## JOSTMARK ILLEGIBLE

UNITED STATES HOUSE OF REPRESENTATIVES  For New Members,	FORM B For New Members, Candidates, and New Employees	2011 MAY IL PM 1:23
Name: Carlton M Hybre IV Daytime Telephone:	ne: 203-536-1021	OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES
New Member of or Candidate for State: C \\ U.S. House of Representatives District: \( \frac{1}{2} \) \	Check if Amendment	(Office Use Only)
New Officer or Employee  Employing Office:	Period Covered: January 1, 2014 to 12/31/2014	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS	TONS	
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 unearmed income from any reportable asset during the reporting period?	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	ing the reporting period Yes No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes No	F. Do you have any reportable agreements or arrangements with an outside entity?	or arrangements with Yes No
D. Did you, your spouse, or your dependent child have any reportable Yes No No	J. Did you receive compensation of more than source in the current year and two prior years?	than \$5,000 from a single Yes No No
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "Y  THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED."		ES" TO COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	- ANSWER <u>BOTH</u> OF THES	E QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. this report details of such a trust that benefits you, your spouse, or dependent child?		Have you excluded from Yes No No
EXEMPTION - Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child be tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.		cause they meet all three Yes No X

# SCHEDULE A - ASSETS & "UNEARNED INCOME"

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Use additional sheets if more space is required.

# SCHEDULE A - ASSETS & "UNEARNED INCOME"

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### SCHEDULE C - EARNED INCOME

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EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act. List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

INCOME LIMITS and PROHIBITED INCOME: The 2013 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. It is unchange 2014. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.  Amount	nbers and employees compensussional services involving a fide	ited at or above the "senior staff" raciary relationship) are totally prohibit  Am	"senior staff" rate was \$26,955. It is unchanged in a totally prohibited for Members and senior staff.  Amount
Source (include date of receipt for honoraria)	Туре	Am Current Year to Filing	Amount Preceding Year
ABC Trade Association, Baltimore, MD (July 15) State of Maryland	Honorarium Salary	\$0 \$20,000	\$500 \$76,000
Chill War Roundtable, Richmond, VA (Oct. 2) Ortario County Board of Education	Spouse Speech Spouse Salary	\$0 WA	\$1,000 N/A
Tauzan Tree Service LLC	Salcy	G	2400
Tarzar Tree Service LLC	Salary	0	600
Chornex	heurly	20,000	336
The fitness Edge	hourly	0	3538
value options inc	hourly	0	154
Monte Plane Hospital	Salang	20,000	$\bigcirc$
Rustic tymber Company SD	Salary	13,000	4,879
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#### SCHEDULE D - LIABILITIES

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New 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 you rent it out or are a Member); 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 you by a spouse or the child, parent, or sibing of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

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			W E	Example			
			WH OTHER STEM	First Bank of Wilmington, DE	Creditor		
			6/05	5/98	Date Liability Incurred MO/YR		
	!	Vh	MONICHOU ON ROTE   WASHING	Mortgage on Rental Property, Dover, DE	Type of Liability		,
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					Over \$50,000,000		
1					Over \$1,000,000* (Spouse/DC Liability)	_	

#### SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions listed in Schedule C; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization

#### SCHEDULE F - AGREEMENTS

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Identify the da continuation o	Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence du 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	Identify the date, parties to, and general terms of any agreement or arrangement that you have 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.
Date	Parties to Agreement	Terms of Agreement

# SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise 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 C.

Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services

FILER NOTES (Optional)

Name: CARLADON M. HEBIC

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