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UNITED STATES HOUSE OF REPRESENTATIVES 2014 FINANCIAL DISCLOSURE STATEMENT		Form A For Use by Members, Officers, and Employees	<u> </u>	Page 1 of LEGISLATIVE RESOURCE CENTE
Name: Javid Wayne Loeb Sack	Daytime Telephone:	(202)225-6576	Office	U.S. HÖÜSE OF REPRESENTATIVES
FILER STATUS Member of or Candidate for State: U.S. House of Representatives District:		Officer or Employing Office:		() () () () () () () () () ()
REPORT 2014 Annual (Due: May 15, 2015)	Amendment	Termination Date of Termination:	ination:	
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 X 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?	arrangement with an the current calendar	Yes No X
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 X	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$375 in value from a single source during the reporting period?	nild receive any lue from a single	Yes No X
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 \$375 in value from a single source during the reporting period?	nild receive any totaling more than reporting period?	Yes No
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 X No	 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? 	nation to charity in or article during the	Yes No X
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 X	EC	SCHEDULE IF YO	ORRESPONDING SCHEDULE IF YOU ANSWER "YES"
IPO AND EXCLUSION OF SPOUSE, DEPENDENT,	ENT, OR TRUST INFORMATION -	DRMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS	OF THESE QUE	STIONS
IPO – Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you at the Committee on Ethics for further guidance.	itial Public Offering during the rep	onting period? If you answered "yes" to this question, please contact	estion, please contact	Yes No X
TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics this report details of such a trust that benefits you, your spouse, or your dependent child?	ોઇ	and certain other "excepted trusts" need not be disclosed. Have you excluded from	ve you excluded from	Yes No X
EXEMPTION Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	earned" income, transactions, or learned with the Committee on Eth	liabilities of a spouse or your dependent child because they meet all nics.	ecause they meet all	Yes No X

SCHEDULE A - ASSETS & "UNEARNED INCOME" Name:

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				V		Examples:		For a detailed discussion of Schedule requirements, please refer to the instruction booklet.	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.	If you have a privately-traded fund that is an Excepted investment Fund, please check the "Elf- box.	Exclude: Your personal residence, including second tomes and vacation homes (unless there was tental income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	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.	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 bank and other cash accounts, total the amount in all interest-bearing accounts. If the lotal is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	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 only ticker symbols).	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 income that generated more than \$200 in 'unearned' income during the year.	Identify (a) each asset held for investment or	Ass
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\dashv	\top		 					Spouse/DC /	Asset with Incor	me over \$1,0	*000,000				1	t child	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 accounts. Check "None" if no income was earned or generated.	For assets for which you checked "Tax-Deferred" in Block C. you	
一	\dagger				_		S(part)	Ţ.					-		folian :			_	- -
- 1							ä	P, S, S(part), or E						Leave this column blank if there are no transactions that exceeded \$1,900.	an asset was sold please indicate as follows: (S (part)).	period.	asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in the reported	Indicate if the	BLOCKE
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