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FINANCIAL DISCLOSURE STATEMENT For New Members.	FORM B For New Members, Candidates, and New Employees	2011 AUG 4 AM 1:33
Name: GARY JAMES PALMER Daytime Telephone	<u>਼</u>	GEFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES
New Member of or Candidate for State: ALABAMA U.S. House of Representatives District: 6 Candidates - Date of Election:	Check if Amendment	(Office Use Only)
New Officer or Employee Employing Office:	Peniod Covered: January 1, 2013 to DECEMBER 34, 2013	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	ONS	
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? or b. Make more than \$200 in unearned income from any reportable asset during the reporting period?	E. Did you hold any reportable positions during or in the current calendar year up through the	the date of filing?
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes X No 8 reporting period?	F. Do you have any reportable agreements o an outside entity?	or arrangements with Yes X No
D. Did you, your spouse, or your dependent child have any reportable Yes No X Jability (more than \$10,000) at any point during the reporting period?	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	an \$5,000 from a single Yes X No S
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "Y THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED."		ES" TO COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>BOTH</u> OF THE	- ANSWER <u>BOTH</u> OF THESI	SE QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed this report details of such a trust that benefits you, your spouse, or dependent child?	1 1	Have you excluded from Yes 🔲 No 🔀
EXEMPTION - Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or dependent child because for exemption? Do not answer 'yes' unless you have first consulted with the Committee on Ethics.		ause they meet all three Yes No X

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name GARY JAMES PALMER

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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	Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	rement programs, and benefits i	received under the Social	Security Act.
	Source (include date of receipt for honoraria)	Type	Amount	unt
	Comics (House date of Isoseph of Heriotatia)	. 1900	Current Year to Filing	Preceding Year
	XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Evamples:	First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
Lagringia.	XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
	Harris County, Texas Public Schools	Spouse Salary	NA	NA
ALAB	ALAGAMA POLICY INSTITUTE	SALARY	\$136,913	\$ 125,755
AMER	AMERICAN MATORITY ACTION	FEE	36,483	\$ 40,400
1186	LIBERTY FOUNDATION OF CHUAHOMA	CONSULTIME	1,000	
FAST	FAST APPLIANCE SERVICE	Spouse salvey	# 2,290	\$ 2,346

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MONEY	AUTHORI	FO TUSTL	-PIMCO SH		-PIMCO LO	HUSSMAN S	CHARLES		Examples:	Sp	Exclude: Your person homes and vacation homes and vacation homes and vacation homome during the repoing \$5,000 or less in accounts; and any firderived from, a federal the Thrift Savings Plan. If you so choose, you from source is that the thid (DC) or is joil in the optional column of the control of the instructions are detailed discussified as a refer to the instructions.	mat is not publicly in ness, the nature of location in Block A.	an ownership i	rentat or other ride a complet tal property," an	all IRAs and other provide the provide the punt that exceed	Provide complete names o (do not use ticker symbols).	ntify (a) each as come with a fail end of the restrable asset or than \$200 in "	ASSOT and	
CHARLES SCHWAB GOUT MANUAL FUND 403B7	MUHORAY CL INSTR	2	-MINCO SHOOT TERM LASSIC CL		-PINCO 10W BULATION FUND FUSTE CL	- HUSANA STUATEBIC TOTAL RETURN	SCHWAB IRA	1st Bank of Paducah, KY accounts	Simon & Schuster	SP Mega Corp. Stock	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental homes 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.	that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For an ownership interest in a privately-held business	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 accede 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 "unearmed" income during the year.	Asset and/or income Source	BLOCK A
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name GARY JAMES PALMER

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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Name GARY JAMES PHLMER

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COL	Continuation Sheet (If needed)				
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SCHEDULE II -- ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name GARY JAMES PALMER

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SCHEDULE II -- ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Name GARY JAMES PALMER

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	`	`	`			\		*	Υ				\ 	None	Amount (вго
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name CARRY JAMES PALMER

Page 8 of 10

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SCHEDULE III - LIABILITIES

Name GARY JAMES PALMER

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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 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

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		Over \$50,000,000	
		Spouse/DC Liability over ス \$1,000,000	

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 individity hature.	y nature.
Position	Name of Organization
CONSUTANT	AMERICAN MAJORITY ACTION
BHEF DEVELOPMENT OFFICE	BHEF DEDELOMENT OFFICER ALABAMA POLICY INSTITUTE
PANTHER	CANAM LLC

SCHEDULE V — AGREEMENTS

Name GARY JAMES PALMER

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service; continue of the plan mainte	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.	n the U.S. Government; or continuing participation in an employe
Date	Parties To	Terms of Agreement

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 1.

 		 		_	_	_
		AMERICAN MATURITY ACTION	ALABAMA POLICY INSTITUTE	Example: Doe Jones & Smith, Hometown, Homestate	Source (Name and Address)	
		CONSULTING/FUNDRAKING	PUBLIC POLICY RESEARCH / FUNDRALS NO /CONSULTING	Accounting services	Brief Description of Duties	