IINITED STATES HOUSE OF REPRESENTATIVES	FORM B	COTMANDE II FORBLE
FINANCIAL DISCLOSURE STATEMENT	, and New Employees	PUSTIVIANIA IEEE
Name: Elliot Fausz	Daytime Telephone:	2014 JUL 16 PM 1:45
New Member of or Candidate for State: UA  U.S. House of Representatives District: O4  FILER  Candidates – Date of Election:   - 04 -  4	Check if Amendment	OFFICE OF THE CLERK DIKES OF REMESES OF REME
New Officer or Employee  Employing Office:	Period Covered: January 1, 2014 to 2005/1	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER EACH OF	F 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?	No  E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	g the reporting period Yes No No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes reporting period?	No F. Do you have any reportable agreements or arrangements with an outside entity?	arrangements with Yes No
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 \$5,000 from a single source in the current year and two prior years?	1 \$5,000 from a single Yes No
ATTACH THE CORRESPONDING THIS FORM INCLUDES ONLY THE SCHEDUI	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	3" COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER B	INFORMATION - ANSWER BOTH OF THESE	E QUESTIONS
TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" neithis report details of such a trust that benefits you, your spouse, or dependent child?	on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from	ave you excluded from Yes No
<b>EXEMPTION</b> – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	ncome, transactions, or liabilities of a spouse or dependent child because they meet all three Committee on Ethics.	se they meet all three Yes No No

SCHEDULE A - ASSETS & "UNEARNED INCOME"

							누	SP,	all in in \$55,00 more For re provide the treatment of treatment of the treatment of the treatment of the treatment of treatment of the treatment of the treatment of the treatment of treatment of the treatment of the treatment of treatment of the treatment of the treatment of the treatment of t	401(k	Provi	income "uneam	Identify production exceeding and (b)	_	
						Exan			For bank and other cash accounts, total the amount 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 held for investment, provide a complete address or description, e.g., "rental property," and a city and state.  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 location in Block A.  Exclude: Your personal residence, including second homes and vacation homes (urnless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal interest in, or income derived from, a federal retirement program, including the Thrift 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 income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left.  For a detailed discussion of Schedule A For a detailed discussion of Schedule A	in the art of the reporting that is caused as 401(t) 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 only ticker symbols).	ncome which generated more uneamed" income during the year.	Identify (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of	Assets and/or Income Sources	
	_	$\vdash$	>	1		Examples:	ŀ		st-bearing tt every \$1,000 is and other comple perty, an and other comple strong comple perty, an and other comple strong	s) pro	only t	which generated sd" income during the	(a) each asset held for investment or on of income and with a fair market value up \$1,000 at the end of the reporting period, any other reportable asset or source of	is a	
	•			<u> </u>	<u>a</u>	Si.	₹		r final right in the right in t	vide t	icker	e dur gene	er ra	nd/c	_
	_	<			뚪	9.0	ය		accounts. accounts. accounts. ancial institutional real propert address. a city and s a city and s a city and s active and	e de de	es of	ing th	and and ports	7	BLOCK A
ļ			1		ABC Hedge Fund	Simon & Schuster	Mega Corp Stock		ppenty ass ( a pri , stari ( tuni , stari ( tuni ) perio per	e repr	ols).	more ne year.	able of With	ç	×
					ă	E.	<u> </u> *		ounts, total the amount is to. If the total is over institution where there is bearing accounts.  perty held for investment ss or description, e.g., and state.  a privately-held business state the name of the its activities, and its activities, and its A.	or ear	ks a	# a	for a fai the n	me (	
-									al the to toke when secrip secrip secrip secrip secrip rities,	three	3	than	inve ir ma epont t or	šč	
-					ĺ		li	i	total is a where the amounts total is a where there counts.  or investm coription, a fee Savings Place, a fee	Set h	r ual	<b>\$</b> 200	stmer rket ng p	Seo.	
					×	Γ		#	ment, in e.g., e.g., itse	,, 85 g	funds	5 5	nt or eriod,	-	
									None						
				ļ					\$1-\$1,000	3	*Column M is for assets held by yuchild in which you have no interest	uld be	Indicate value of asset at close you use a valuation method otly please specify the method used. If an asset was sold during the		
		_	ļ	<u> </u>	<u> </u>	Indefinite	_		\$1,001-\$15,000	····	Tich M	No only	value a val vecify		
		ļ	ļ	ļ	<u> </u>	₽	_	4	\$15,001-\$50-000 C	2	you h	ne. Tec	uatio the r		
		ļ			-	╁-	<b>×</b>		\$50,001-\$100,000	_	ssets lave r	ause	n me	<u>Val</u>	
		ļ	ļ		1	+	-		\$100,001-\$250,000 T		o int	≕ E	Mark Services	E C	BL O
					×	╁		$\dashv$	\$250,001-\$500,000 c: \$500,001-\$1,000,000 x	-	by y	lener	e de care	ž. D	BLOCK B
						+		-	\$1,000,001-\$5,000,000		*Column M is for assets held by your spouse or dependen child in which you have no interest.	included only because it generated income, the value should be "None."	Indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, please specify the method used.  If an asset was sold during the reporting period and is	Value of Asset	_
						╁╴		1	\$5,000,001-\$25,000,000		Suod	inco	n fair	-	
		<u> </u>	<u> </u>	<del>                                     </del>	-	-	H	┪	\$25,000,001-\$50,000,000	_	9 9	, and the	orting r mai		
				<del> </del>	<del>                                     </del>	+	-	1	Over \$50,000,000	-	јере	<b>₹</b>			
		<b> </b>	l		<del> </del>	T		╗	Spouse/DC Asset over \$1,000,000*	:	ndeni	value			
						1			NONE		향				
							×	,	DIVIDENDS		Check "None" if the asset genincome during the reporting period.	interest, reinveste for asse	(S) gen a - S		
- 1								1	RENT		None	\$ £	RAA erate	_	
		<del>                                     </del>	<b>†</b>		<u> </u>	╁		7	INTEREST		g ± ≡	and capital d, must be dis ts held in t	tax- 529	Уþе	
						T			CAPITAL GAINS		g ta	声	defer	9,	BLOCK C
	-					t			EXCEPTED/BLIND TRUST		asse	discip	red ofum	Σ	č
		<del> </del>		<del> </del>		+-			TAX-DEFERRED	-1	yt ge penio	gains, closed a	n your	Type of Income	
			i		Partnership Income	Royalties			Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		nerated r	interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts.	Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, 529 accounts), you may check the "Tax-Deferred" column. <b>Dividends</b> ,		
					8 €	S	-	+	None		ő.				
						$\vdash$	×	: †	\$1-\$200 =			*Column	1 0 1 2 2 3 3 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
						T		1	\$201-\$1,000 =				sets f		
									\$1,001-\$2,500 <	ı		is for	in di		
						×			\$2,501.\$5,000 <	5		ass.	z a a ch		
					×				\$5,001- <b>\$</b> 15,000 ≤	<u>ē</u>		के ह	100		
		Ì	<u> </u>			L		_	\$15,001- <b>\$</b> 50,000 ≦	Current Year			a a a a a a a a a a a a a a a a a a a		
	_						ı		\$50,001-\$100,000	₩		· Yo	P Z Z		
							ļ	4		<b>*</b>		Ĕ =			
								$\exists$	\$100,001-\$1,000,000 😾	<b>*</b>		ur spo	Tax-I	_	
									\$1,000,001-\$5,000,000 ×	24		ur spouse	Tax-Defer f income I ested, mu	Ā	
									\$1,000,001-\$5,000,000 × Over \$5,000,000 ×	ar		ille was earlied	Tax-Deferred" f income by chested, must be	Amoun	B
									\$1,000,001-\$5,000,000 ×  Over \$5,000,000   Spouse/DC Income over \$1,000,000*  \$\leq\$	ar		rur spouse or depend	Tax-Deferred" in BI f income by checkin ested, must be di	Amount of	BLOCK
									\$1,000,001-\$5,000,000 ×  Over \$5,000,000   Spouse/DC Income over \$1,000,000*  None  -	ar		iur spouse or dependent c	Tax-Deferred" in Block of income by checking the sted, must be disclosed a representations.	Amount of Inc	BLOCK D
									\$1,000,001-\$5,000,000 ×  Over \$5,000,000   Spouse/DC Income over \$1,000,000*  None   \$1,\$200 =	ar		l is for assets held by your spouse or dependent child i	Tax-Deferred" in Block C, yo f income by checking the app ested, must be disclosed to was somed or constraint	Amount of Incom	BLOCK D
							*		\$1,000,001-\$5,000,000 ×  Over \$5,000,000 ×  Spouse/DC Income over \$1,000,000* ×  None \$1-\$200 \$201-\$1,000 \$1,001,\$2,500 \$1,001,\$2,500			iur spouse or dependent child in wh	Tax-Deferred" in Block C, you me f income by checking the appropriested, must be disclosed as in	Amount of Income	BLOCK D
							×		\$1,000,001-\$5,000,000 ×  Over \$5,000,000 ×  Spouse/DC Income over \$1,000,000* ×  None \$1-\$200 \$201-\$1,000 \$1,001,\$2,500 \$1,001,\$2,500			ins was earned or generated. Tur spouse or dependent child in which yo	Tax-Deferred" in Block C, you may ch fincome by checking the appropriate the seted, must be disclosed as income was second or concepted.	Amount of Income	BLOCK D
						×	*		\$1,000,001-\$5,000,000 ×  Over \$5,000,000 ×  Spouse/DC Income over \$1,000,000* ×  None \$1-\$200 \$201-\$1,000 \$1,001,\$2,500 \$1,001,\$2,500			ur spouse or dependent child in which you ha	Tax-Deferred" in Block C, you may check if income by checking the appropriate box bested, must be disclosed as income for the was served.	Amount of Income	BLOCK D
					*	×	*		\$1,000,001-\$5,000,000 ×  Over \$5,000,000 ×  Spouse/DC Income over \$1,000,000* ×  None \$1-\$200 \$201-\$1,000 \$1,001,\$2,500 \$1,001,\$2,500			ur spouse or dependent child in which you have n	Tax-Deferred" in Block C, you may check the " fincome by checking the appropriate box below setted, must be disclosed as income for as	Amount of Income	BLOCK D
					×	×	*		\$1,000,001-\$5,000,000 ×  Over \$5,000,000 ×  Spouse/DC Income over \$1,000,000* ×  None \$1-\$200 \$201-\$1,000 \$1,001,\$2,500 \$1,001,\$2,500			ur spouse or dependent child in which you have no into	Tax-Deferred" in Block C, you may check the "None fincome by checking the appropriate box below. Drivested, must be disclosed as income for assets on the control of the co	Amount of Income	BLOCK D
					×	×	*		\$1,000,001-\$5,000,000 ×  Over \$5,000,000 ×  Spouse/DC Income over \$1,000,000* ×  None \$1-\$200 \$201-\$1,000 \$1,001,\$2,500 \$1,001,\$2,500	ar Preceding Year		XII is for assets held by your spouse or dependent child in which you have no interest	Tax-Deferred" in Block C, you may check the "None" co finceme by checking the appropriate box below. Divides setted, must be disclosed as Income for assets helps again a consolidary consisted.	Amount of Income	BLOCK D
					×	×	×		\$1,000,001-\$5,000,000   Cover \$5,000,000   Spouse/DC Income over \$1,000,000*  None   \$1,\$200   \$201-\$1,000   \$25,001-\$2,500   \$2,501-\$2,500   \$2,501-\$5,000   \$3,5001-\$15,000   \$3,5001-\$15,000   \$4,5001-\$10,000   \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000    \$5,001-\$10,000     \$5,0			ur spouse or dependent child in which you have no interest.	Tax-Deferred" in Block C, you may check the "None" column fincome by checking the appropriate box below. Dividends, settled, must be disclosed as Income for assets held in settled, must be disclosed as Income for assets held in	Amount of Income	BLOCK D
					×	×	×		\$1,000,001-\$5,000,000   Cover \$5,000,000   Spouse/DC Income over \$1,000,000*  None  \$1-\$200			ur spouse or dependent child in which you have no interest.	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. Dividends, interest and capital gains, even if reinvested, must be disclosed as income for assets held in taxable	Amount of Income	BLOCK D

Use additional sheets if more space is required.

Use additional sheets if more space is required.

													1		¥,Ç,¥				$\Box$
ļ					$\vdash$						-				37.0			≥	J
				ļ														Assets and/or Income Sources	I
				ĺ														ŝ	
													Ì					and	
															ASSET NAME			ğ	ρ
														}	<u> </u>			호	BLOCK A
															Ã			Š	۶
															m			9	
					}													So	
					}								l					77.0	
					<u> </u>						<u> </u>							S	J
															쁚				
																None ➤			
												1				\$1-\$1,690 w			
				ļ					 	<b></b>	†					\$1,001-\$15,000 C			
				-							· · ·	╁─	1			\$15,001-\$50,000	7		
				ļ					 			<del> </del>	<del>                                     </del>			\$50,001-\$100,000 m	-	_	
				ļ		_				ļ		<del> </del>	$\vdash$				-	al.	_1
<u> </u>		ļ	ļ	ļ	_				 · · · · · ·		-	-	-					<u> </u>	PLO BLO
<u> </u>				ļ	<u> </u>	ļ	ļ		 		-	-	-	ļ		\$250,001-\$500,000 @		Value of Asset	BLOCK B
L.			ļ						 				ļ			\$500,001-\$1,000,000 ±		SS	w
L			ļ		$oxed{oxed}$	ļ			 		$oxed{}$		ļ			\$1,000,001-\$5,000,000 —	]	e	į
											L					\$5,900,001-\$25,900,000			ı
																\$25,000,001-\$50,000,000			
																Over \$50,000,000			
																Spause/DC Asset over \$1,000,000* ≤			
									 		1					NONE			
		<del>                                     </del>	ļ		<del> </del>				 			1				DIVIDENDS	1		
			ļ <u>.</u>			-			 	-	-	-						-	
	<u> </u>					<u> </u>	<u> </u>		 	L	_		<u> </u>	ļ		RENT	_	₹	
									 		<u> </u>	<u> </u>				INTEREST		ě	ρ
												1				CAPITAL GAINS	ı	Type of Income	BLOCK C
																EXCEPTED/BLIND TRUST	$\Box$	ន	ဂ
	-	·				<b></b>	ļ		-		-	1				TAX-DEFERRED	1	Ā	
				<del> </del>		<del> </del>				-	<del> </del>	<del> </del>	<del> </del>						ı
																Other Type of Income (Specify: e.g., Partnership Income or Farm Income)			- 1
												ļ	<u> </u>				4		_
																None —			
													<u> </u>			\$1-\$200 =			ł
																\$201-\$1,000 ==			1
																\$1,001-\$2,500 <			
																\$2,501-\$5,000 <	5		
									 				ļ			<b>\$</b> 5,001- <b>\$</b> 15,000 ≤	3		
		<b></b>		<del>                                     </del>						_						\$15,001- <b>\$</b> 50,000 ≦	Current Year		
				<u> </u>			<u> </u>							1		\$50,001-\$100,000 <u>≦</u>	ea l		ļ
$\vdash$			<del>                                     </del>	$\vdash$	-	$\vdash$	-				<del>                                     </del>	$\vdash$	<u> </u>			\$100,001-\$1,000,000 🕱	٦ <b> </b>		j
$\vdash$		-			<del> </del>	_	<u> </u>		 	<del> </del>	<del> </del>	1	$\vdash$	<del> </del>		\$1,000,001- <b>\$</b> 5,000,000 ×		≥	J
		-	-	<del>                                     </del>	-	-		<del>                                     </del>	 <del> </del>		<del> </del>	-	1	-		Over \$5,000,000 ≥		æ	
	ļ			<del>                                     </del>	1	1			 	$\vdash$	+	-				Spause/DC Income over \$1,000,000*	1	둧	밀
				1	1	-			 				-			······································	$\dashv$	Amount of Income	BLOCK D
	ļ	<del> </del>	<u> </u>	-		-	ļ		 <u> </u>	-	-	-	<del> </del>	ļ		None -		쿬	Ö
						ļ	ļ	<u> </u>	 ļ	-	ļ	-	-		ļ	\$1-\$200 =		ğ	
L	ļ		ļ				ļ	ļ	 <u> </u>	ļ	-		-			\$201-\$1,000 ==		ĕ	
		<u> </u>	ļ	ļ	ļ				 ļ		ļ	ļ	1	ļ		\$1,001-\$2,500 <	<u> </u>		
						1	ļ	<u> </u>	<u> </u>				-	<u> </u>		\$2,501-\$5,000 <	8		J
						<u> </u>	<u> </u>		 	<u> </u>	<u></u>	<u> </u>			]	\$5,001 <b>-</b> \$15,000 ≤	<u> </u>		J
		L													L	\$15,001-\$50,000 ≦	ĕ		
														L.		\$50,001-\$100,000	Preceding Year		1
																\$100,001-\$1,000,000 🛠	₹ <b> </b>		
		1	1										Γ			\$1,000,001-\$5,000,000 ×	1		1
						<u> </u>							1			Over \$5,000,000	I		Į
		1		<u> </u>		<del>                                     </del>		1	 		1				<b>1</b>	Spouse/DC Income over \$1,000,000*	1		I
	1	L	1	f		1		L	 		1	1	1				_1_		

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

Page\_

. 유

## SCHEDULE C - EARNED INCOME

e filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer	Name: Elliof Fausz
reporting period. For both the t	Page of )

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 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.

2014. Ill additori, certain types of ficome (ficiably fictionalia, director's fees, and payments for professional services fivolving a		Amount	ATTACA
Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500 \$78,000
EXAMPLES: Civil War Roundtable, Richmond, VA (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$0 N/A	\$1,000 N/A
Willage Publishing LLC	Satisalan	31,700	31,200
	,	<u> </u>	1
Virginia Department of Corrections	Spouse Sal.	35,000	35 000
	1		

#### SCHEDULE D - LIABILITIES

Name: 25n2 Page 2

exceeded \$10,000. 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 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 periodic 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 \*Column K is for liabilities held solely by your spouse or dependent child.

Г	Т.							
						SP, DC, JT	_	
		<u> </u>		(2112)	Example			
		Education	Department of	n tatos	First Bank of Wilmington, DE	Creditor		
		_	8/11		5/98	Date Liability Incurred MO/YR		
			Student Loan		Mortgage on Rental Property, Dover, DE	Type of Liability		
						\$10,001- \$15,000	>	
						\$15,00 <b>1-</b> \$50,000	60	
			$\succ$			\$50,001- \$100,000	c	
					×	\$100,001- \$250,000	D	
						\$250,001- \$500,000	m	moun
						\$500,001- \$1,000,000	п	t of Li
						\$1,000,001- \$5,000,000	6	Amount of Liability
						\$5,000,001- \$25,000,000	I	
						\$25,000,001- \$50,000,000		
						Over \$50,000,000		
						Over \$1,000,000* (Spouse/DC Liability)	_	1

#### 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 positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization
Oceahors Manual	Village Publishing, LLC
J	$J^{\dagger}$

### SC

Date	Identify the date, parties to, continuation or deferral of pa	SCHEDULE F – AGREEMENTS
Parties to Agreement	Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employmen continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in	GREEMENTS
Terms of Agreement	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.	Name: E110

# 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 confideritial as a result of a	government and any information constituted as a result of a privileged relationship recognised by tax. By not repeat information issued on constitute of
Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
•	