- -	Yes 🔲	pendent child	vilities of a spouse or dep Committee on Ethics.	"unearned" income, transactions, or liabilitudess you have first consulted with the C	ırned" income s you have fii	er assets, "unea wer "yes" unles	EXEMPTION —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.
Š	Yes 🔲	ot be	ent child?	s and certain other "e spouse, or a depende	ittee on Ethic ing you, your	d by the Comm a trust benefit	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?
<u>w</u>	QUESTION	F THESE	ANSWER EACH OF THESE QUESTIONS	1	T INFOR	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	response.	each "Yes"	dule attached for e	ppropriate sche	and the a	e answered	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response
№	Yes 🔲	55,000 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 compensation of n a single source in the two prior years? If yes, complete and attach Scheduli	8 □	Yes	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.
S D	Yes 🖸	angement	 V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V. 	V. Did you have any re with an outside entity? If yes, complete and i	S S	¥ ₈ □	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.
8	Yes 🔯	efore the date r 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 re of filing in the current of filing in the current of the second in the secon	N _O	Yes []	 Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule 1.
			G	- ANSWER EACH OF THESE QUESTIONS	OF THES	ER EACH	In all sections, please type or print clearly in blue or black ink. PRELIMINARY INFORMATION — ANSWE
	more than 30 days late.	more than				Office:	New officer or Employing Office:
assessed h	A \$200 penalty shall be assessed against any individual who files	A \$200 pe	Check if Amendment	6/3/1-1	Date of Election:	J.	
	(Office Use Only)	Ę					
ENTATIVES	DEFICE OF THE CLERK POUSE OF REPRESENTATIVES	0.5.40		Daytime Telephone	Daytime	110	Name: Patrick Maciariallo
Page 1 of •7 URCE CENTER	LEGISLATIVE RESCURCE CENTER 2014 MAR -4 PM 1: 59	LEG!	M B s and new employees	FORM B For use by candidates and new employees		TIVES	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 3013 - 11/1/13

SCHEDULE I -- EARNED INCOME (INCLUDING HONORARIA)

Name

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.

	Thirds	Amount	unt
Source (include date of receipt for nonorana)	lype	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
	Director's Fee	\$400	\$3,200
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
Compay 5 6000 Management	Salary	772,705	1572,085
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Name

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SPAR Sincohares	SPDR Gold Shares	Porto Emerging market Bord	Brok of a merica Accounts	Company 6 10- plant - was Amen	Comps Diversified Holdings		DC, Examples: Simon & Schuster	SP Mega Corp. Stock	Exclude: Your personal residence, including second forms 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	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
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			 	<u> </u>	†	t	<u> </u>		\$1 - \$1,000		- 60	Inis column is for assers solely neighby 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.		
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	 -	-		-	∔—	╄		╄-	TAX-DEFERRED Other Type of Income			<u>s</u>	If reinvested, must be dis- closed as income. Check "None" if the asset generated no income	plans or IHAS), you may check tre "Tax-Deferred" column. Dividends, Interest, and capital gains, even	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments of that generate tax-deferred income (such as 401(k)	Type of Income	
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Page 4 of 1

Section Sect
S1 - \$1,000
SS0,001 - \$100,000
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Spouse/DC Asset over \$1,000,000" \times
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Partnership Income or Farm Income)
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SCHEDULE III — LIABILITIES

Name Page 5_ of 7

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

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			SP, DC, JT	
		Example:		
		Example: First Bank of Wilmington, DE	Creditor	
		May 1998	Date Liability Incurred mo/year	
			747	l
		Mortgage on 123 Main Street, Dover, DE	Type of Liability	
	Í		\$10,001— \$15,000 >	
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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.

and positions solely of an honorary nature 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 all following fractions.	TOWN C.
Position	Name of Organization
Director	Halo Branded Solutions
Director	Tridien medien1
Director/Chair	Erro Biby Carrier l'ac.
Director	Advanded Circuits
Director	Fox Factor, Inc.

Use additional sheets if more space is required.

Bib Brothers Bib Sisters of Orange Cours

SCHEDULE V — AGREEMENTS

Page 7_ of 7_

Name

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.

out plan manie	on plan manifer by a former emproyer.	
Date	Parties To	Terms of Agreement
9/20/12	Compass broup Management	period of ninemonthy unpaid.
	•	

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) Example: Doe Jones & Smith, Hometown, Homestate Accounting services Accounting services
Accounting services
Brief Description of Duties