₹	% 	≱pendent child	"unearned" income, transactions, or liabilities of a spouse or dependent child unless you have first consulted with the Committee on Ethics.	st consulted with the C	arned" income ss you have fir	er assets, "une swer "yes" unle:	this report any oth mption? Do not ans	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or obscause they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	EXEMPTION —because they m
™	Yes 🔲	ot be	ccepted trusts" need no	s and certain other "ex spouse, or a depende	hittee on Ethica	d by the Comn h a trust benefi	lind Trusts" approve	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 benefiting you, your spouse, or a dependent child?	TRUSTS - Deta
S	QUESTIONS)F THESE	SWER EACH OF THESE QUESTIONS	WATION — ANSV	T INFORI	OR TRUS	EPENDENT,	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLUSION
	response.	each "Yes"	lule attached for each "Yes" response	ppropriate sched	and the a	e answered	is part must b	Each question in this part must be answered and the appropriate schedul	
No No	Yes	\$5,000 from	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.	VI. Did you receive compe a single source in the two If yes, complete and atta	No No	Yes	have any report- porting period?	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III.	III. Did you, your sable liability (more if yes, complete s
No.	Yes	rangement	cortable agreement or arrangement ttach Schedule V.	V. Did you have any reportable agreemer with an outside entity? If yes, complete and attach Schedule V	<u>8</u>	Yes 🖼	receive "unearned" lod or hold any end of the period?	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? If yes, complete and attach Schedule II.	II. Did you, your s income of more th reportable asset w If yes, complete s
№	Yes 🔲	efore the date or two years?	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.	IV. Did you hold any rep of filing in the current ca if yes, complete and at	N _O	¥ ₈₆	ne (e.g., salaries or eporting period?	 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, complete and attach Schedule I. 	i. Did you or your tees) of \$200 or m If yes, complete a
				ANSWER EACH OF THESE QUESTIONS	OF THES	ER EACH	I	In all sections, please type or print clearly in blue or black ink PRELIMINARY INFORMATION — ANSW	PRELIMINA
assessed who files	A \$200 penalty shall be assessed against any individual who files more than 30 days late.	A \$200 per against an more than	Check if Amendment	11/4/14	Date of Election:	NY-1	State: NY Ives District: Employing Office:	Candidate for the House of Representatives New officer or employee	Filer
	(Office Use Only)	7							
ATIVES	U.S. HOUSE OF REPRESENTATIVES	U.S. HOUSE		Telephone:	Daytime		Demos	George G. De	Name:
990社 <u>6</u> 27	LEGISLATIVE RESOURCE TENTER 2014 JUL PM : 27	LEGISLAT	I B and new employees	FORM B For use by candidates and new employees		ATIVES	REPRESENTAI ATEMENT 1 Present	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1,2011Present	UNITED STA
	101	-							

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name George G. Demos Page 2 of 6

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.

	Course (include date of receipt for benegaria)		Amount	unt
	Course (Include date of levelpt for including)) ype	Current Year to Filing	Preceding Year
	XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Evamoles:	First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
To the second	XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
	Harris County, Texas Public Schools	Spouse Salary	NA	NA
	AKT Development	Spouse Salary	\$11,500	\$24,000
			:	

\$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 \$25,000,000	BLOCK A BLOCK B BLOCK B BLOCK B Walue of Asset
None None None None None S1-\$1,000 S1-\$1,000 S1,001-\$15,000 None S15,001-\$100,000 S250,000 S250	Source
None	Source
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None None None None None S1-\$1,000 S1-\$1,000 S1,001-\$15,000 None S15,001-\$100,000 S250,000 S250	Source
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None	Source
None	Source
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None	BLOCK B
Spouse/DC Asset over \$1,000,000* X NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership income or Farm Income) Spouse/DC Asset over \$1,000,000* X NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership income or Farm Income)	BLOCK B Value of Asset
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Nece -	7
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\$1 - \$200 = pour de come de se	
\$201 - \$1,000 = \$\frac{1}{2} \frac{1}{2} \	,
× \$1,001 − \$2,500 ₹	
×× \$2,501 - \$5,000 <	
X x \$2,501 - \$5,000 Current South you	
\$15,001 - \$50,000 \$50,001 - \$100,000	
\$100,001 – \$1,000,000 \times \text{B1} \text{C}	_
\$1,000,001 – \$5,000,000 ×	3
Over \$5,000,000 ≥ 9 5 5 2 2 2	₽
Spouse/DC Income over \$1,000,000* ≧	3 ≃ 1
None — Se ve con a	ŢΟ
\$1 - \$200 = rom \(\hat{a} \hat{b} \hat{c} \times \	
× \$201 − \$1,000 ≡ TO S S S S	BLOCK D
\$1,001 - \$2,500 <	OCK D
** \$2,501 - \$5,000	BLOCK D
\$5,001 - \$15,000 \(\delta\) \(\de	OCK D
X \$201 - \$1,000	OCK D
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Over \$5,000,000 XI	OCK D
Over \$5,000,000 ×	OCK D
Spouse/DC Income over \$1,000,000* ≚ 5 5 5 2 2	OCK D

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

George G. Demos Page 4 of 6.

Contir	Continuation Sheet (if needed)			Name George G. Demos Page 4 of	0,0
\neg	BLOCK A	BLOCK B	BLOCK C	BLOCK D	
	Asset and/or Income Source	Value of Asset	Type of Income	Amount of Income	
SS Q,		A B C D E F G H I J K L 00° M		Current Year Preceding Year	=
Ä		00 000 ,000	(Specil	X IIIA IIA A A III II I	×
DC		5,000 50,000 \$100,000 \$250,000 \$500,000 \$1,000,000 \$5,000,00 1 - \$50,000 00,000	AINS D/BLIND TRI	500 500 500 6,000 6,000 60,000 \$5,000,000 600 600 600 600 600 600	\$5,000,000 000
		None \$1 - \$1,000 \$1,001 - \$1! \$15,001 - \$! \$50,001 - \$ \$100,001 - \$ \$250,001 - \$ \$500,001 - \$ \$1,000,001 - \$ \$5,000,001 - \$ \$25,000,001 - \$ \$25,000		None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,5 \$2,501 - \$5,00 \$5,001 - \$15,0 \$15,001 - \$16 \$100,001 - \$1 \$1,000,001 - \$1 \$1,000,001 - \$1 \$1,000,001 - \$1 \$1,001 - \$2,5 \$2,501 - \$5,00 \$5,001 - \$15,001 \$15,001 - \$15,001 \$15,001 - \$15,001 \$15,001 - \$15,001 \$100,001 - \$1	\$1,000,001 - Over \$5,000,0 Soouse/DC Income

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SCHEDULE III — LIABILITIES

Name George G. Demos Page 5 of 6

owed 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. 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-

		Г	_ D	-
		L	J D SP,	
		Example:		
		Example: First Bank of Wilmington, DE	Creditor	
		May 1998	Date Liability Incurred mo/year	
		Mortgage on 123 Main Street, Dover, DE	Type of Liability	
			\$10,001 \$15,000	
			\$15,001— \$50,000 0 0	
		⊢	\$50,001— \$100,000 O	
	-		\$100,001— \$250,000 □ \$250,001—	
		L	\$500,000 m	Amou
			\$1,000,000	int of
	_	_	\$1,000,001— \$5,000,000 6 \$5,000,001—	Amount of Liability
	<u></u>	L.,	\$25,000,000 — \$25,000,001—	ŧγ
	:		\$50,000,000 —	
			\$50,000,000 C Spouse/DC	
			Liability over ス \$1,000,000	

SCHEDULE IV — POSITIONS

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 officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise,

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

SCHEDULE V — AGREEMENTS

Name George G. Demos Page 6

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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

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

GPO: 2013

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