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SCHEDULE I—EARNED INCOME

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.

Source State	Type Approved Teaching Fee	Amount \$6,000
Examples: Civil War Roundtable (Oct. 2nd) Ontario County Board of Education		\$9,000 \$1,000 NA
STATE OF FLOODA, 125	JUSTINE MENT	14,495
SOUR SELURITI(SPOUSE)	-1	7,932
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SCHEDULE II—PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. A green envetope for transmitting the list is included in each Member's filing package. List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization

Source	Activity	Date	Amount
Association of American Associations, Washington, DC	Speech	Feb. 2, 2012	\$2,000
EXamples: XYZ Magazine	Article	Aug. 13, 2012	\$500
NONE			

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SUNTRUST BANK	CAPE CANADIBLAL, FL	ROUMENGE, FL.	ROGUEDGE, FL	TONE, FL	LEDGE , FL	1st Bank of	•	SP, SP Mega Corp. Stock	Exclude: Your personal residence, including second homes and vacation homes (<i>unless</i> there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving 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 III requirements, please refer to the instruction booklet.	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 loca-	For rental or other real property held for investment, pro- vide a complete address or a description, e.g., "rental property," and a 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
×	×	>	×	><	>	×	Indefinite	×	None \$1 - \$1,000 \$1,001 - \$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 Cver \$50,000,000 Spouse/DC Asset over \$1,000,000*	B C D E T G H - C K		* This column is for assets held solely by your spouse or dependent child.	If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	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.	Value of Asset	вгоск в
X	×		>	×		×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income	ne)	reporting period.	vested, must be disclosed as income. Check "None" if the asset generated no income during the	≝ □ △	all columns that applient accounts that done to choose specific is out to choose that generate tax-de is country that generate tax-de is out to choose the country that generate tax-de is out to choose the country that applied is out to choose specific is out to choo	Type of Income	BLOCK C
	×		×	×		×	X	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*		ent child.	* This column is for income generated by assets held solely by your spouse or		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	Amount of Income	BLOCK D
								S (partial)	indicate as follows: (S) (partial) See below for example. P, S, E		if only a) con:	\$1,000 in reporting	asset had purchases (P), sales (S), or exchanges (F) exceeding	Transaction	BLOCK E

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

SP, Ξ S Place Bolomonia Control STORE INDIAN DAKS CORP. STOLL ROLLINGE REMAY CL STIGH POSENTIGE REMOTEDS STOCK ROCKLEDGE GROW I Asset and/or Income Source DYMUNTY EDUCATION (.) 15 m ⋗ None $\boldsymbol{\omega}$ \$1 - \$1,000 O \$1,001 - \$15,000 D \$15,001 -- \$50,000 Value of Asset m \$50,001 - \$100,000 Year-End BLOCK B Ŧ \$100,001 - \$250,000 ດ \$250,001 - \$500,000 I \$500,001 - \$1,000,000 __ \$1,000,001 - \$5,000,000 ۲. \$5,000,001 - \$25,000,000 ᄌ \$25,000,001 - \$50,000,000 ~ Over \$50,000,000 ⋜ Spouse/DC Asset over \$1,000,000* NONE DIVIDENDS RENT of Income BLOCK C Type **INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST** TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income) None \$1 - \$200 Amount of Income \$201 - \$1,000 XI IIIV IV VI VII VIII IX \$1,001 - \$2,500 BLOCK D \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 × \$1,000,001 - \$5,000,000 × Over \$5,000,000 Page S of 7 Spouse/DC Income over \$1,000,000* Transaction BLOCK E ரைவு

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SCHEDULE IV— TRANSACTIONS

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										THEY ON 8	FROM PRABILITY 6-15-12 AND	SP Example: Mega Corporation Common Stock (partial sale) X	SP, DC, JT Asset	Capital Gains — if a sales transaction resulted in a capital gain in excess of \$\frac{1}{12} \text{ L CAPITAL S200, check the "capital gains" box and disclose this income on Schedule III. \$\frac{1}{2} \text{ A XX}\$ *This column is for assets solely held by your spouse or dependent child.	IASE	in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the	Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted of Transaction
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									:					Check E Gain Ex	ceeded	\$20	
		•					:					10-12-12		Bi-weekly, if applicable	or Quarterly,	(MO/DAY/YR)	Date
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												×		\$15,001- \$50,000		Φ	
									 					\$50,001- \$100,000		ი	
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											-			\$1,000,001- \$5,000,000	• !	<u> </u>	ansa
				 										\$5,000,001- \$25,000,000		I	Amount of Transaction
														\$25,000,00 \$50,000,000	1-	_	3
											_			Over \$50,000,000	o '	د	
									 					Over \$1,000,00 (Spouse/DC As		T	

SCHEDULE V— LIABILITIES

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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 dependent child. Mark the highest amount owed during the year. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal close of the preceding calendar year exceeded \$10,000. *This column is for liabilities held solely by your spouse or dependent child. 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 residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you

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				JT DC, AS	
		CHASE FLUMICIAL	Example: First Bank of Wilmington, DE	Creditor	
		NVASA 2006	May 1998	Date Liability Incurred Mo/Year	
		MARTHAGE ON BOLMYSTE	Mortgage on 123 Main St., Dover, DE	Type of Liability	
				\$10,001- \$15,000	
				\$15,001- \$50,000	
	 			\$50,001- \$100,000	
		 \times	×	\$100,001- \$250,000 □ \$250,001-	ΑI
	 			\$500,000 m	Amount of Liability
	 			\$1,000,000 TI	of Liab
			-	\$5,000,001-	iiit
				\$25,000,000 - \$25,000,001- \$50,000,000 -	
	 		 	Over \$50,000,000	
				Spouse/DC Liability Over \$1,000,000*	

SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of 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. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375
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SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$350 received by

spouse or dependent child that is totally independent of his or her relationship to you. **Exclude:** 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 (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a

							. (Heritage Foundation	Roycroft Corporation	Examples: Chicago Chamber of Commerce	Source
								Jan 25-27	Aug. 6–11	Mar. 2	Date(s)
								DC-Philadelphia-DC	DC—Los Angeles—Cleveland	DC—Chicago—DC	City of Departure—Destination— City of Return
	-							Y	Υ	z	Lodging? (Y/N)
					:	·		\prec	Υ		Food? (Y/N)
								Y	Υ	Z	Was a Family Member Included? (Y/N)
								None	2 Days	None	Number of days <u>not</u> at sponsor's expense

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organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

tions); 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 political parties and campaign organiza-

		निकामका	108512617	Position
			tosey & co., RANGES - A FLORIDA CORPORATION	Name of Organization

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an 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

Date	Parties To	Terms of Agreement
NONE		