

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER

2014 SEP 11 PM 4:45

OFFICE OF THE CLERK  
U.S. HOUSE OF REPRESENTATIVES

UNITED STATES HOUSE OF REPRESENTATIVES  
2013 FINANCIAL DISCLOSURE STATEMENT

Form A  
For Use by Members, Officers, and Employees

Name: Joe Huerta Daytime Telephone: \_\_\_\_\_

(Office Use Only)

FILER STATUS	<input checked="" type="checkbox"/> Member of or Candidate for U.S. House of Representatives	State <u>NJ</u> District <u>03</u>	<input type="checkbox"/> Officer or Employee	<input type="checkbox"/> Terminor Date _____
REPORT TYPE	<input checked="" type="checkbox"/> 2013 Annual (Due May 15, 2014)	<input type="checkbox"/> Amendment		

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? <u>or</u> b. Make more than \$200 in unearned income from any reportable asset during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	G. Did you, your spouse, or your dependent child receive any reportable gifts totaling more than \$350 in value from a single source during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input type="checkbox"/> No <input checked="" type="checkbox"/>	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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
E. Did you hold any reportable position during the reporting period or in the current calendar year up through the date of filing?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	

IPO, EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER 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 answered "yes" to this question, please contact the Committee on Ethics for further guidance.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
TRUSTS - Details regarding "Qualified Blind Trusts," approved by the Committee on Ethics and certain other "excluded trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
EXEMPTION - Have you excluded from this report any other assets, "earned" income, transactions or liabilities of a spouse or dependent child because they meet at three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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Use additional sheets if more space is required.

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**Use additional sheets if more space is required.**

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Amount

Approved Rating Fee	\$6.00
Excessive Pursuit	\$75.00
Gross Speed	\$1.00
Gross Safety	N/A

Use additional sheets if more space is required.

# SCHEDULE D - LIABILITIES

Name:

Jon Kautman

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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 period. 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 report it out of state as a liability); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable) and 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 reporting period exceeded \$10,000. \*Column K is for liabilities held solely by your spouse or dependent child.

Spouse JT	Creditor	Date Liability Incurred MO/YR	Type of Liability	Amount of Liability									
				A	B	C	D	E	F	G	H	I	J
				\$10,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$250,000	\$250,001-\$500,000	\$500,001-\$1,000,000	\$1,000,001-\$5,000,000	\$5,000,001-\$25,000,000	\$25,000,001-\$50,000,000	Over \$50,000,000
	Example First Bank (Member's JT)	5/98	Mortgage on Rental Property (Over DC)				X						
JT	CHASE BANK	2011	CREDIT CARD		X								
JT	MBNA Visa	2011	"	X									
JT	VISA	2011	"	X									
JT	PERSHING BANK	2011	MAGNUS ACCT				X						
JT	LIBERTY BANK		MORTGAGE						X				

## 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	Name of Organization
BOARD OF DIRECTORS	ALZHEIMERS ASSOCIATION DELAWARE VALLEY

Use additional sheets if more space is required.

# SCHEDULE F - AGREEMENTS

Name:

For Luther

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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 payment(s) 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 Agreement	Terms of Agreement

# SCHEDULE G - GIFTS

Report the source (including name, city, and state), a brief description, and the value of all gifts totaling more than \$250 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 \$250 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Dr. Joseph Smith, Arlington, VA	Small plastic plate (value of personal property waived from the Ethics Code) (2001)	\$4.25

Use additional sheets if more space is required.



**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 Debtorships Act (5 U.S.C. § 7342). Critical travel that is critical independent of his or her relationship to the first campaign Act travel provided to a spouse or dependent child that is critical independent of his or her relationship to the first.

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Use additional sheets if more space is required.

Name: Jon Runyan

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Use additional sheets if more space is required.

**Notes:**

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