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Form A

UNITED STATES HOUSE OF REPRESENTATIVES

Yes No		sactions, or liabilities of a spouse or dependent child because with the Committee on Ethics.	l" income, trans	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spothey meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.
Yes No	1	d certain other "excepted trusts" need not be disc	on Ethics and dependent chil	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?
ESTIONS	EACH OF THESE QUESTIONS	— ANSWER	T INFORI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
ered and the 'es" response.	must be answ ed for each "Y	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	□ S	V. 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 V.
Yes No		IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	₹	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.
Yes No			\sum_{\begin{subarray}{c} \cdot \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	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? If yes, complete and attach Schedule III.
Yes No			\ <u>\\</u>	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.
Yes No X		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.	× _S	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? Yes If yes, complete and attach Schedule I.
		OF THESE QUESTIONS	OF THES	PRELIMINARY INFORMATION — ANSWER EACH
30 days late.	30 days late.	Termination		Type Annual (May 15, 2012) Amendment
A \$200 penalty shall be assessed	A \$200 penalty	or Employing Office:	Officer or Employee	Status Member of the U.S. State: 14/64/30
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ZOIZ MAY 15 PM 1:37	. // / 201	Daytime Telephone: 225-3761	Daytime 1	Name: Fred Water
AND	7 1	For use by Members, officers, and employees	MENT	CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT

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Kanon Global Kguing Frend A	_	A. Ford L. F. Tors Polar	N.Y. Life Ins. Policy	Nationwide L. R. Ins. Policy	1st Bank of Paduca	Examples:	SP Mega Corp. Stock	vide a complete address. 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 vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thriftt 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.	ment accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period. For rental or other real property held for investment, pro-	not use ticker symbols.) For all IFAs 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 retire-	Provide complete names of stocks and mutual funds (do	toentity (a) each asset ried 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.	Asset and/or Income Source	BLOCK A
*	×	×	×	×	×	Indefinite	X	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 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$5,000,001 - \$25,000,000	ABCDEFGHIJK	If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	please specify the method used.	reporting year. If you use a valuation method other than fair market value,	Value of Asset	в узолв
	×	×	×	×	×	Royalties	X	Over \$50,000,000 NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income))	g Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" e if the asset generated no income during the reporting period.	may check the "Tax-Defa			BLOCK C
×	×	×	>	×	×	X	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000		income. Check "None" if no income was earned or generated.		Deferred in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking	Amount of income	BLOCK D
				l			S (partial)	indicate as follows: (S) (partial) See below for example. P. S, E	If only a portion of an asset is sold, please	year.	(E) exceeding \$1,000 in	asset had purchases (P), sales (S), or exchanges	Indicate if the	BLOCK E

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

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Continuation Sheet (if needed) \exists 8 SP Asset and/or income Source GS MK+Phs SPX GS MK+ Plas Gold note 65 BREN EAFE GS BREN EEM GS BROW EAFE 65 GSCI Brent Crade CAN GS BREN EAFE 6/20/12 DB REN SPX 5-16-12 SE BREN EXFE HSBY MILT PLE SPK HSBC Cont Buff BO SOX HSAL PREN CEM 86 Fifth Third Prime Stockt Fredericked Within Short By Ins Chrispalio Enery REN SPX 4-25-12 RREN EAFE Collable Polldum G NI BLOCK A 4/10/12 ➣ None $\boldsymbol{\varpi}$ 1 - 1,000XXXXXXX O \$1,001 - \$15,000 O \$15,001 - \$50,000 Value of Asset X m \$50,001 - \$100,000 Year-End BLOCK B П X \$100,001 - \$250,000 ១ \$250,001 - \$500,000 I \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 <u>د</u> \$5,000,001 - \$25,000,000 ᆽ \$25,000,001 - \$50,000,000 Over \$50,000,000 NONE DIVIDENDS RENT INTEREST of Income BLOCK C CAPITAL GAINS Type **EXCEPTED/BLIND TRUST** TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income) None Amount of Income = \$1 - \$200 = \$201 - \$1,000 7 BLOCK D \$1,001 - \$2,500 < \$2,501 - \$5,000 VI VII VIII IX \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 × \$1,000,001 - \$5,000,000 Page 10 of 17 × Over \$5,000,000 Transaction BLOCK E ரைவு

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Continuation Sheet (if needed)		Name Up	ION
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Moodys	×		
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Cont	Continuation Sheet (if needed)		Walle Cot	10 h	9
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SCHEDULE IV— TRANSACTIONS

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cate (i.e., "partial sale"). See example below. Capital Gains — if a sales transaction resulted in a capital gain in excess	dren, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indi-	resulted in a capital loss. Provide a brief description of any exchange trans- action. Exclude transactions between you, your spouse or dependent chil-	erty neightor investment that exceeded \$1,000. Include transactions that	or dependent child during the reporting period of any security or real prop- of Transaction
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Report any pu or dependent enty held for	resulted in a cation. Exclud dren, or the pates rental inc	Capital Gains of \$200, check III.		SP E			2									
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 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 income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	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.	-	Example: Mega Corporation Common Stock (partial sale)	W. Patmen Credit Union CD	XPO Laxistics	Chemical Financial	Chronical Financial								
Type of Transaction	CHASE	PURC			×	×										
Type Insact	· · · · · · · · · · · · · · · · · · ·	SALE	<	×			×	×						-		
i On	IANGE	EXC⊦														
	Box if Capital xceeded \$200															
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SCHEDULE V— LIABILITIES

Name Upton

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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 preceding calendar year exceeded \$10,000. NOTE: Pending legislation may require Members to report 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. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a mortgages on personal residences.

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	77	JT		SP, DC,	i i
	Chuse Home Finance	J. P. Moyar	Example: First Bank of Wilmington, DE	Creditor	
	0.5, 2010	Oct., 2010	May 1998	Date Liability Incurred Mo/Year	
	Out, 2010 Home Montgage	Oct., 2010 Home Bywh Line of Cordit	Mortgage on 123 Main St., Dover, DE	Type of Liability	
				\$10,001- \$15,000	
		×		\$15,001- \$50,000	
				\$50,001- \$100,000	
			×	\$100,001- \$250,000	
				\$250,001- \$500,000 m	
				\$500,001- \$1,000,000	Amount of Liability
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				\$50,000,000	

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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	Name
	2
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SCHEDULE VII— TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed 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 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 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.

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 expense
Examples: Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	Z	Z	Z	None
	Aug. 6–11	DC—Los Angeles—Cleveland	¥	Y	~	2 Days
Aspen Institute Conc Praviou App 25-May 1 DC-Vienna-DC	Apr. 25-May 1	DG-Vienne-DC	~	~	×	3 days
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organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

tions); 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 political parties and campaign organiza-

Position	Name of Organization
Limited Partner	SEUCUARD Kim tel Partnership Cuptor Asset Mit Corp is con
	Partner of SEU Limited Partnership
Spard Rember	
Board Min bex	Southwest Michigan First

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an 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

Date	Parties To	Terms of Agreement
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	MO	