No X	Yes	pendent child	bilities of a spouse or de Committee on Ethics.	ne, transactions, or liat first consulted with the	arned" incom	other assets, "une answer "yes" unle	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.	EXEMPTION because they
No X	Yes 🔲	ot be	excepted trusts" need no lent child?	ics and certain other "or spouse, or a depend	nittee on Ethi ting you, you	roved by the Comn such a trust benefi	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?	TRUSTS - D disclosed. Ha
S	EACH OF THESE QUESTIONS)F THESE	ANSWER EACH C	1	T INFOR	IT, OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLUSI
	response.	each "Yes'	dule attached for	appropriate sche	and the	t be answered	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	,
No	Yes X	\$5,000 from	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.	VI. Did you receive compensation of ma single source in the two prior years? If yes, complete and attach Scheduk	№	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, yo able liability (m If yea, comple
No X	Yes	rangement	 V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V. 	V. Did you have any rep with an outside entity? If yes, complete and at	8 □	α ₂ , 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? If yes, complete and attach Schedule II.	II. Did you, yo income of mor reportable ass
No	Yes X	before the date or 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.	IV. Did you hold any r of filing in the current if yes, complete and	No ON	or 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 y fees) of \$200 or If yes, comple
			S	ANSWER EACH OF THESE QUESTIONS	OF THES	WER EACH	In all sections, please type or print clearly in blue or black ink. PRELIMINARY INFORMATION — ANSW	in all sections PRELIMIN
		more than				Employing Office:	employee Employ	
assessed who files	A \$200 penalty shall be assessed against any individual who files	A \$200 p	Check if Amendment	of	Date of Election:	ZZAH	Candidate for the State: House of Representatives District:	Filer
VES	U.S. HOUSE OF BEBRESE HAN IVES	U.S. HOUSE O						
TER N	LEGISLATIVE RESOURCE CENTER 2012 JAN 12 PM 1: 18	LEGISLATIV		Daytime Telephone:	Daytime		CHRIS STEWART	Name:
Page 1 of 4	JAN 05 2012 Page 1 of 4		RM B is and new employees	FORN For use by candidates t		NTATIVES	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, <i>ไดย</i> - Nov. 30 201	UNITED : FINANCI Period cov

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SCHEDULE I - EARNED INCOME (INCLUDING HONORARIA)

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	Name
	CHRIS
	STEWART

Page 2 ا د

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.

	Timo	Amount	unt
Source (include date of receipt for nonoraria)	Type	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
7	Director's Fee	\$400	\$3,200
Examples: XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
THE SHIPLEY GROUP	SALARY	143 588.41	143, 800
SHIPLEY	OTHER / WRITER	10,000	50,050
Ő	WRITING	\$ 30,000	
	•		
		·	
	50 50 50 50 50 50 50 50 50 50 50 50 50 5		

	IRA	WELLS FARGO Account	JT 1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP Mega Corp. Stock	For an ownership interest in a privately-held business, the nature of its activities, and its geographic location in Block A. 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 personal checking or savings accounts; and any financial interest in, or income derived from, a federal retrement 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.	provide a complete address.	and of the reporting period. perty held for investment,	Asset and/or Income Source Identity (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. Provide complete names of stocks and mutual funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, as the factor of the self-directed.
	×	7	×	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 \$500,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$25,000,001 - \$50,000,000	- turn T	A В С D Е F G H I J К L	Value of Asset Value of Asset 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. If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."
	×		×	Royaities	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	me)		BLOCK C Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments of that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, Interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
	× ×		×	×	×	\$201 - \$1,000		Current Year Preceding Year	Amount of Income 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 "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.

SCHEDULE III - LIABILITIES

Name CHRIS STEWART Page 4 of 4

ling 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. owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household turni-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 ture, 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 sib-

Creditor Liability Type of Liability
Mortgage on 123 Main Street, Dover, DE S10,001— S15,000 S15,001— S100,000 S250,001— S100,000 S250,001— S1,000,000 S1,000,000 S1,000,000 S1,000,000 S1,000,000 S5,000,000 S5,000,00
\$10,001— \$15,000 B \$15,001— \$50,001— \$50,000 C \$100,000 C \$250,000 D \$250,000 m \$250,001— \$250,000 m \$500,000 m \$1,000,000 G \$1,000,000 G \$5,000,000 G
\$15,000 B \$15,001 B \$50,001 C \$100,000 C \$100,001 D \$250,000 M \$250,001 M \$500,001 M \$500,001 C \$1,000,000 C \$1,000,000 C \$5,000,000 C \$5,000 C
\$50,000 W \$50,000 O \$50,001— O \$250,001— M \$250,000 M \$250,001— M \$500,000 M \$500,000 M \$1,000,000 M \$5,000,000 M
\$100,000 D \$100,000 D \$100,000 D \$250,000 D \$250,000 M \$500,000 M \$1,000,000 M \$1,000,000 D \$5,000,000 D \$5,000,000 D
\$5,000,001
\$5,000,001
\$5,000,001
\$25,000,000 T
\$50,000,000 Over \$50,000,000 C

SCHEDULE IV - POSITIONS

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 officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

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

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		PRESIDENT	Position	and positions solely or air trottorary materies.
		THE SHIPLEY GROUP	Name of Organization	ALCHIO.