



Filing ID #10059531

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

**Name:** Thomas W. Silva  
**Status:** Congressional Candidate  
**State/District:** CO07

## FILING INFORMATION

**Filing Type:** Candidate Report  
**Filing Year:** 2024  
**Filing Date:** 05/1/2024  
**Period Covered:** 01/01/2023– 04/15/2024

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

| Asset  | Owner | Value of Asset      | Income Type(s) | Income<br>Current Year to Filing | Income<br>Preceding Year |
|--|-------|---------------------|----------------|----------------------------------|--------------------------|
| BofA Savings [BA]                                      |       | \$15,001 - \$50,000 | Interest       | \$1 - \$200                      | \$1 - \$200              |
| Retirement ⇒<br>TIAA - UOP 403(B) Retirement Plan [DB] |       | \$1,001 - \$15,000  | None           |                                  |                          |

\* Investment vehicle details available at the bottom of this form. For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

## SCHEDULE C: EARNED INCOME

| Source                    | Type           | Amount<br>Current Year to<br>Filing | Amount<br>Preceding Year |
|---------------------------|----------------|-------------------------------------|--------------------------|
| University of the Pacific | Regular Salary | \$4,127.00                          | \$51,493.00              |

## SCHEDULE D: LIABILITIES

None disclosed.

## SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

None disclosed.

SCHEDULE A INVESTMENT VEHICLE DETAILS

- Retirement

DESCRIPTION: University of the Pacific 403(B) Retirement Plan

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

**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

☒ No

**Exemption:** 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?

☐ Yes

☒ No

CERTIFICATION AND SIGNATURE

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I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

**Digitally Signed:** Thomas W. Silva , 05/1/2024