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000  Over \$5,000,000 \$201 - \$1,000 \$100,001 - \$1,000,000 \$1,000,001 - \$1,000,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000 \$100,001 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$100,000 \$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		<ul> <li>This column is for income derived from assets solely held by your</li> <li>spouse or dependent child.</li> </ul>	=	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. <b>Dividends, interest,</b> (x) and capital gains, even if reinvested, must be disclosed as	Amount of Income	BLOCK D

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

ICOME Name Hower LAWSE

				1								T -			_		
														ут, DC	Q Q		
									<u>t</u>	TRANSAMENT CA	& Daminit	Z	Social			As	
									New Marie	<u> </u>	£	New York	6			Asset and/or Income Source	
									5	3	ξ.	6	<b>P</b>			an	
									Ě	Ē _	<b>*</b>	<b>*</b>	1 1			₽	В
									B1	C .			Securi-			=	вгоск а
									<i>C</i> 2	7	62	of c	ξ			ខ្ល	×
									) () ()		Corp	'n	<b>3.</b>			₹	
									5	£.	•	L	<b>!</b>			Š	
									3	t.		25	<b>1</b>			Ĕ	
												•				ĕ	
														None	>		
														\$1 - \$1,000	œ		
					ļ				ļ	ļ				\$1,001 - \$15,000	<u>C</u>		
									<u> </u>	<del> </del>	ļ		-	\$15,001 \$50,000	D E	<b>S</b>	
			<u> </u>		1				<b> </b>	<b>-</b>				\$50,001 - \$100,000 \$1 <b>00,001 - \$250,000</b>	71	Value of Asset	<u>æ</u>
		<u> </u>	<b></b>		i					+	-	-	<del>  </del>	\$250,001 - \$500,000	G	<u>o</u>	вгоск в
										-	1			\$500,001 - \$1,000,000	I	≽	<del>X</del>
														\$1,000,001 - \$5,000,000	_	še	
														\$5,000,001 - \$25,000,000	ے	~	
			ļ	<u></u>						<u> </u>				\$25,000,001 - \$50,000,000			
					<u></u>					-	<u> </u>	·		Over \$50,000,000 Spouse/DC Asset over \$1,000,000	<u>.</u>		
<u> </u>		<u> </u>								1	1			NONE	, >		
			ļ					L		<b>†</b>	1	1	<b>-</b>	DIVIDENDS		_	
														RENT		Type of Income	
														INTEREST		e 0	BLOCK C
									<u> </u>	ļ	<u> </u>	P		CAPITAL GAINS		Î	Š
				,						ļ	ļ	25	ļ	EXCEPTED/BLIND TRUST TAX-DEFERRED		8	C
$\vdash$									_	-		争		Other Type of Income(Specify:		₹	
												12		Partnership Income or Farm Incom			
										×				None -			
			-	-	<u> </u>						<u> </u>	<u> </u>	-	\$1 - \$200 =			
														\$201 \$1,000 <b>=</b>			
									<u> </u>	ļ	ļ			\$1,001 – \$2,500 <b>\rightarrow</b>	δ		
				<u> </u>	ļ				<u> </u>	<u> </u>	ļ	X	×	\$2,501 - \$5,000 <	Current Year		
		ļ	ļ <u>-</u>							<del> </del>	<u> </u>	1		\$5,001 - \$15,000 \(\leq\$ \$15,001 - \$50,000 \(\leq\$ \$50,001 - \$100,000 \(\leq\$ \$100,001 - \$1,000,000 \(\text{R}\)	፮		
		ļ		<b>-</b>						<del>                                     </del>	<del> </del>	<del> </del>		\$50,001 - \$100,000 \(\leq\)	a≾ I		
			<del>                                     </del>						1		ļ-,			\$100,001 - \$1,000,000 😾	ă	➤	
			·											\$1,000,001 - \$5,000,000 ×	- 1	콩	
														Over \$5,000,000 ×	- 1	5	₽
								ļ	ļ	ļ				Spouse/DC Income over \$1,000,000* ≚		<u>c</u>	BLOCK D
									ļ	<b>L</b>	ļ	<u> </u>		None –	1	ᅙ	Ĝ
			}						-	×	<del> </del>	ļ		\$1 - \$200 = \$201 - \$1,000 =	1	Amount of Income	
		<del> </del>	<del> </del>				<b></b>	····	†		1	1		\$201 - \$1,000 \(\exists\) \$1,001 - \$2,500 \(\times\) \$2,501 - \$5,000 \(\times\)	꽃	ne	
			<del>                                     </del>	<b> </b>						1				\$2,501 - \$5,000 <	Preceding		
												×	X	\$5,001 − \$15,000 ≤	<u>ĕ</u> .		
														\$15,001 <b>-</b> \$50,000 ≦	ا ق		
		ļ	ļ		ļ	ļ			<b></b>	<del> </del>	<del> </del>	<del> </del>	ļ	\$5,001 - \$15,000 \leq \$15,001 - \$50,000 \leq \$50,001 - \$100,000 \leq \$100,001 - \$1,000,000 \text{\ti}\text{\texi{\text{\texi\tin\texi{\text{\texi\til\tex{\text{\texi{\text{\text{\text{\tin\tin\texi{\text{\text{	Year		
		<del>                                     </del>	<u> </u>					<u> </u>	<u> </u>	<del> </del>	<del> </del>	<del> </del>	<del> </del>	\$1,000,001 - \$1,000,000 \(\overline{\times}\)	릭		
				<u> </u>	-	<del>                                     </del>				<del> </del>		1	+	Over \$5,000,000			
		<del>                                     </del>	<b>†</b>	<del> </del>	<u> </u>	ļ		<b></b>	†	+	†	1		Spouse/DC Income over \$1,000,000° ≚			
	ì	1	1	ı		ii		ι	1					<u> </u>			

This page may be copied if more space is required.

SCT
Ę
Ē
=
LIAB
=======================================
SEI

Name
HOWARD
لمموسهما

Page 5 of 5

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

							Αm	Amount of Liability	of Liab	ility			
ч°S	Creditor	Date Liability Incurred mo/year	Type of Liability	00 🏲	00 00		001			00,000 =	00,001		byover ス
		j		\$10,00 \$15,00	\$15,00 \$50,00 <b>\$50,00</b>	<b>\$100,0</b> \$100,0 <b>\$</b> 250,0	\$250,0 \$500,0	\$500,0 \$1,000	\$1,000 \$5,000		ļ	Over \$50,00 Spouse	Liability \$1.000
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE			Ш						ŀ	
	Florida Cesdit Union	04.201 l	Judge ment		×								

## 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);

		Position	and positions solely of an honorary nature.
		Name of Organization	ature.