HAND DELIVERS

×	Yes	ependent child	ities of a spouse or de committee on Ethics.	"unearned" income, transactions, or liabilities of a spouse or dependent child unless you have first consulted with the Committee on Ethics.	arned" income is you have fit	his report any other assets, "uni ption? Do not answer "yes" unit	EXEMPTION —Have you excluded from this report any other assets, because they meet all three tests for exemption? Do not answer "yes"	EXEMPTION Decause the
×	Yes 🔲	ot be	cepted trusts" need n	s and certain other "ex	nittee on Ethic	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?	Details regarding "Qualified Blir lave you excluded from this rep	TRUSTS-I
S	QUESTION	OF THESE	ANSWER EACH OF THESE QUESTIONS		TINFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION —	ION OF SPOUSE, DI	EXCLUS
	response.	each "Yes"	lule attached for each "Yes" response	answered and the appropriate sched	and the a	part must be	Each question in this	
×	Yes	\$5,000 from	pensation of more than prior years? tach Schedule VI.	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.	× So	have any report- orting period? 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.	III. Did you,) able liability (If yes, comp
₹	Yes 🔀	rangement	contable agreement or ar	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	8	eceive "unearned" or hold any end of the period? Yes 🔀	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? It yes, complete and attach Schedule II.	II. Did you, y income of more reportable as if yes, comp
S _o	Yes 🔀	before the date or two years?	ortable positions on or before the dai thendar year or in the prior 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.	₹ □	e (e.g., salaries or porting period? 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 I. 	I. Did you or fees) of \$200 if yes, comp
				EACH OF THESE QUESTIONS	OF THES	- ANSWER	PRELIMINARY INFORMATION	PRELIMI
						hine or black ink	in all sections, place type or print clearly in hine or black by	in all section
assessed who files	A \$200 penalty shall be assessed against any individual who files more than 30 days late.	A \$200 pe against au more than	Check if Amendment	Date of AVG 17, ZO14	Date of Election	es District: 2 Employing Office:	Candidate for the House of Representatives New officer or employee	Filer Status
	(Office Use Only)	(Ye						
+ (f + + (f + + (f) f)	U.S. HOUSE OF LEFTELL HANNYE	U.S. 110 USE	4	Daytime Telephone:	Daytime	**	GWEN GRAHAM	Name:
‡.	MIJARI ZJ FAIC: J4	7013 FIR						
Page 1 of T	Page Pa	S T T T T T T T T T T T T T T T T T T T	I B and new employees	FORM B For use by candidates and new employees		STATEMENT (> App. 30, 2013	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2012 - Apair 30, 24	FINANC Period co

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

ame GWEN GRAHAM

Page 2 of 7

exceeding \$1,000. See examples below.	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 incom	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	
	ther spouse earned income	overnment) totalling \$200 or	

iyota	Amount	Terreit programs, and persents to	Amount	int
	Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
	XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Examples	First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
- Property	XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
	Harris County, Texas Public Schools	Spouse Salary	NA	NA
ر	LEON COUNTY SCHOOL BOARD	SALARY	30,450	96,992
え	STATE OF FLORIDA	Spouse SALARY	ZA	Z >
-				

	Τ	1	ì	(e)	1	L		'n	TOT TOTE CONTER	mt.	⊼ ∋⊈™	JED TO	B T T	~ T	3340-		
—	-	-	<u> </u>	3	ļ	٦	DC,E	SP.	nconne nconne ncon ncon fivou he Ti you ncor the s the	χď	hat in	or n work	or a	20 0 20 4	dent me epor		
REWIAL PROPERTY GHINGSJULE H	WASHINGTON POST STOCK	MICHOSOFT CORP STOCK	TARGET CORP STOCK	GRAHAM COMPANIES STOCK	GRAHAM COMPANIES STOCK	F-	Examples: Simon & Schuster	SP Mega Corp. Stock	homes 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.	Exclude: Your personal residence, including second	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 or other rest 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 relirement 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 "uneamed" income during the year.	Asset and/or Income Source	BLOCK A
	*	×	×						None		>	ছ -	₽ #	`∄`∓	<u>2</u> 2 2 2		
	Ī								\$1 - \$1,000		. 00	"This column is for assets solely held by your spouse or dependent child.	it generated income, the value should be "None."	If an asset was sold during the reporting 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.		
						<u> </u>	夏		\$1,001 - \$15,000		ဂ	S S S		ar a	st of the		
	ļ						Indefinite	<u> </u>	\$15,001 - \$50,000		0	돌얼		a ¥		<u></u>	
×		-	ļ			_	æ	×	\$50,001 \$100,000		<u> </u>	86 15	Ŋ	કુ. જુ	₹	Value of Asset	0
<u> </u>	-			×		×	<u> </u>		\$100,001 - \$250,000		π 	악학	Ä	ᅙ	an you	0	BLOCK B
<u> </u>	ļ		-	ļ		H	-		\$250,001 - \$500,000		<u></u>	lepe	,, ,,,	중	set air net	Ď	옷
\vdash	-	-	 -	 	-	Н	⊢	⊢	\$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000			1 3 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	o ≲	힟	Toda at c	SS	w
	 	+	 		×			\vdash	\$5,000,001 - \$25,000,000			불충	. <u> </u>	₹	us ket a	异	
	 	 	 			┢	H	H	\$25,000,001 - \$50,000,000			l 율론	S	. α α.			
\vdash	 			 		Г			Over \$50,000,000		<u> </u>	l 유룛	<u> </u>	9	, je je i		
									Spouse/DC Asset over \$1,000,000*			1					
						Г		×	NONE			ď	프유프	필급	운동물로		
	X	×	X						DIVIDENDS			during the reporting period.	re a		irem ow estn	4	
<u>×</u>		<u> </u>							RENT]	SSE		T T T T T T T T T T T T T T T T T T T	둋	
						×			INTEREST			, g	De de de	4 B 8	2 2 2 2 E	0	BLOCK C
	×	×	×	1	~ .		<u> </u>	_	CAPITAL GAINS			. ₹		활활		Ť	ਠੁੱ
<u> </u>				커스	70	<u> </u>			EXCEPTED/BLIND TRUST			3	ᇎᇰᅗ		that is th bose ger	ក្ត	ဂ
				CCRP	Core		_		TAX-DEFERRED			ğ	if reinvested, must be closed as income. Check to it the asset generated no in	함	as series app	Type of Income	
				CORP	6 0	•	Royalties		Other Type of Income				If reinvested, must be dis- closed as income. Check "None" if the asset generated no income	plans or IRAs), you may check the "Tax-Deferred" column, Dividends, interest, and capital cains, even	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))	W	
	<u> </u>					_	<u> </u>		(Specify: e.g., Partnership Income or Farm Inco			<u> </u>	ā 9, 9°	5 F 6	グイボタマ		
_	×	×	×	ļ		_	<u> </u>		None		_		_	<u>;</u>	# F I I		
		 	ļ	<u></u>		⊢	<u> </u>	-	\$1 - \$200 \$201 - \$1,000	=		•		Ę	- X & X		
	-		 		_	├ ─	╬	×	\$1,001 - \$2,500				9 0	, ē	를 다 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등		
 -	 	├─	├	×	 	 	×	^	\$2,501 - \$5,000	<	<u>Ω</u>		2.5	ြင္			
×	 		 	-	 	⊬	f		\$5,001 - \$15,000	<u>-</u> -	1 1		ep in	<u>8</u>	- 30 × × × × × × × × × × × × × × × × × ×		
	\vdash	1		 		┢	-		\$15,001 - \$50,000	SI SI	- 1 9		ğ z	ź	팔살		
 		 			×	T	-		\$50,001 - \$100,000	ੂ	⊤ ₹		# F	, S	9 0 0 Y		
	1	<u> </u>			<u> </u>	T			\$100,001 - \$1,000,000				This column is for income derived from assets solely neid by your pouse or dependent child.	Income. Check "None" if no income was earned or generated.	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	Þ	
	1	T		Ī		Г	Γ		\$1,000,001 - \$5,000,000	×			d H	8	漢조쁔드	Amount of Income	
	1								Over \$5,000,000	×			Qe	ੂ ਹੋ	<u> </u>	ĭ	Φ
									Spouse/DC Income over \$1,000,000*	≚			ĨΥ	ğ	einate Formation	¥	BLOCK D
									None	_			ă	L 00	19 H	<u>=</u>	\ \
									\$1 – \$200	=			Ö	as	8 × 8 × 5	젌	J
						Ĺ		×	\$201 - \$1,000	Ξ	_ ₽		ğ	62	1, _ 5	ă	
	<u></u>		ļ	ļ <u>.</u>	<u> </u>	_	_		\$1,001 - \$2,500	<			SSe	ğ	Ted ow.	æ	
×	×	<u> </u>	×		<u> </u>	×	×	_	\$2,501 - \$5,000	<	&_		S	. 0	SP 프로		
<u> </u>	<u> </u>	×	<u> </u>	×	ļ	<u> </u>		_	\$5,001 - \$15,000	<u> </u>	IJ,		Ö	9	- B⊪ ate vid be		
<u> </u>	 	1	-	<u> </u>	 	⊢	\vdash	_	\$15,001 - \$50,000	_=	∃ ₹		4	ř	a: B F S		
\vdash	\vdash	 		-	×	┞	<u> </u>	-	\$50,001 - \$100,000 \$100,001 - \$1,000,000	VI VII X	Preceding Year		ē	rate	<u>()</u> () ()		
—	├	 	-		-	├	-	<u> </u> -	\$1,000,001 - \$5,000,000	×	_ `		9	Ä	integ integ		
<u> </u>	+	 	 	-	 	╂	-		S1,000,001 – \$5,000,000 Over \$5,000,000				Š		Ž Š		
	 	-		 	 	┢	 	-	Spouse/DC Income over \$1,000,000*	×			ξ		St of a		
	1	1															

Continuation Sheet (if needed) SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Name GWEN GRAHAM

				30				95	30	⊅ €) (24	20	SP,		
- US STOUR MARKET JUDGE	- US BOND JUDGE	Shivesment Account:	FLORIDA RETIFEMENT SYNTEM	STANLEY G. TATE TO PREPAIR COLLEGE PROGRAM (44A TUISM	- BLEAKROCK GLOBAL FUND	MERGILL LYDICH TRA	SUNTAUST ACCTS	REGIONS BENK ACCTS	MERRILL LYNCH N/M ACCT	WASHINGTON POST STOCK	DISNEY (WALT) STOCK	Cock Cock Stock	CHEVEON STOCK		Asset and/or Income Source	BLOCK A
×	×			×	×		*	×	×	×	×	×	×	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$250,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$25,000,001 - \$5,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,000 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,000 - \$50,000,000 \$25,000,000 - \$50,000,000 \$25,000,000 - \$50,000	Value of Asset	вгоск в
×	×			×	×		×	×	×	×	×	×	×	Over \$50,000,000	Type of Income	BLOCK C
×	×			X	×		×	×	×	×	×	×	×	Partnership Income or Farm Income) None	Amount	BLC
×	×			×	×		×	×	×	×	×	×	×	Spouse/DC Income over \$1,000,000* Section	Amount of Income	BLOCK D

SCHEDULE II - ASSETS AND "UNEARNED" INCOME

Name GWEN GRAHAM

Page S of

Spouse/DC Income over \$1,000,000*

DO 5-1 89 September Sept	None	Asset and/or income Source - US LARGE VALVE ACTIVE - PRUDENTIAL MIDERTH QUAN - TROWE PRICE SMALL CAP None S1-\$1,000 B X X \$1,001-\$15,000 C S15.001-\$50.000 C	ntinuation Sheet (if needed)
None	None	BLOCK A Asset and/or Income Source Thouse with Miderth Quan Thouse Thouse Man Artive None \$1-\$1,000 B X X \$1,001-\$15,000 C \$15,001-\$50,000 E	ation Sheet (if needed)
Si - \$1,000	SI - \$1,000	\$1-\$1,000	
\$\$5,000,001 - \$25,000,000 \times \$25,000 \times \$25,00	SS,000,001 - \$22,000,000 X S25,000,000 X Over \$50,000,000 X Spouse/DC Asset over \$1,000,000 X DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST X X X TAX-DEFERRED City per of income of Farm Income) X X X TAX-DEFERRED City per of income of Farm Income) X X X TAX-DEFERRED City per of income of Farm Income) X X X TAX-DEFERRED City per of income of Farm Income) X X X TAX-DEFERRED City per of income of Farm Income) X X X TAX-DEFERRED City per of income of Farm Income) X X X TAX-DEFERRED City per of income of Farm Income) X X X TAX-DEFERRED City per of income of Farm Income) X X X TAX-DEFERRED City per of income of Farm Income) X X X TAX-DEFERRED City per of income of Farm Income) X X X TAX-DEFERRED City per of income of Farm Income) X X X X TAX-DEFERRED City per of income of Farm Income) X X X X TAX-DEFERRED City per of income of Farm Income) X X X X TAX-DEFERRED City per of income of Farm Income) X X X X TAX-DEFERRED City per of income of Farm Income) X X X X TAX-DEFERRED City per of income of Farm Income) X X X X TAX-DEFERRED City per of income of Farm Income) X X X X TAX-DEFERRED City per of income of Farm Income) X X X X TAX-DEFERRED City per of income of Farm Income) X X X X TAX-DEFERRED City per of income of Farm Income) X X X X X TAX-DEFERRED City per of income of Farm Income) X X X X X TAX-DEFERRED City per of income of Farm Income of	\$500,001 - \$1,000,000	
NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Type of Income-(Specify: e.g., Partnership Income or Farm Income) X X X X None S1-\$200 Except - \$1,000 Exc	NONE DIVIDENDS RENT NITEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Of ther Type of Income (Specify: a.g., Partnership Income or Farm Income)	\$5,000,001 - \$25,000,000	
Partnership Income or Farm Income)	Partnership Income or Farm Income)	NONE	
S1 - \$200	S1 - \$200	Outer type of income-typecity, e.g.,	
\$1,001 - \$2,500 \\ \$1,001 - \$2,500 \\ \$2,501 - \$5,000 \\ \$5,001 - \$15,000 \\ \$15,001 - \$50,000 \\ \$55,001 - \$100,000 \\ \$50,001 - \$1	\$201 - \$1,000		Nam
\$50,001 - \$100,000	\$50,001 - \$1,000,000 \$\frac{1}{2}	\$201 - \$1,000 \(\overline{\text{E}}\) \$1,001 - \$2,500 \(\overline{\text{E}}\) \$2,501 - \$5,000 \(\overline{\text{E}}\)	
\$1,000,001 - \$1,000,000 ×	\$1,000,001 - \$5,000,000 × Over \$5,000,000 × Spouse/DC Income over \$1,000,000* × None	\$5,001 - \$15,000 \leq \\ \$15,001 - \$50,000 \leq \\ \$50,001 - \$100,000 \leq \\ \\ \$50,001 - \$100 - \$100 - \$100 \leq \\ \\ \$100 - \$100 - \$100 - \$100 \leq \\ \\ \$100 - \$100 - \$100 - \$100 \l	Š
	\$2,501 - \$5,000 <	\$1,000,001 - \$1,000,000 × 3	URAH
	\$2,501 - \$5,000 < 6	Spouse/DC Income over \$1,000,000° \(\frac{1}{2} \) O \(\frac{1} \) O \(\frac{1}{2} \) O \(\frac{1}{2} \) O \(\frac{1}	*
\$50,001 - \$100,000 \(\frac{1}{2}\) \(\frac{1}{2}\)		\$1,000,001 - \$5,000,000 × Over \$5,000,000 ×	ا آ-

!

SCHEDULE III — LIABILITIES

Page 6 of	GRAHAM	GWEN	E E
	•		

z

owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); 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 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

						_
					SP, DC, JT	
			None	Example: First Bank of Wilmington, DE	Creditor	
				May 1998	Date Liability Incurred mo/year	
				Mortgage on 123 Main Street, Dover, DE	Type of Liability	
 					\$10,001— \$15,000	1
					\$15,001— \$50,000 CD	
					\$50,001— \$100,000 O	•
				ļ	\$100,001— \$250,000	
					\$250,001— \$500,000 m	
					\$1,000,000	
 		_			\$500,000 m \$500,001— \$1,000,000 n \$5,000,000 G \$5,000,000 m	
 ,			ļ	_	\$5,000,001— \$25,000,000 = \$ \$25,000,001—	
 			:		\$50,000,000	
	-			-	\$50,000,000 C Spouse/DC	
			<u> </u>	Ŀ	Liability over ス \$1,000,000	

SCHEDULE IV — POSITIONS

cer, 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. 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 offi-

and positions solely of an honorary nature. Exclude: Positions listed on Schedule 1; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization):

and positions solely of all horiotary flatares	naur.
Position	Name of Organization
DIRECTOR	THE GRAHAM COMPANIES
DIRECTOR	FLORIDA EDUCATIONAL NEGOTIATORS

SCHEDULE V — AGREEMENTS

Name GWEN GRAHAM

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 wetfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
APRIL 2013	Myself AND LEON COUNTY SCHOOL BOARD	ANNUAL LEAVE PAYOUT

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.

	Example: D				
Source (Name and Address)	Example: Doe Jones & Smith, Hometown, Homestate	None			
(ddress)	nestate				
	Accounting services				
Brie					
Brief Description of Duties					
Duties					