		HAND
UNITED STATES HOUSE OF REPRESENTATIVES	VES Form A	
2013 FINANCIAL DISCLOSURE STATEMENT	For Use by Members, Officers, and Employees	LEGISLATIVE RESCURCE CENTER
Name: Sco77 GARRETT	Daytime Telephone: <u> </u>	2014 MAY 15 AM 9: 27 We so thouse of Representatives (Office Use Only)
FILER STATUS Member of or Candidate for State: U.S. House of Representatives District:	N, J. Officer or Employing Office:	e :
REPORT 2013 Annual (Due: May 15, 2014)	Amendment Termination Date:	n Date:
PRELIMINARY INFORMATION - ANSWER EACH OF	THESE QUESTIONS	
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? 	Yes No F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	or arrangement with an Yes No No
B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?	Yes No No No No neportable gift(s) totaling more than \$350 in value from a single source during the reporting period?	child receive any value from a single Yes No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	Yes No H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$350 in value from a single source during the reporting period?	child receive any el totaling more than e reporting period?
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Yes No I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period?	donation to charity in Yes No
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes No ATTACH THE CORRESPONDING	CORRESPONDING SCHEDULE IF YOU ANSWER "YES"
IPO, EXCLUSION OF SPOUSE, DEPENDENT,	DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF	ER EACH OF THESE QUESTIONS
IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you the Committee on Ethics for further guidance.		answered "yes" to this question, please contact Yes No
TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" this report details of such a trust that benefits you, your spouse, or dependent child?	mmittee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from dent child?	lave you excluded from Yes No 🖊
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	earned" income, transactions, or liabilities of a spouse or dependent child because they meet all three with the Committee on Ethics.	use they meet all three Yes No 🗹

SCHEDULE A - ASSETS & "UNEARNED INCOME"

SC	SCHEDULE A – ASSETS & "UNEARNED INCOME"	Qο	ۓ	Ž	≌	ŝ	Ü	Z	ပ္ထ	Z m	3				Name:	ē	\sim	<u>ر</u> _	7100	-1		SAG	ಶಶನ	\neg	7				D	Page	<u>}</u>	9
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	BLOCK A Asset and/or income Source						<u>د</u>	BLOCK B	F Ass	<u> </u>		ļ			,		₹	BLOCK C	BLOCK C	920						Ā	로 ^말	ELOCK D	BLOCK D Amount of Income	Þ		BLOCK E
dentify	î î		dicate	valu	e of	sset	et clo	se of	# e a	portin	g perj	& ==	you u		CHECK CHECK	<u>a</u> Ω	Check all columns that apply.	that	apply		9000	unts that		ssets	for wh	ch yo	chec	£	ax-Defe	ined" in B	lock C, you	Indicate if the
produ	on of income and ng \$1,000 at the e		valuatio used.	n met	hod o	ther #	an fai	r mark	et val	ue, ple	ase sp	becify I	valuation method other than fair market value, please specify the method used.		genera 529 a	te tax	generate tax-deferred income (such as 529 accounts), you may check the	ed inco	ome (s	× the	701()	generate tax-deferred income (such as 401(k), IRA, or 529 accounts), you may check the "Tax-Deferred" interest and canted gains		check gory c	1 Be #	me by	chec	Eg 7	all othe	er assets propriate	may check the "None" column. For all other assets indicate the category of income by checking the appropriate box below. Invidends interest and rapidly points aven if an invested.	asset had purchases (P),
and incom	and (b) any other reportable asset or source of income that generated more than \$200 in "unearned" income during the year.		- cause	it ge	vas so	를 하는 다음	ning t	He ver	orting sho	perio uld be	d and None	. is	If an asset was sold during the reporting period and is included only because it generated income, the value should be "None."	_	column. even if for asse	f rein	column. Dividends, interest, and call even if reinvested, must be disclosed for assets held in taxable accounts. Of	ds, in Laxab	terest, the acc	and disclor ounts	Che sed as capa	column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None"		must be a	Dividends, interest, must be disclosed accounts. Check	closed a: Check "I	nd ca	me fo	and capital gains, evas income for assets "None" if no income	and capital gains, even it as income for assets held "None" if no income was	in taxable earned or	sales (S), or exchanges (E) exceeding \$1,000
Provi (do no	Provide complete names of stocks and mutual funds (do not use only ticker symbols).		u hav	e no i	you have no interest.	A Sets	eid by	you	spods	<u>q</u>	, de la constant de l		Culturii Miis ful dasetsi teriu by youl apouse or uerperioerii Ciliiu III Willoli You have no interest.		period.	isset g	jenerai	ed no	Incom	e qui	eui Gu	If the asset generated no income ourning the reporting period.	* 10	*Column X	- E	or ass	ets he	E Dy	your s	pouse or	enerated. Column XII is for assets held by your spouse or dependent	in the reporting period. If only a portion of
401(k	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.	5. 8 E . 8																					G	T WI	Sil you	iave	child in willich you have no interest	gar				an asset was sold, please indicate as follows: (S (part)).
I de de	sound after each penguistrated the amount	. ▶		-	C	ø	π.	77	G	*	•	~	,-	Z										=	#	V .	۱۸ A	*	≨	×	.8 ×⊩	Leave this column
in all	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.	ਲ 0ੇ ਹੈ	:	<u> </u>				43,51				, i.e. Chri	vii. 10				<u> </u>									, , , ,	112		Z			plank if there are no transactions that exceeded
For re	For rental and other real property held for investment provide a complete address or description, e.g.	0 3		9 8 3					<u></u>	[55] <u>[3</u> 3		3642.7				na z	<u> </u>	,	* A				61 (C. C.) (2. C. C.)			3,73,	- %				i de	
ment:	rental property," and a city and state.		Y - X	7. a	:77.7		ψ <u></u>			<u> </u>	Çulla ((7.3		Veri adamse v		- 12.4 - 12.15	*> **.	, , , , , , , , , , , , , , , , , , ,			<u> </u>		e ij d				3.33		.54.**			
For a busin	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	is a si	GAL.	3333	~~ <u>~</u>		- 1 077 m	187.5	gg comes	<u> </u>						in electric			<u> </u>		<u></u>					(% <i>0</i> 5.4	<u> </u>			- 18. 29 8 478 8		
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home	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period) and any financial	í i á	Carl C	1000	80 T.C.		2242-1					<u> </u>										e)				Es :	lang.	\$1.00 pt				
intere	interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.		10 × 10 ×	<u> </u>	7185.	30 (A.C.)		i de	عنمنية	Bara Barasa	Lagist.	3.05.5	ight.	-10		iks.	<u> 2118</u>		*		<u> </u>	TI Incom				. 3 ²⁷ C	24.3 Y	18 Jan	<u>msicaši</u>		00,000*	
Excel	If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF"	Ŧ, B,	58.13	× 22. v	202			è s	S. 7 7 5 5		i de	<u> </u>		00*		Algal This		Section 2	<u> </u>		********	ne or Far	ek e						2. ZSA 5)		over \$1,0	
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ag For	For a detailed discussion of Schedule requirements, please refer to the instruction booklet	> None	is then		\$1,001-\$1		\$50,001-		\$250,001	\$1,000.00	S. COLO	\$25,000,0	(m)	Spouse/D	BUILDEN	DIVIDEN	INTERES	CHEST	EXCEPTI	Tables of	Other Typ	(Specify:	1.00	\$1-\$200	40(4)	\$1,001-\$	\$5,001-\$	inter-	\$50,001-	\$1,000,00	Spouse/D	P, S, S(part), or E
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																	Spouse/DC Asset with Income over \$1,000,000*		의
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

SCHEDULE B - TRANSACTIONS

Name:

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Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period of any security or real property held by you, your spouse, or your dependent child for investment or the production of income. Include transactions that resulted in a capital loss. Provide a bief description of an exchange transaction. Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is soid, please choose 'partial sale' as the type of transaction. SP DC JT Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A. * Column K is for assets solely held by your spouse or dependent child ş Dreyfus Mega Corp. Stock S+8 Asset 4 VILLA Type of Transaction Exchange Check Box if Capital Gain Exceeded \$200 11/3/12 Date 3/5/13 \$15,001-\$50,000 \$100,001-\$250,000 0 Amount of Transaction \$500,001-\$1,000,000 \$5,000,001-I Over \$50,000,000

SCHEDULE C - EARNED INCOME

Name: S0077 GARRETT Page 5 of 9

EXCLUDE : Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	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 a spouse, lithe source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.	
	ist	

			i i			\mathcal{N}	Ļ	Examples: -			types of income (nota
						None	Ontario County Board of Education	Civil War Roundtable (Oct. 2)	Keene State	Source (PROHIBITED INCON
							ition			Source (include date of receipt for honoraria)	IE: The 2013 limit on fees, and payments fo
										eceipt for honoral	outside earned income r professional services
										ria)	of Members and em involving a fiduciary re
											ployees compensa lationship) were to
							Spouse Salary	Spouse Speech	Approved Teaching Fee	Type	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. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited.
		 					7	\$1	\$6	Am	" rate was \$26,955. Ir
		ė į					N/A	.000	\$6,000	Amount	n addition, certain

SCHEDULE D - LIABILITIES

Name: Sco77 GARRC77 P	Page 6 of 9
itor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you lies, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to	int owed during the reporting personal residence (unless you live liable); and liabilities owed to

Report liabilities of over \$10,000 owed to any one cred period. Members: Members are required to report all I 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 reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child. rent it out or are a Member); loans secured by automob

	DC. JT	5.5	Example		Cn	Car	Caa	Caa
	Creditor		Pie First Bank of Wilmington, DE		2010 UNION MORPHE Assin	CREON UMON MONTHE ASSIN 8/30/10 MONTAGE ON HOME	1910 UNION MONGRE Assin	1910 UNION MORRY Assin
	Date Liability Incurred	MO/YR	5/98	/ /	8/30/10	8/30/10	8/30/10	8/30/10
	Type of Liability		Mortgage on Rental Property, Dover, DE	Mongaye on Home	0 0	100 VOND SCHOOL KODD	MONDAY M. KORO	MONDOX M.
		gloot: Historia			10. (E. 19.)	4		
	œ	\$15,001- \$50,000		×				
	c	\$50,00 \$100,000 \$100,001- \$250,000	X				100	
Amount c		\$500,001-					X	
Amount of Liability	T	\$1,000,000						1000
	-	\$5,000,001- \$25,000,000					25.3	The state of the s
	,000 _	Over \$50,000,000	NO.		egy()	22.25(2.3		

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year 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.

Position	Position Name of Organization
Nine	

SCHEDULE F - AGREEMENTS

agreement or arrangement that you have with respect to: future employment, a leave of absence during the period of government service;	z
ect to: fu	lame:
ture employment	Sco77
t; a leave of absence during the period o	Name: Scozz GARREZZ
of government service;	Page_7of9_

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. Identify the date, parties to, and general terms of any

Date Parties to Agreement	Terms of Agreement
None	

SCHEDULE G - GIFTS

Report the source (including name, city, and state), a brief description, and the value of all gifts totaling more than \$350 received by you, your spouse, or a dependent child from any source during the year. **Exclude**: Gifts from relatives, gifts of personal hospitality from 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. **Note**: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the ᇛ

	Source	Description	Value
Example:	Mr. Joseph Smith, Arlington, VA	Silver Platter (determination of personal friendship received from the Ethics Committee)	\$400
		Nons	
			i

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name:
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GARRETT
Page 8 of 9
": Sco77 GARRETT Page 8

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

EXCLUDE: Privately-sponsored travel approved by the Ethics Committee, if post-travel disclosure was filed with the Clerk; 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 (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

Campagn	Cambaigh אינ, in aver provided to a spouse or dependent child that is totally independent or his or her relationship to the hier.	cotally independent of his o	r her relationship to the filer.			
	Source	Date(s)	City of Departure – Destination — City of Return	Lodging? (Y/N)	Food? (Y/N)	Family Member Included? (Y/N)
	Government of China (MECEA)	Aug. 8-11	DC-Beijing, China - DC	~	~	Z
Lvarapras.	Habitet for Humanity (charity fundraiser)	Mar. 3-4	DC-Boston-DC	۲	*	٧
THE HE	THE HEARINGE fourmanter	2/6-8	DC-JALTIMONE MD -> DC	×	~	Υ
Annac	13717076 - ASI	3/7-10	DC-Sea Iswa, GA > DC	~	~	7
Aspen	l .	8/12-19	NJ- ETHIOPIN -> NJ	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	< ^	<u>`</u>
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SCHEDULE I – PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

	Name:
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	Page 9
	of 9

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the spo	sor of an event to a charitable organ	nization in lieu of paving an	honorarium to voii. A
separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.			,
Source	Activity	Date	Amount
Examples: Association of American Associations, Washington, DC XYZ Manazine	Speech	Feb, 2, 2013 Aug. 13, 2013	\$2,000 \$500
2001			