



Filing ID #10009004

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

**Name:** Robert Wayne Derlet  
**Status:** Congressional Candidate  
**State/District:** CA04

## FILING INFORMATION

**Filing Type:** Amendment Report  
**Filing Year:** 2015  
**Filing Date:** 11/1/2015

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
Alandsbanken, Finland	SP	\$1,001 - \$15,000	None		
El Dorado Savings Bank CD		\$15,001 - \$50,000	Interest	\$1 - \$200	\$201 - \$1,000
El Dorado Savings bank Checking Account		\$1,001 - \$15,000	Interest	\$1 - \$200	\$1 - \$200
Merchant National Bank Accounts		\$250,001 - \$500,000	Interest	\$1,001 - \$2,500	\$1,001 - \$2,500
Sep -IRA, U.S.E Credit Union		\$15,001 - \$50,000	Tax-Deferred		
DESCRIPTION: Sep-IRA					
UC Tax Deferred Retire Plan		\$500,001 - \$1,000,000	Tax-Deferred		
DESCRIPTION: Combined University of California Tax deferred plans, e.g. 403b, 457, etc					
University of California Pension		None	Pension	\$50,001 - \$100,000	\$50,001 - \$100,000

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
Mewuk Indian Health Center, Tuolumne, CA	Physician Pay	\$10,800	\$71,100
Mewuk Indian Health Center, Tuolumne, CA	Spouse Salary	\$143,337	\$182,000
McKesson Corp	Medical Consultant	\$8,375	\$9,446
Ellis Law Firm, Albuquerque, NM	Medical Consultant- Expert Witness	\$1,500	N/A

SCHEDULE D: LIABILITIES

None disclosed.

SCHEDULE E: POSITIONS

Position	Name of Organization
Professor Emeritus	University of California, Davis
Physician	Mewuk Indian Health Center, Tuolumne, CA
Medical Consultant	McKesson Corp
Medical Consultant Expert Witness	Ellis Law Firm, Albuquerque, NM

SCHEDULE F: AGREEMENTS

None disclosed.

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

Source (Name and Address)	Brief Description of Duties
McKesson Corp Health Solutions (Broomfield, CO, US)	Medical Consultant-Review Nurse Telephone Triage Guidelines

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**

☒ 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:** Robert Wayne Derlet , 11/1/2015