### POSTMARK ILLEGIBLE

<b>₹</b>	Yes	pendent child	her assets, "unearned" income, transactions, or liabilities of a spouse or dependent child iswer "yes" unless you have first consulted with the Committee on Ethics.	<b>EXEMPTION</b> — Have you excluded from this report any other assets, "unearned" income, transactions, or liable because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the (
Š	es	xt be	<b>TRUSTS</b> —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 - Details regarding "Qualified Blind Trusts" approved disclosed. Have you excluded from this report details of such
Ø	NOITSAUC	F THESE O	, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	esponse.	each "Yes" re	be answered and the appropriate schedule attached for each "Yes" response	Each question in this part must be answered and the
S <sub>0</sub>	Yes 🖸	}5,000 from	Yes No No If yes, complete and attach Schedule VI.	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.
\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	Yes	angement	Yes No V. Did you have any reportable agreement or arrangement with an outside entity?  If yes, complete and attach Schedule V.	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.
Š	i ves	efore the date r two years?	Yes No No 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.	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.
			ER EACH OF THESE QUESTIONS	PRELIMINARY INFORMATION — ANSWER
		ļ		In all sections, please type or print clearly in blue or black ink.
assessed who files	A <i>\$200 penalty</i> shall be assessed against any individual who files more than 30 days late.	A \$200 penalty shall be against any individual more than 30 days late.	Date of 24 July 14 Amendment	Filer Candidate for the House of Representatives District:  Status New officer or Employing Office:
	(Office Use Only)	() ()		
		>	ne√ Daytime Telephone:	Name: Warred Christophen
OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES	OFFICE OF RE	Ç.		
PM 4: 39	2013 DEC 11 PM 4: 39		For use by candidates and new employees	Period covered: January 1,
LEGISLATIVE RESOURCE CENTER	LEGISLATIVE RE	-	FORM	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT
-				

# SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Page 2 \$

Name

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.

Figurial: Military pay (such as National Guard or Beserve pay) faderal retirement programs, and benefits received under the Social Security Act

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.         Source (include date of receipt for honoraria)       Type       Current Year to Filing       Precedil         XYZ Corporation, Houston, TX       Salary       \$6,300       \$28,4         First Bank & Trust, Houston, TX       Director's Fee       \$400       \$3,4         XYZ Trade Association, Chicago, IL (Rec'd December 2)       Honorarium       0       \$1,4	Type  Type  Salary  Director's Fee  Honorarium	Current Year to Filing \$6,300	Security Act.  unt  Preceding Year  \$28,450  \$3,200  \$1,000
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Name Page 3

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 reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furnitively. 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. 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-

_				_	1	
					SP, DC, JT	
			FT 31/ FCU	Example: First Bank of Wilmington, DE	Creditor	
		Į	Мацэв	May 1998	Date Liability Incurred mo/year	
		Pabx 1527 Lawby, DK 7350	Mayona Credit Card	Mortgage on 123 Main Street, Dover, DE	Type of Liability	
					\$10,001— \$15,000	
					\$15,001— \$50,000 <b>W</b>	Amount of Liability
					\$50,001— \$100,000 <b>?</b>	
				×	\$100,001— \$250,000	
				<u> </u>	\$250,001— \$500,000 m	
					\$500,001— \$1,000,000	
				L	\$1,000,001 \$5,000,000 <b>G</b>	
			×	,	\$5,000,001 \$25,000,000 <b>=</b>	
				L	\$25,000,001 \$50,000,000	
				_	Over \$50,000,000 — Spouse/DC	
		1			Liability over ス	

#### SCHEDULE IV — POSITIONS

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

**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 pature

 _	_	_	_		
				Position	and positions solely of an nonorary nature.
				Name of Organization	ature.

## SCHEDULE V — AGREEMENTS

Name Page 4 of 4

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 welfare or benefit plan maintained by a former employer.

شنزندم	 			_
Date				-
Date				
Parties To		:	`	
		. ,		;
Terms of Agreement				
nent				

# 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.

, Google	Example:				•		
Social	Doe Jones & Smith, Hometown, Homestate		-				
rce (Name	Smith, Hometov						
Source (Name and Address)	vn, Homestate	None					
		None roomable & to					
	ر مار	He Sik	•				
	Accounting services						
	ices						
Brief De							
Brief Description of Duties							
Duties		:					
-		,					
				-	-		
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