

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT

FORM A Page 1 of 6
 For use by Members, officers, and employees

JAN 29 2013

Betty Sue Sutton

(Full Name)

(Daytime Telephone)

Filer Status: Member of the U.S. House of Representatives
 State: OH District: 13

Officer Or Employee
 Employing Office:

Report Type: Annual (May 15) Amendment

Termination
 Termination Date: 1/2/2013

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

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.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
IV. Did you, your spouse, or 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 <input type="checkbox"/> No <input checked="" type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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SCHEDULE I - EARNED INCOME

Name Betty Sue Sutton

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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 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.

Source	Type	Amount
Federal Mediation and Conciliation Service	Spouse Salary	NA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name **Betsy Sue Sutton**

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) 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, 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, provide a complete address. For an ownership interest in a privately-held business that is not publically 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 domestic entities; or any interest in a personal obligation or	BLOCK B Year-End 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 and is included only because it is generated income, the value should be "None."	BLOCK C 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 "None" 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.	BLOCK D Amount of Income 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 "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.	BLOCK E Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
JT Fire Fighters Community Credit Union - Money Market Funds	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
JT US Bank - accounts	\$100,001 - \$250,000	INTEREST	\$201 - \$1,000	
JT Diebold - stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT Tidewater - stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT Firefighters Community CU - DC #33	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
JT Firefighters Community CU - DC #34	\$1,001 - \$15,000	INTEREST	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name **Betty Sue Sutton**

JT	Firefighters Community CU - DC #35	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
JT	Firefighters Community CU - DC #37	\$50,001 - \$100,000	INTEREST	\$201 - \$1,000	
JT	Roth IRA - Alliance Bernstein Thematic Growth A-B	\$1,001 - \$15,000	None	NONE	
SP	Ohio Public Employees Deferred Compensation Program - as follows:				
	Dodge & Cox Balanced	\$1 - \$1,000	DIVIDENDS/CAP ITAL GAINS	\$1 - \$200	
	Dodge & Cox Stock	\$1,001 - \$15,000	DIVIDENDS/CAP ITAL GAINS	\$1 - \$200	
	Fidelity Contra Fund	\$1,001 - \$15,000	DIVIDENDS/CAP ITAL GAINS	\$1 - \$200	
	Fidelity Growth Company	\$1,001 - \$15,000	DIVIDENDS/CAP ITAL GAINS	\$1 - \$200	
	FPA Capital	\$1,001 - \$15,000	DIVIDENDS/CAP ITAL GAINS	\$1 - \$200	
	Hartford Small Company Fund	\$1,001 - \$15,000	DIVIDENDS/CAP ITAL GAINS	\$1 - \$200	
	Janus Twenty	\$1,001 - \$15,000	DIVIDENDS/CAP ITAL GAINS	\$1 - \$200	
	PIMCO Total Return	\$1 - \$1,000	DIVIDENDS/CAP ITAL GAINS	\$1 - \$200	
	Vanguard Capital Opportunity	\$1,001 - \$15,000	DIVIDENDS/CAP ITAL GAINS	\$1 - \$200	
	Vanguard International Growth	\$1,001 - \$15,000	DIVIDENDS/CAP ITAL GAINS	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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JT	Home - Barberton, OH	\$50,001 - \$100,000	None	NONE	
SP	Ohio Public Employees Retirement System (not self-directed)	\$15,001 - \$50,000	Retirement	NA	
SP	Ohio Police and Fire Pension Fund (not self-directed)	\$50,001 - \$100,000	Retirement	NA	
	Ohio Public Employees Retirement System (not self-directed)	\$50,001 - \$100,000	Retirement	NA	

SCHEDULE V - 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 dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; 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.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
JT	Third Federal Savings & Loan	September 2006	Mortgage on 3825 Royal Rock Road, Copley, Ohio	\$100,001 - \$250,000