× X	Yes _	poridorn oring	ommittee on Ethics.	consulted with the Co	ss you have first	ot answer "yes" unle	mption? Do no	because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	because they m
₹	Yes 🔲	ot be	t child?	and certain other "excouse, or a dependent	nittee on Ethics iting you, your sp	proved by the Comi	lind Trusts" appeared to	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 a dependent child?	TRUSTS—Deta
]]	QUESTION)F THESE (ANSWER EACH OF THESE QUESTIONS	1	T INFORM	NT, OR TRUS	EPENDE	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	XCLUSIO
	esponse.	each "Yes" r	ule attached for each "Yes" response.	and the appropriate schedu		st be answere	nis part mu	Each question in this part must be answered	
	Yes	\$5,000 from	VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Schedule VI.	VI. Did you receive compensation of tax a single source in the two prior years? If yes, complete and attach Schedul	No D	es ∑	d have any repo sporting period?	III. 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 III.	III. Did you, your able liability (more if yes, complete
Š	Yes	angement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	V. Did you have any reportable agreemer with an outside entity? If yes, complete and attach Schedule V	8	riod? Yes	receive "unearriod or hold any le end of the per	II. 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 II.	II. Did you, your a income of more the reportable asset v
No D	Yes	efore the date or two years?	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	 V. Did you hold any report filing in the current cale I yes, complete and att 	8	s or Yes	ne (e.g., salaries reporting period'	 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. 	l. Did you or you lees) of \$200 or n
				ANSWER EACH OF THESE QUESTIONS	OF THESE	SWER EACH		PRELIMINARY INFORMATION — ANSW	RELIMINA
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assessed who files	10	A \$200 penalty shall be against any individual	Check if Amendment	6/3/2014	Date of Election:	State: California District: Sixteen		Candidate for the House of Representatives New officer or	Filer Status
	(Office Use Only)	(C						1	
	CC			elephone.	Daytime Telephone	Botelho	Jaccia	Joanna Lynn (Name: 🐧
<i>∵</i>	OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES	OFFICE OF US. HOUSE OF AL							
age 1 of	LEGISLATIVE RESOURCE CENTER 2014 FEB 12 PM 1: 26	TEGISLATIVE RI	B Ind new employees	FORM For use by candidates a	Fo	SENTATIVES	REPRESE	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2013 - つへ 30, 2019	UNITED ST FINANCIAL Period cover
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SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Joanna Lynn Garcia Botelho Page 2 of 6

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 retirement programs, and benefits received under the Social Security Act.

Exclude: Military pay (such as National Guard or Heserve pay), rederal retirement programs, and benefits received under the social security Act.	ement programs, and peneitts re	eceived under the Social 3	Security Act.
Source (include date of receipt for honoraria)	Type	Amount	unt
CALCA (Include days or levelly lot include in)	odf.	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
- 1	Director's Fee	\$400	\$3,200
CXamples: XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
State of California, chowchilla, ch	Salary	7233.30	39,803.35
LJB Farms, LLC, Chowchille, CA	Spouse Salary	1950.00	25,350.00
MainStreet Realty Inc., Chowchille CA	Loan Repayment	Ø	3,500 00
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	MainStreet Realth Inc	tate of California Retire	Alma LSB Farms LLL, Chowchilla	Colden	Golden			Examples:		incess, the haure 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 deposits totaling \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (\$P) or dependent child (DC) or is jointly held with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule II requirements, please refer to the instruction booklet.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business the name of the activities and the name of the properties.	For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and the city and state.
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For additional assets and unearned income, use next page.

Amount of Income BLOCK D

and capital gains, even if reinvested, must be disclosed as For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, income. Check "None" if no income was earned or generated.

spouse or dependent child.

* This column is for income derived from assets solely held by your

if the asset generated no income closed as income. Check "None" if reinvested, must be dis-"Tax-Deferred" column. Dividends, plans or IRAs), you may check the investments or that generate tax-deferred income (such as 401(k) allow you to choose specific

interest, and capital gains, even

For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the

it generated income, the value should be "None."

If an asset was sold during the report

ing year and is included only because

method other than fair market value, please specify the method used.

reporting year. If you use a valuation Indicate value of asset at close of

> retirement accounts that do not Check all columns that apply. For Type of Income BLOCK C

Value of Asset **BLOCK B**

(do not use ticker symbols).

Provide complete names of stocks and mutual funds more than \$200 in "unearned" income during the year. reportable asset or sources of income which generated

account that exceeds the reporting thresholds.

of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other

identify (a) each asset held for investment or production Asset and/or Income Source **BLOCK A**

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

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SCHEDULE III — LIABILITIES

Name Joanna Lynn Carcia Botcho Page 5 of 6

owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furni-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 ling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000. ture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sib-

		58					SP, DC, JT	
	Bank of America Mudercard	Bank of America Mortgage	American Ay Could	US BANK O	American Ag Credit	Example: First Bank of Wilmington, DE	Creditor	
	Recursing	June 2007	June 2018	1d. 2013	June 2013	May 1998	Date Liability Incurred mo/year	1
	Recurring Creat Cord	Surce 2007 Mort sure on 13610 Ave of 12, chand	June 2013 Almond Farm Operating Loan	ld. 2013 Auto Low on Food Fusion	June 2013 Mortgage on 1340 Ave 21/2 Charated	Mortgage on 123 Main Street, Dover, DE	Type of Liability	
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SCHEDULE IV — POSITIONS

any nonprofit organization, any labor organization, or any educational or other institution other than the United States. cer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an offi-

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

Use additional sheets if more space is required.	>EO I Single Member Manyer	Broker Programs Trosume Director		Bourd of Directors	Office Technician, Associate Good	Position	and positions solety of an nonorary nature.
nore space is required.	>EO Single Member Number Number 1 IB Farms, L-C U/Formerly sole-Proprietochip d.b.a. B&G Enterprised	or MainStreet Realty, Inc.	Joseph Dalling & Construction	Mader Association of Roulton's	office Technician; Associate Good State of California - Valley State prison for Warren; Hand Churches: Valley State Prison	Name of Organization	wie.

SCHEDULE V — AGREEMENTS

Name Joanna Lynn Garcia Botcho Page 6 of 6

on plan mand	ent plan manifer by a former employer.	•
Date	Partles To	Terms of Agreement

SCHEDULE VI — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the *two* prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule I.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
The Almond Company, Chauchille, A	My Farms Atmond Marketing & Processing Company
, 0	

COMMITTEE ON ETHICS 2014 FEB 12 PM 1: 27

EXTENSION REOUEST FORM U.S. HOUSE OF REPRESENTATIVES CANDIDATE FINANCIAL DISCLOSURE OF THE CLERK

K. Michael Conaway, Chainman T. Linda T. Sánchez, Ranking Member
K. Miss Lay Orline J. Dinchi
Date: 11/5/13
Your request for an extension of time in which to file the Financial Disclosure Statement referenced above is hereby granted. Your report must be filed on or before I 3 1 1 1 2 1 1 1 2 1 1 1 2 1 1 1 2 1 1 1 2 1 1 1 1 2 1 1 1 1 2 1
For Ethics Committee Use Only
The length of time for which extension is requested (check one): 30 days 60 days 90 days Other Specify number of days or specific date
Financial Disclosure Statement Report Type (check one): Report due in 2013 Report due in 2014 Amendment Other Spécify
State/District of Election: California/16th District
Date of Special/Primary Election: June 3, 2014
Name of Candidate: Joanna Lynn Garcia Botelho Date: 10/24/13

Copy to: Legislative Resource Center, B-106 CHOB

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COMMITTEE ON ETHICS U.S. HOUSE OF REPRESENTATIVES LEGISLATIVE RESOURCE CENTER

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WE'HOUSE OF REPRESENTATIVES OF THE OF THE OLERK EXIENSION REQUEST FORM CVADIDATE FINANCIAL DISCLOSURE

K. Michael Conaway, Chairman Linda T. Sánchez, Ranking Member
K. Missolm Briefley
Date: 11/5/13
Your request for an extension of time in which to file the Financial Disclosure Statement referenced above is hereby granted. Your report must be filed on or before $\frac{1}{3}\sqrt{1/1}$. The Ethics Committee may grant additional requests, which may not, in the aggregate, exceed 90 days from the original due date for this report.
For Ethics Committee Use Only
The length of time for which extension is requested (check one): Specify number of days or specific date Specify number of days or specific date
Financial Disclosure Statement Report Type (check one): Report due in 2013 Report due in 2014 Amendment Other Specific
State/District of Elections: California/16th District
Date of Special/Printary Election: June 3, 2014
Name of Candidate: Joanna Lynn Garcia Botelho Date: 10/24/13

Copy to: Legislative Resource Center, B-106 CHOB

(This page will be publicly disclosed)

JAN 5 1 2014

COMMILLEE ON ELHICS U.S. HOUSE OF REPRESENTATIVES LEGISLATIVE RESOURCE CENTER

SOITEBIS DH 1:27

CAUDIDATE FINANCIAL DISCLOSURE

Linda T. Sánchez, Ranking Member	K. Michael Conaway, Chairman
Miss J. Sample	Kimisso L
Date: 11/5/13	
in which to file the Financial Disclosure Statement. Committee may grant additional requests, which ye from the original due date for this report.	referenced above is hereby granted
	For Ethics Committee Use Only
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——————————————————————————————————————	Financial Disclosure Statement Report d
V16th District	State/District of Election: California
3, 2014 : or prine (egibly	Date of Special/Primary Election: June
	Name of Candidate: Joanna Lynn (
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