

PERSONAL FINANCIAL STATEMENT

FORM PFS COVER SHEET

Filed in accordance with chapter 572 of the Government Code.
For filings required in 2012, covering calendar year ending December 31, **2011**.
Use FORM PFS - INSTRUCTION GUIDE when completing this form.

PAGE # Page 1 of 7
ACCOUNT # 65836

1 NAME

TITLE, FIRST, MI
Mr. LANCE
.....
NICKNAME, LAST, SUFFIX
GOODEN

OFFICE USE ONLY 4/18
Date Received
RECEIVED
APR 19 2012
Texas Ethics Commission

2 ADDRESS

PO BOX 2125
TERRELL, TX 75160
 (CHECK IF FILER'S HOME ADDRESS)

Receipt #
HD / PM 4/17/12 Amount
Legal
Date Processed

3 TELEPHONE NUMBER

AREA CODE NUMBER; EXTENSION
(903) 386-1276

PROCESSED APR 20 2012
Date Imaged

4 REASON FOR FILING STATEMENT

- CANDIDATE _____ (INDICATE OFFICE)
- ELECTED OFFICER STATE REPRESENTATIVE (INDICATE OFFICE)
- APPOINTED OFFICER _____ (INDICATE AGENCY)
- EXECUTIVE HEAD _____ (INDICATE AGENCY)
- FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT
- STATE PARTY CHAIR _____ (INDICATE PARTY)
- OTHER _____ (INDICATE POSITION)

5 Family members whose financial activity you are reporting (filer must report information about the financial activity of the filer's spouse or dependent children if the filer had actual control over that activity):

SPOUSE N/A

DEPENDENT CHILD 1. N/A

2. _____

3. _____

In parts 1 through 18, you will disclose your financial activity during the calendar year. In parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child if you had actual control over that person's financial activity.

7

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY R: 524364

SOURCES OF OCCUPATIONAL INCOME

PART 1A

NOT APPLICABLE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 INFORMATION RELATES TO

FILER SPOUSE DEPENDENT CHILD _____

2 EMPLOYMENT

EMPLOYED BY ANOTHER

NAME AND ADDRESS OF EMPLOYER / POSITION HELD

(Check if Filer's Home Address)

SELF
215 ELM DRIVE
Terrell, TX 75160

SELF-EMPLOYED

NATURE OF OCCUPATION

INSURANCE CONSULTING

INFORMATION RELATES TO

FILER SPOUSE DEPENDENT CHILD _____

EMPLOYMENT

EMPLOYED BY ANOTHER

NAME AND ADDRESS OF EMPLOYER / POSITION HELD

(Check if Filer's Home Address)

STATE OF TEXAS
1100 CONGRESS ST.
AUSTIN, TX 78701

STATE REPRESENTATIVE

SELF-EMPLOYED

NATURE OF OCCUPATION

STATE OFFICIAL

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

STOCK

PART 2

NOT APPLICABLE

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 BUSINESS ENTITY	AMERICAN INTERNATIONAL GROUP NAME
2 STOCK HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
3 NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input checked="" type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
4 IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS <input type="checkbox"/> LESS THAN \$5,000 <input checked="" type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

NOT APPLICABLE

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	LEXUS FINANCIAL SERVICES
2 LIABILITY OF	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
3 GUARANTOR	GOODEN, LANCE
4 AMOUNT	<input type="checkbox"/> \$1,000 - \$4,999 <input checked="" type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	CITIZENS NATIONAL BANK OF TEXAS
LIABILITY OF	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
GUARANTOR	GOODEN, LANCE
AMOUNT	<input type="checkbox"/> \$1,000 - \$4,999 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN REAL PROPERTY

PART 7A

NOT APPLICABLE

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of 'beneficial interest' and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
2 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input checked="" type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY AND STATE 215 ELM DRIVE TERRELL, TX 75160 KAUFMAN
3 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1 lot KAUFMAN
4 NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	CITIZENS NATIONAL BANK OF TEXAS GOODEN, THOMAS
5 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL FINANCIAL STATEMENT

PARTS MARKED 'NOT APPLICABLE' BY FILER

Rather than printing a page for each Part the filer checked 'Not Applicable,' this page summarizes whether the 'Not Applicable' checkbox was checked for each Part. If the checkbox is checked next to a Part below, then no pages for that Part should be present in the report. If a checkbox is not checked, then pages for that Part should be present in the report.

- N/A Part 1A - Sources of Occupational Income
- N/A Part 1B - Retainers
- N/A Part 2 - Stock
- N/A Part 3 - Bonds, Notes & Other Commercial Paper
- N/A Part 4 - Mutual Funds
- N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
- N/A Part 6 - Personal Notes and Lease Agreements
- N/A Part 7A - Interests in Real Property
- N/A Part 7B - Interests in Business Entities
- N/A Part 8 - Gifts
- N/A Part 9 - Trust Income
- N/A Part 10A - Blind Trusts
- N/A Part 10B - Trustee Statement
- N/A Part 11A - Assets of Business Associations
- N/A Part 11B - Liabilities of Business Associations
- N/A Part 12 - Boards and Executive Positions
- N/A Part 13 - Expenses Accepted Under Honorarium Exception
- N/A Part 14 - Interest in Business in Common with Lobbyist
- N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
- N/A Part 16 - Representation by Legislator Before State Agency
- N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
- N/A Part 18 - Legislative Continuances

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

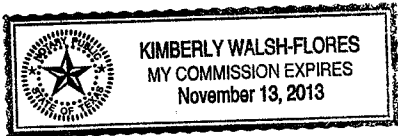


I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, **2011**, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

Lance Gooden

Signature of Filer

AFFIX NOTARY STAMP / SEAL ABOVE



Sworn to and subscribed before me by Lance Gooden this the 17 day of April, 2012, to certify which, witness my hand and seal of office.

[Signature]

Signature of officer administering oath

Kimberly Walsh-Flores

Printed name of officer administering oath

Notary Public

Title of officer administering oath