LEGISLATIVE RESOURCE CENTER

	Name
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Page 2 of 6

## SCHEDULE I—EARNED INCOME

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.

Source Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
on .	Spouse Salary	NA
LAW PRACTICE	RESEDUAL ENCOME	15,800
IC FOUNDATION	SPOUSE SALARY	N/A
	-	
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For payments to charity in lieu of honoraria, use Schedule II.

OT COC CHENA	RIVER Souece	SP ROTH TRA: LORD ABOLT	LORD ABSET AFE	TRA: GROWTH FUND AMER	IT CAPITAL ONE	JT 1st Bank of Padu	Examples:	SP, Sp Mega Corp. Stock	ment accounts which are not sett-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 publicly 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 deposits totaling 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 (SP) or department of the fair left.  For a detailed discussion of Schedule III requirements, please rafer to the instruction booklet.	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 tRAs 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 assertised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retire
	& ADV	ABBET AFE	AFFELDATE	AND AMER	SAUINGS	1st Bank of Paducah, KY Accounts	7	*	creach, provide only se account and its d.  or investment, pro- rely-held business name of the business geographic loca- including second there was rental any deposits total- nacional or income derived or income derived including the Thrift that an asset or (SP) or dependent that any deposits total- recipions (JT), in the spouse (JT), in the	
							5		None >	BLOCK B  Value of Asset  Indicate 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 during the reporting year, and is included only because it generated income, the value should be "None."
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		3					ð		\$15,081 - \$30,000 E	Value value year. Other to pecify to the st was st was st in directory directory to the st was st wa
<del>400 - 11</del>	ļ	3	90000	50 107 7 10		225%	A 775 S 83	×	\$50,001 - \$100,000 m	BLOCK B BLOCK B waive of asset a sear. If you use her than fair macify the method u was sold during the income, the value
ن ندم			مننة	7				غر يَّ	\$100,001 - \$550,000	BLOCK B  De of Asset of asset at If you use a than fair man the method use sold during the cluded only b me, the value
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			Ì.		X				INTEREST	VPC COLOR
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							Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	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-deterred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even it reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
×		X	×	X	<u> </u>	_	_		None -	was en by chair the ass
ļ		<u> </u>	<del> </del>	1	<del> </del>	L	<u> </u>	<u> </u>	\$1 - \$200 ==	retire to the control of the control
<b> </b>	ļ	<del> </del>	<del></del>	—	<del> </del>	1	<del>[</del>	_	\$201 - \$1,000 <b>=</b>	Amount of in  For retirement accounts it you to choose specific it that generate tax-deferred as 401(k) plans or iPAs), the "None" column. For a indicate the category of checking the appropriat  Dividends, interest, and  even if reinvested, must as income. Check "None was earned or generated
	<del> </del>		<del>}</del>	+	×	1	<u> </u>	×	\$1,001 - \$2,500	BLOCK D  Amount of income  ment accounts that do n  shoose specific investm  erate tax-deferred incom  b) plans or iRAs), you ma  e' column. For all other  the catlegory of inco  the appropriate box  ds, interest, and capital  reinvested, must be dis  me. Check "None" if no  ned or generated.
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	<del> </del>	+	+	+	+	╁	×	-	\$100,001 - \$1,000,000 ×	don nestmiconna inco
	1	1	1	+-	1		1	1	\$1,000,001 - \$5,000,000	Amount of Income  Amount of Income  Amount of Income  For retirement accounts that do not allow you to choose specific investments or that generate tax-defierred 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.
<u> </u>	1		1	1	1	T	Ť	1	Over \$5,000,000 ≚	
								S (partial)	ff only a portion of an asset is sold, please indicate as follows: (S) (partial) See below for example.  P, S, E	BLOCK E  Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed)

Name ANH

Continuation Choose (in theorem)				
BLOCK A  Asset and/or income Source	<b>Year-End</b> BLOCK B	вьоск с <b>Туре</b>	BLOCK D  Amount of Income	BLOCK E
	Value of Asset	of Income		1
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	\$1,0 \$15 \$50 \$10 \$25 \$50 \$1,0 \$25 \$25 \$25	REM INTI CAF EXC Othe (Spe Part	\$1,0 \$2,5 \$5,0 \$15, \$60, \$1,0	
JI CHINA PRECISION SEC	X	X	X	
CITI GROUP		<b>X</b>	X	
<del>                                     </del>		<b>X</b>	X	
JT GENERAL BLECTREC	<b>X</b>	×	×	
TO PICKESSON CORP	×	×	X	
NY COM THE	×	×	×	
IT BANK OF AMECICA	*	×	*	2 5
		X	×	
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CEAL STATS				
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WESTERN		×	X	

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# SCHEDULE IV— TRANSACTIONS

Name ANH "JUSEPH" CAO

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oren, or the purchase or sale or your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so Indicate (i.e., "partial sale"). See example below.	erry nerd for investment that encoured a type. Inches unassembles are resulted in a capital loss, Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children	
CHASE HANGE		Type of Transaction
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Quarterly, Monthly, or	(MO/DAY/YR)	Date
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										JT 3736 S. CLAZGORNE	OT MUE STACE	ST BEH STOCK	TO HOWNEAU ENTERPRISES	TI PUCKIST PHARMACEUTICAL	5T BANK OF AMERICA	Example: Mega Corpo	SP, DC, JT Asset	dren, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so Indicate (i.e., "partial sale"). See example below.  Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	resulted in a capital loss. Provide a brief deerpition of any exchange trans- action. Exclude transactions between you, your spouse or dependent chil-	Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property, held for investment that exceeded \$1 non Include transactions that
						 #			a.c. \	<b>×</b>								PURCHASE		of Tra
											×	×	×	×	<	×		SALE		Type of Transaction
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										06-10	05-17-10	05-2010	04-26-10	01-10-10	04-4-10	10-12-10		Or Quarterly, Monthly, or Bi-weekly, if applicable	(MO/DAY/YR)	Date
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## SCHEDULE V— LIABILITIES

Name ANH JUSEPH CAO

Page 5 of 6

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 it is rented out); loans secured by automobiles, household furniture, 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 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.

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			٦		SP, DC, JT	3
			CHASE BANC	Example: First Bank of Wilmington, DE	Creditor	
			127	May 1998	Date Liability incurred Mo/Year	
			AUTO	Mortgage on 123 Main St., Dover, DE	Type of Liability	
·			×		\$10,001- \$15,000	
					\$15,001- \$50,000	
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	<del>,</del>	 			\$25,000,000 T	
					Over \$50,000,000	

### SCHEDULE VI — GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$335 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

Use additional sheets if more space is required.

JO BONNER, ALABAMA CHAIRMAN

MICHAEL T. McCAUL, TEXAS K. MICHAEL CONAWAY, TEXAS CHARLES W. DENT, PENNSYLVANIA GREGG HARPER, MISSISSIPPI

KELLE A. STRICKLAND, COUNSEL TO THE CHAIRMAN ONE HUNDRED TWELFTH CONGRESS

### U.S. House of Representatives

COMMITTEE ON ETHICS

Washington, **DC** 20515-6328

LINDA T. SÁNCHEZ, CALIFORNIA RANKING MEMBER

MAZIE K. HIBONO, HAWAII JOHN A. YARMUTH, KENTUCKY DONNA F. EDWARDS, MARYLAND PEDRO R. PIERLUISI, PUERTO RICO

DANIEL J. TAYLOR, COUNSEL TO THE RANKING MEMBER

1015 LONGWORTH HOUSE OFFICE BUILDING (202) 225-7103

April 15, 2011

The Honorable Anh Joseph Cao 4371 Murano Road New Orleans, LA 70129

Dear Mr. Cao:

The Ethics in Government Act of 1978 (EIGA) provides that all former Members must file a termination Financial Disclosure Statement within 30 days of leaving office. A termination Statement should have been filed on or before February 2, 2011, unless you have accepted a position with the federal government that requires the filing of a publicly-available financial disclosure statement. According to our records, you have not yet filed the required statement. If you have assumed another federal position requiring the filing of a financial disclosure statement, please complete and return the enclosed notification to the Clerk.

The EIGA provides that any individual who files a required statement more than 30 days after the due date shall pay a \$200 late filing fee to the United States Treasury. As a courtesy and because you may have not received the Clerk's November notice, the Committee will waive the \$200 late filing fee if your termination Statement is filed on or before the annual financial disclosure deadline for all current Members, May 16, 2011.

Please send the completed termination Financial Disclosure Statement (with two copies), no later than May 16, 2011, to the Legislative Resource Center, B-106 Cannon House Office Building, Washington, D.C. 20515. The forms, instruction booklet, and a download of the software are available on the Committee's website at <a href="http://ethics.house.gov/">http://ethics.house.gov/</a>.

If you believe you have received this notice in error or if you have any questions concerning the reporting requirements, please contact the Committee at (202) 225-7103.

Sincerely,

Jo Bonner

Chairman

Mids J. Sándy

Linda T. Sánchez Ranking Member

JB/LTS:haj