₹	Yes	pendent child	bilities of a spouse or dependent child Committee on Ethics.	ie, transactions, or lial irst consulted with the	arned" incom ss you have fi	er assets, "une wer "yes" unle	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liab because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the
No No	Yes 🔲	ot be	'excepted trusts" need no dent child?	cs and certain other " r spouse, or a depend	nittee on Ethi ting you, your	d by the Comr	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?
S	QUESTION)F THESE (NSWER EACH OF THESE QUESTIONS	MATION — AN	TINFOR	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	esponse.	each "Yes" r	edule attached for each "Yes" response	appropriate sche	and the	e answered	Each question in this part must be answered and the appropriate scheo
v _o ⊠	Yes	\$5,000 from	ompensation of more than \$5,000 from two prior years? I attach Schedule VI.	VI. Did you receive compensation of n a single source in the two prior years? If yes, complete and attach Schedul	» □	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.
S _o	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 re with an outside entity? If yes, complete and	Š	řes 	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.
No X	Yes 🔲	xefore 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 of filing in the current if yes, complete and	No ON	₹	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.
			S	EACH OF THESE QUESTIONS	OF THES		PRELIMINARY INFORMATION — ANSWER
	1.	more than 30 days late				Office:	employee Employing Office:
assessed who files	A <i>\$200 penalty</i> shall be assessed against any individual who files	A \$200 pen against any	Check if Amendment	on: 1116/17-	Date of Election:	80,	the State: resentatives District:
TVES C	Office Use Only)	(0					
58 N	2012 OCT 18 PM 12: 58	2012 OCT		Daytime Telephone:	Daytime		Name: Hakeem Jeffics
Page 1 of 6	OCT 1 6 2012 Page 1	OCT 1	RM B s and new employees	FORI		ATIVES	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1,20\2 Septimber 30,200

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SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Hukeen Jetfrics

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.

Exclude: Military pay (such as National Guard or Heserve pay), receral retirement programs, and benefits received under the Social Security Act.	ement programs, and benefits re	sceived under the Social :	Security Act.
Source (include date of receipt for honoraria)	Two-	Amount	unt
Comment of the contract of the	· Jp~	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
	Director's Fee	\$400	\$3,200
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
New York Stake Assembly, Brooklyn, My	Salary	\$61,153.85	005 btg
کا	Salary	438,000	#52,000
	Cinting of Fee	08'Stt't#	\$63,783.85
cd 4111)	Honorais m	1	4350
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	Sour Salwy	クタ	
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CONTO TO FILE STATES	معمد	SEFECT Savings become	OFA Smell exp	- Black flock Life party	C85401(K)	JT 1st Bank of Paducah, KY accounts	Examples:	SP. SP Mega Corp. Stock	For rental or other real property held for investment, provide 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. Excitude: 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 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.	provide only the name of the institution holding the account and its value at the end of the reporting period.	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) 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.
\$		х У	*	*		ounts	Indefinite		None \$1 - \$1,000 \$1,001 - \$50,000	eriod. A B C D	
	*					×	inite	×	\$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	DEFGHIJK	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."
	×	¥	*	*		×		×	\$25,000,001 - \$50,000,000 Over \$50,000,000 NONE DIVIDENDS RENT INTEREST	<u>^</u>	
							Royaties		CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		Type of Income Check all columns that apply. 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 "lax-Deferred" 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.
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+			1	<u> </u>	<u> </u>	\vdash	H	-	\$5,001 - \$15,000 <u>≤</u>	루	assets ared" ir colu categor opriate capital isclose me was
+			-	 		\vdash	H	\dashv	\$5,001 − \$15,000 ≤ \$15,001 − \$50,000 ≦ \$50,001 − \$100,000 ≦	Current Year	Amount of Amount of Amount of Amount of Amount of Which Deferred" in Block C, "None" column. For all the category of incorrappropriate box below. and capital gains, eve be disclosed as incorrincome was earned or (
-				├─		t		┪	\$100,001 - \$1,000,000 ×	「	Amount of for which Block C, mn. For all o incom y of incom box below. gains, ever d as incom earned or g
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									Over \$5,000,000 ≚		nich C, C, eve eve
			×	×	<u> </u>	ot		_	None –		Int of in which you k C, you k C, you k C, all other income elow. Div even if ncome. ()
	×	X		<u> </u>	-	\vdash		J	\$1 - \$200 =	_	Amount of Income For assets for which you che Deferred" in Block C, you may "None" column. For all other asset the category of income by ch appropriate box below. Dividend and capital gains, even if reinve be disclosed as income. Check income was earned or generated.
+				 	 	Ͱ	\vdash	×	\$201 - \$1,000 = \$1,001 - \$2,500 <	Preceding Year	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.
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			<u> </u>	L—		1	<u> </u>	_	\$1,000,001 - \$5,000,000 ×		

Over \$5,000,000

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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Name Huken Jethics

Continuation Sheet (if needed)

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1	Value of A	Value of Asset	Value of Asset	Value of Asset	Value of Asset	Value of Asset	Value of Asset	Value of Asset	Value of Asset Type of Income	Value of Asset Type of Income	Value of Asset Type of Income	Value of Asset Type of Income	Value of Asset Type of Income	Value of Asset	Value of Asset Type of Income	Value of Asset Type of Income	Value of Asset Type of Income
П	ф С п т с	а с п т а а о о о о	а с п т а а о о о о	0 000 × 000	0 000 × 0	0 000 × 0	0 00	0 - 00	0 - 00	Current Year Current Year Current Year	0 - 00	Current Year Current Year Current Year Current Year	Current Year Current Year Current Year Current Year	Current Year Current Year Current Year Current Year			
\$1,001 - \$15,000 C \$15,001 - \$50,000 D \$50,001 - \$100,000 M	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	- \$50,000
t i i manifeliative decision ii i 🤼 "	\$100,001 - \$250,000	\$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	DOCK D D

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SCHEDULE III — LIABILITIES

Name Hakaem Jeffics

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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 sibowed 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

		Date		┨╏	+	- 1	ᆜᇊ	ı tuni	unt of Liak	t of Liabili	-[]	-[]
SP, DC, JT	Creditor	Liability Incurred mo/year	Type of Liability		\$10,001— \$15,000	\$15,000 \$ \$15,001— \$50,000 \$	\$15,000 \$15,001— \$50,000	\$15,000 \$15,001— \$50,000	\$15,000 \$15,001—\$50,000 \$100,000 \$100,001—\$250,000 \$250,0	\$15,000	\$15,000 \$15,001—\$50,000 \$100,000 \$100,000 \$250,000 \$500,000 \$500,000 \$1,000,0	\$15,000
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE	Щ			×	×	×	×	×	×
77	ST Chase MuserCard	8)2612	Credit Card		×	X	×	X	X	Х	Х	X

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, partner, proprietor, representative, employee, or consultant of any corporation, company, 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 po	and positions solely of an nonorary nature.	ature.
	Position	Name of Organization

SCHEDULE V - AGREEMENTS

Name Hukaem Deffice

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Date	Parties To	Terms of Agreement
H015/1	Nyselt 8 68 5	armored participation in FIGILK) plan
		- The second of

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
_		Accounting services
_		