against any individual who files more than 30 days late. S portable positions on or before the date allendar year or in the prior two years? stratch Schedule IV. portable agreement or arrangement was prior years? was prior years? attach Schedule VI. wes	eive "unearmed" or hold any reporting period? Yes No No Hilming in the current c of filling in the current c of f
more than 30 days late. In the prior MX2 years? The IV. The IV. The IV. The Prior MX2 years? The IV. The	nold any re e current collete and save any rede entity? Plete and sollete and
more than 30 days late. more than 30 days late. more than 30 days late. yes ment or arrangement e.v. rore than \$5,000 from e.v. red for each "Yes" response.	eive "unearned" rting period? Yes W No No filling in the current of the yes, complete and in the period? V. Did you have any rewith an outside entity? If yes, complete and in the period? VI. Did you hold any redired and the appropriate scheme.
more than 30 days late. more than 30 days late. more than 30 days late. yns on or before the date in the prior two years? we lv. ment or arrangement e v. The v. Yes more than \$5,000 from Yes more than \$5,000 from	eight salaries or ring period? Yes W No
against any individual more than 30 days late. on or before the date the prior two years? Yes III	a.g., salaries or rting period? Yes V No
any individual an 30 days late.	e.g., salaries or rting period? Yes 🛛 No
against any individual more than 30 days late.	
against any individual more than 30 days late.	In all sections, please type or print clearly in blue or black ink. PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS
against any individual	employee Employing Office:
Check if A \$200 penalty shall be assessed	Date of 11-4-2014 Ar
(Office Use Only)	
B.S. IDJOE LA REPARSAHANYES	Name: Jokak L. BoniuA, J. Daytime Telephone:
W B TOSELATIVE RESCURDE CEATOR AND NOT PH 1: 30	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2012 - よいやどうつ, 2013 For use by candidates and new emplo

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name JOLLOSE L. BONILLA, N.

Page 2 of S

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.

- more many pay (out) and many or more of pay); reading round	brogramo, arra portonto re	Control allact alla cocia.	Coording Act.
		Amount	unt
Source (include date of receipt for Horizogna)	- ype	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Framples: First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
NINTH JUNCIAL CIRCUIT OF FLORIDA	SALARY	\$20 4 37.81	\$33141.56
KEYSTONE PHANG AGENT FOR MAGICAL CRUISE CO., LTD.	SPOUSE SALARY	\$36,810.1S	\$47.272.30
	_		

	46	듸	D C	SP,	hor incoming according the the incoming den in the please of the please of the	E oc	nes ‡ Fo	den of it the rep moor (do for plan accompray)
Floring state pension	FIDELITY 401 K		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.	location in Block A. 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	BLOCK A Asset and/or Income Source 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 "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) provide the value for each asset held in the account that exceeds the reporting thresholds. For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and the city and state.
			2		None \$1 - \$1,000 \$1,001 - \$15,000		А В С	Walue 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." *This column is for assets solely held by your spouse or dependent child.
	>		Indefinite	×	\$15,001 \$50,000 \$50,001 \$100,000		Б	Value value year other pecify set wa and is ated in ated in the spous
		×	Ф	î	\$100,001 - \$250,000		П	BLOCK B Value of Asset tlue of asset at clover. If you use a vertear. If you use a vertear than fair market soify the method us included only and income; the value or dependent ouse or dependent.
				-	\$250,001 - \$500,000		ଦ	BLOCK B ie of As of asset a if you use han fair m the meth sold duri included come; the or deper
		┞	-	<u> </u>	\$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000			B at c at c at c se a mar hod hod on he ve endt
		L		_	\$5,000,001 - \$25,000,000		<u> </u>	lose valuket in the user walket in the large walket walket in the large walket in the large walket in the large walket in the large walket walket in the large walket in the large walket in the large walket walket in the large walket walket walket in the large walket wa
				_	\$25,000,001 - \$50,000,000		7	of value d. reposes a control of the control of th
		┞	-	<u> </u>	Over \$50,000,000 Spouse/DC Asset over \$1,000,000*			id lid "," "
		T		×	NONE			
				-	DIVIDENDS			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 "Tax-Deferred" column. Dividends, interest, and capital gains, even if relinvested, must be distolesed as Income. Check "None" if the asset generated no income during the reporting period.
		×	-	-	RENT			BLOCK C Type of Income k all columns that apply ment accounts that de ryou to choose spe timents or that generate red income (such as 44 to ri RAs), you may chee to ri RAs), you may chee to ri RAs), you may chee to ri RAs), the column. Divide the set, and capital gains, invested, must be ad as income. Check "N asset generated no inc g the reporting period.
		╁	-	 	INTERESTCAPITAL GAINS			BLOCK C of Inc. olumns that accounts to choose so of that ge come (such As), you man ad column. At capital g tted, must income. Ch seporated reporting pe
		t		-	EXCEPTED/BLIND TRUST			inc. Inc. Inc. Is that is that the state of
	×				TAX-DEFERRED			Omit app that one se significant of the se significant of the second of
			Royatties		Other Type of Income (Specify: e.g., Partnership Income or Farm Inc	ome)		bendand
		╁	ă	-	None	-		
		T	-		\$1 – \$200	=	Ì	For and inco
			1		\$201 – \$1,000	=		asse ***********************************
<u> </u>		L	×	×	\$1,001 – \$2,500 \$2,501 – \$5,000	<	δ	For assets fo check the "No income by che income. Che income. Che income of units column spouse or de
 	1-	厃	 	-	\$5,001 \$15,000	<u></u> -	5	or w lone theck leck epe
					\$15,001 - \$50,000	¥H Y] 🚆	hich King King No
			<u> </u>		\$50,001 - \$100,000		Current Year	Amount of Income Amount of Income 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 income. Check "None" if no income was earned or generated. * This column is for income derived from assets solely held by your spouse or dependent child.
		1	├	-	\$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000	×	==	Ann an a
	 	\vdash	-	-	Over \$5,000,000	×		BLOCK D Amount of Income J checked "Tax-Deferr In. For all other assets, appropriate box belo ren if reinvested, n if no income was earr ome derived from ass nild.
		L			Spouse/DC Income over \$1,000,000*	¥		BLOCK D Int of In ked "Tax- all other a priate bo reinves come wa erived fre
		L			None	_		OK I
<u> </u>		╀	-	×	\$1 - \$200	=	!	nco nco -De ass ox t tted as e
<u> </u>		╀	-	1	\$201 - \$1,000 \$1,001 - \$2,500	=	l a	me ferre ets, yelo, yelo, ass
		×	×		\$2,501 - \$5,000	<	Preceding Year	yd"i indii inust ed c ets
		Ĺ		Ļ	\$5,001 – \$15,000	_ ≤	֓֞֝֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	n Bl cate h vid be sole
		\vdash	1	-	\$15,001 - \$50,000 \$50,001 - \$100,000	<u>≦</u>	y g	lock the lence lence dia sper
		╁	+	 	\$100,001 - \$1,000,000	VI VIII IX	ear	C, Catter Scion at the last of
		T	1	<u> </u>	\$1,000,001 - \$5,000,000	×	1	you legc
					Over \$5,000,000	×]	may ory of rest, d as
			_	!	Spouse/DC Income over \$1,000,000*	¥		

SCHEDULE III — LIABILITIES

Name JORGE L. BONIUA, N.

Page 4 of 5

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

	ŀ											
	:						•					
							X		STUDENT WANS		u.s. dept of education	
]				X		CREDIT CARD		DARCLAYS	
								X	CREDITCARD		MICKOY FEDERAL C.U.	4
		<u> </u>			×				Mortgage on 123 Main Street, Dover, DE	May 1998	Example: First Bank of Wilmington, DE	L
Over \$50,000,000 Spouse/DC Liability over \$1,000,000	\$25,000,000 - \$25,000,001 \$50,000,000 -	\$5,000,000 \$5 \$5,000,001— _	\$1,000,000 TI	\$250,001— \$500,000 m \$500,001—	\$100,001— \$250,000	\$50,001— \$100,000 ೧	\$15,001— \$50,000 co	\$10,001 \$15,000	Type of Liability	Date Liability Incurred mo/year	Creditor	DC, JT
		Amount of Liability	nt of l	Amou								

SCHEDULE IV — POSITIONS

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 officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise,

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 nonorary flature.	aure.
Position	Name of Organization
EMPLOYEE	NINTH JUDICIAL CIRCUIT OF FLORINA

SCHEDULE V — AGREEMENTS

Name JORGE L. BONILLA, J.

Page 5 of 5

Identify the date service; continu efit plan mainta	Identify the date, parties to, and general terms of any agreement or arrangement with service; continuation or deferral of payments by a former or current employer other the efft plan maintained by a former employer.	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.
Date	Parties To	Terms of Agreement

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.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services

GPO: 2013

78-995 (mac)