hild because Yes No	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.
kosed. Have you Yes No No	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 dependent child?
Yes No	IPO—Did you purchase any shares that were allocated as a part of an Initial Public Offering?
EACH OF THESE QUESTIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF
tion in this part must be answered and the schedule attached for each "Yes" response.	Id have any reportable Yes No Mappropriate Rach ques appropriate
rrangement with Yes No	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding yes \(\begin{array}{c}\) No \(\begin{array}{c}\) If yes, complete and attach Schedule IX.
r before the date Yes No	III. 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? Yes No VIII. Did you hold any reportable positions on or before the date of filling in the current calendar year? If yes, complete and attach Schedule VIII.
receive any the reporting Yes No	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II. VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)? If yes, complete and attach Schedule VII.
receive any egating more Yes No	I. 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 I. VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VI.
	PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS
A \$200 penalty shall be assessed against anyone who files more than 30 days late.	Filer Status Member of the U.S. State: NLW 3 CV 2CV Employing Office: Officer or Employing Office: Employee Report Type Annual (May 15, 2013) Amendment Employee Termination
MC C. T. (Office Use Only) Land Color	
2813 JUST 27 FN 1: 10	Name: Albid Siks Daytime Telephone
	UNITED STATES HOUSE OF REPRESENTATIVES Form A CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT For use by Members, officers, and employees
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SCHEDULE III—ASSETS AND "UNEARNED" INCO

Transacti	Amount of Income	Type of Income	Value of Asset
BLOCK	BLOCK D	BLOCK C	BLOCK B
Page	Iamo Albio Si Les	Name 🗡	UNEARNED" INCOME
		>	

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TD Bank General Fleetinc Merrill Lynch Bank Pfizer	SP Mega Corp. Stock Examples: Simon & Schuster Ist Bank of Paducah, KY Accounts	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 vecalion homes (unless there was rental income during the reporting period): any deposits totaling \$5,000 or less in a personal checking or sewing accounts; and any invancial interest in, or income derived from, a federal retirement program, including the Thritt 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.	BLOCK A Asset and/or Income Source Identity (a) each asset teld 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 "unearmed" income during the year. Provide complete names of stocks and mutual funds (do not use tocker symbots.) For all RAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds. For rental or other real property held for investment, pro- vide a complete address or a description, e.g., "rental	*CT***
XX	Indefinite	Nore > \$1 - \$1,000 ∞ \$1,004 - \$15,000 ○ \$15,00 - \$50,000 □	0 · 50 = C 25 < =	3
	×	\$50,00° - \$100,000 m \$100 00° - \$250,000 m \$250 00° - \$500,000 @	BLOCK B Value of Asset Value Va	
		\$500.00' - \$1,000,000	sset close of relations of respective the reporting the reporting susse it ger "None."	
×		Over \$50,000,000 □ Spouse/EC Asset over \$1,000,000* ≤ NONE □		
	×	D V DENDS RENT INTEREST CAPITAL GAINS	ELOCK C Type of Inco Check all columns the retirement accounts to allow you to choose sponents or that generate income (such as 4011) IRAs), you may chec beferred column. Divide est, and capital geines, vested, must be ditiincome. Check "None generated no income reporting period.	
		EXCEPTEC/BLIND TRUST TAX-DEFERRED Other Type of income	BLOCK C Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "Tax-beferred" column. Dividends, interest, and capital geins, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	-
×	Royalties	(Specify: e.g., Partnership Income or Farm Income) None		
×××	×	\$'-\$200 = \$20'-\$',000 = \$'00'-\$2.500 <	BLOCK D Amount of Income For assets for which you checked "T Deferred in Block C, you may check "None" column. For all other assets, indic the category of income by checking appropriate box below. Dividends, intere and capital gains, even if reinvested, m be disclosed as income. Check "None no income was earned or generated." 'This column is for income generated assets held solely by your spouse dependent child.	•
	×	\$2 50° - \$5,000	BLOCK D Amount of Income sets for which you ched of in Block C, you may or column. For all other assets egory of income by che tate box below. Dividends, sital gains, even if reinvest closed as income. Check me was earned or generate column is for income generated solely by your stent child.	
	×	\$: 5.00° - \$50,000 ≦ \$50.00° - \$100,000 ≦ \$100.00° - \$1,000,000 ⋈	CK D of Income h you checked "I you may check to ther assets, indice one by checking w. Dividends, interv en if reinvested, m ome. Check "None d or generated by your spouse	
		\$: 000,00: - \$5,000 000 × Over \$5,000,000 × Spouse/DC ncome over \$:,000,000*	BLOCK D Amount of Income 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. Check "None" if no income was earned or generated. * This column is for income generated by assets held solely by your spouse or dependent child.	
	S (partial)	an asset is sold, please indicate as follows: (S) (partial) See below for example. P, S, E	 	

SCHEDULE IV— TRANSACTIONS

This many has combal if more empty is required								- 1	SP Nivian Township hum Bond	SP (broco Phillips	Example: Mega Corpor	SP DC. JT Asset	Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III. * This column is for assets policy hold by your sequence or dependent third.	income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental	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
													PURC	HASE		Type of Transaction
•									> <	\times	×		SALE			Type ansacti
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SCHEDULE V— LIABILITIES

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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 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 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

Creditor Creditor Creditor Creditor Creditor Creditor Creditor Creditor Creditor Movyear Movyear Type of Liability Section 50	Date Liability Incurred MoYear Type of Liability A B C S 5,000 S 50,000	Date Liability A B C D	Date Liability A B C D
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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

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

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 spouse or dependent child that is totally independent of his or her relationship to you. or were paid by you and reimbursed by the sponsor.

4		4	to the comment of the second				
	Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Number of days <u>not</u> at sponsor's expens
Exemples	Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	Z	Z	Z	None
Lyampings.	Roycroft Corporation	Aug. 6–11	DC-Los Angeles-Cleveland	٧	Y	Y	2 Days
			H/N				
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