₹. 		isactions, or labelines of a spouse or dependent with the Committee on Ethics.	irat consulted v	EXEMPTION—Have you excluded from this report any other asserts, "uneamed" income, transactions, or labellines or a spouse or dependent child decause they meet all three tests for exemption? Do not answer "yee" unless you have first consulted with the Committee on Ethics.
\(\frac{\partial \text{ves}}{\partial \text{N}}\)	ot be disclosed. Have you	ertain other "excepted trusts" need n	e on Ethics an dependent ch	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need n secluded from this report details of such a trust benefiting you, your spouse, or dependent child?
Ves No X			ublic Offering?	IPO—Did you purchase any shares that were allocated as a part of an Initial Public Offering?
JESTIONS	CH OF THESE QUESTIONS	- ANSWER EA	TINFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
part must be answered and the ttached for each "Yes" response.	part must be answered and the ttached for each "Yes" response	Each question in this part appropriate schedule attach	₹	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.
- ₹ - × - ×	arrangement with	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 Yes \$1,000 during the reporting period? If yes, complete and attach Schedule IV.
No X	ions on or before the date	VIII. Did you hold any reportable positions on of filing in the current calendar year? If yee, complete and attach Schedule VIII.	₹	III. Did you, your spouse, or a dependent child receive "uneamed" 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? Yes If yes, complete and attach Schadule III.
Yes No ⊠	d receive any in the reporting	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)? If yes, complete and attach Schedule VII.	₹ ⊠	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the Yes reporting period? If yes, complete and attach Schedule II.
Yess No No	ent child receive any i.e., aggregating more e VI.	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating mor than \$350 and not otherwise exempt)? If yes, complete and sittach Schedule VI.	₹	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 Yes
		E QUESTIONS	OF THES	PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS
	30 days late.	Termination Date:		Type (X) Arnual (May 15, 2013) Amendment
A \$200 penalty shall be assessed	A \$200 penalt	Employing Office:	Officer or Employee	Status Member of the U.S. State: A House of Representatives District:
(Office Use Only)	(Offic			
DELIVERED MC	DEL	Daytime Telephone:	Daytime 1	Name: Bric Sublue!
U.S. HOUSE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES	u.s. House	Form A For use by Members, officers, and employees	WENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT
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SCHEDULE I—EARNED INCOME

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 ratirement programs, and benefits received under the Social Security Act

Exercise y pay (such as national cually of nesetive pay), exertal retirement programs, and perfents received	Certains received under the Social Security Act.	eculity Act.
Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
_	Spouse Speech	\$1,000
Ortario County Board of Education	Spouse Salary	\$
Manada Carty Detroit Bibrowy Office.	Colery	#75,769
City of Dublin (California) - Oh Cauxilmon	Stown! Salan	4 9,25

SCHEDULE III--ASSETS AND "UNEARNED" INCOME

	Chuppes - Dat. Brown	Acades - Set Street	JT 1st Benk of Paducah, KY Accounts	_	SP, Sp Mega Corp. Stock	property; and a cry and state. For an connecting interest in a privately-hald business feat is not publicly traded, state the name of the business, the names of its activities, and its geographic location in Block A. Exchante: Your personal residence, including second income and vacation homes (unless there was rental traceme during the reporting period); any deposits basing \$5,000 or less in a personal checking or seving secouries; and any financial interest in, or income derived from, a lederal retirement program, including the Thrift Sevings Plan. If you so choose, you may include that an asset or frome source is that of your spouse (SP) or department whild (DCs, or is jointly held with your spouse (JT), in the optional column on the far less. For a detailed discussion of Schedule III requirements, please refer to the instruction bootdet.	For rental or other real property hald for investment, pro- vide a complete address or a description, e.g., "rental	For all IRAs and other retirement plans (such as 4010) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete manus of stocks and mutual funds (do not use ticker symbols.)	Identify (a) each asset held for investment or production of income with a fair meritar 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	SCHEDULE III—ASSETS AND "UNEARNED" INCOME
İ						None >	$oldsymbol{T}$	8 4	If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	Indicate value of asset at dose of reporting year. If you use a valuation method other than fair market value, please specify the method used.		اخ ا
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ļ		ļ	L	_	Ш	\$250,001 – \$500,000 P	4	• This column is for assets held solely by your spouse or dependent child.	If an asset was sold during the rep and is included only because it income, the value should be "None."	indicate value of asset at close of reporting year. If you use a valuation method other than tair market value, please specify the method used.	Value of Asset	{
ļ		<u> </u>	┡	<u> </u>	Н	\$500,001 - \$1,000,000 I	4	_ 2	\$ 5 G	2 E K	\$ a	'l <u>주</u>
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ļ			L	_		Spouse/DC Asset over \$1,000,000*	╄					_
ļ		<u> </u>	L	L	Ц	NONE	- 1 흏	vested, must be disclosed income. Check "Yone" if the a generated no income during	IFAs), you may check the Deferred column. Dividends, est, and capital spins, even if	Check all columns that apply, retriement accounts that do allow you to choose specific inments or that generate tax-defaintment (such as 401(k) plan interne (such as 401(k) plan		
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ł		-		_	Н	EXCEPTED/BLIND TRUST	-	must be disclosed Check "None" if the a d no income during		25425	Type of Income	
ļ			-	_	Н	TAX-DEFERRED	4	E # 0	3		3	
				Poyable		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)			IRAs), you may check the "Tax- Deferred column. Dividends, Inter- est, and capital gains, even if rein-	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate sux-defend income (such as 401(t) plans or		20
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ľ						\$2,501 - \$5,000 <	ן ֻּגַ) monte was earned or generated. This column is for income general sets held solely by your <i>s</i> po		for which you checked to Block C, you may checken. For all other assets, in mr. For all other assets, in my of income by checken	BLOCK D Amount of Income	12
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ĺ						\$15,001 - \$50,000 ≦ \$50,001 - \$100,000 ≦ \$100,001 - \$1,000,000 ⋈	1	7 8 9	ne, even if reinveet is income. Check	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	ant of In	
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Ļ		ļ			Ц	\$1,000,001 - \$5,000,000 ×	-		nd capital gains, even if reinvested, mus e disclosed as income. Check "None"	144.48	-	ĮI –
ļ			Ц		Ц	Over \$5,000,000 🛎	4	o moone was earned or generated. This column is for income generated by seets held solely by your spouse or	s, even if reinvested, must income. Check "None" if	or assets for which you checked "flav- elemed" in Block C, you mey check the knne' column. For all other assets, indicate is category of income by checking the		3
L			Н		Ц	Spouse/DC Income over \$1,000,000* 설	₽		# # £			113~
					S (partial)	If only a portion of an asset is soid, please indicate as follows: (S) (partial) See below for example. P. S. E		Ye ll.	(c) encooring \$1,000 in reporting	asset had purchasses (P), sales (S) or exchanges	BLOCKE	M