-		まる
UNITED STATES HOUSE OF REPRESENTATIVES	Form A	DELIVER BURGET OF 6
2014 FINANCIAL DISCLOSURE STATEMENT	For Use by Members, Officers, and Employees	FOU BURNE.
	2015 MAY - 1 AM 9: 40	
Name: LORETTH SANCHEZ	Daytime Telephone: 202. 225, 2765	
	(0	Office Use Unity)
FILER STATUS  Member of or Candidate for State:	Officer or Employing Office: Employee	
TYPE 2014 Annual (Due: May 15, 2015)	Amendment Termination  Date of Termination:	
PRELIMINARY INFORMATION - ANSWER EACH OF T	THESE QUESTIONS	
A. Did you, your spouse, or your dependent child: <ul> <li>a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or</li> <li>b. Make more than \$200 in unearned income from any reportable asset during the reporting period?</li> </ul>	Yes No Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	Yes No
B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?	Yes No Source during the reporting period?  G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$375 in value from a single source during the reporting period?	Yes No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	Yes No  H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$375 in value from a single source during the reporting period?	Yes No
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Yes No lieu of paying you for a speech, appearance, or article during the reporting period?	Yes No
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	YeS No ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	F YOU ANSWER "YES"
IPO AND EXCLUSION OF SPOUSE, DEPENDE	DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS	UESTIONS
IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you are the Committee on Ethics for further guidance.	al Public Offering during the reporting period? If you answered "yes" to this question, please contact	ct Yes No X
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" this report details of such a trust that benefits you, your spouse, or your dependent child?	mittee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from pendent child?	Yes No X
<b>EXEMPTION</b> – Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	amed" income, transactions, or liabilities of a spouse or your dependent child because they meet all ulted with the Committee on Ethics.	Yes No X

# SCHEDULE A - ASSETS & "UNEARNED INCOME"

Page <u>,</u>

None	5~g=_v	Provide complete names of stocks and mutual funds (do not use only ticker symbols).  For all IFAs and other retirement plans (such as	401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	For rental and other real property held for investment, provide a complete address or description, e.g. rental property," and a city and state.	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); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	If you have a privately-traded fund that is Excepted Investment Fund, please check the "box.	If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left.	For a detailed discussion of Schedule requirements, please refer to the instruction booklet.	SP Mega Corp. Stock	Examples: Simon & Schuster	ABC Hedge Fund	SCHOOLS FIRST FOU	CONGRESSIONAL CREDIT	YUY FEDERAL	PUE CH HOME	2005 M. TOWNER	733
X   X   \$50,001-\$100,000	Asset and/or Income Source Identity (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income that generated more than \$200 in 'unearned' income during the year.	mutual funds	asset held in bresholds.	al the amount total is over there there is xunts.	or investment, cription, e.g.,	held business name of the ies, and its	uding second are was rental I any financial n, a federal Savings Plan.	щ. <u>«</u>	it an asset or use (SP) or with anyone	Schedule A tion booklet.	<b>早</b>		×	200	יבשוד	CREPA	猫	2 57	
X   X   \$50,001-\$100,000	1 F = C < =		1																
X   \$50,001-\$100,000	inte val	Column M is for assets held by your spouse or dependent child in which you have no interest.	_	<b></b>						\$1-\$1,000									
X   \$50,001-\$100,000	lue of lethod was genera	is for a	,	C					,000	\$1,001-\$15		ndefinit			×	X			
X       \$50,001-\$100,000       m         \$100,001-\$250,000       m         X       \$250,001-\$500,000       c         \$1,000,001-\$1,000,000       m         \$1,000,001-\$25,000,000       c         \$25,000,001-\$25,000,000       c         \$25,000,001-\$50,000,000       c         \$25,000,001-\$0,000,000       c	asse other other sold	assets est.	,]	0					0,000	\$15,001-\$5		<b>1</b> 5							
\$100,001-\$250,000	t at or than than during during	ne d		m		<u>-</u>	<u>.</u>		00,000	\$50,001-\$1	×			$\times$	٠.			<u> </u>	
X       \$250,001-\$500,000       x         \$500,001-\$1,000,000       x         \$1,000,001-\$5,000,000       -         \$5,000,001-\$25,000,000       -         \$25,000,001-\$50,000,000       x         Over \$50,000,000       -	Value of Asset t close of the report close of the reporting an fair market value, and the reporting pering the reporting perine, the value should lid by your spouse or	by уо	.						250,000	\$100,001-\$									
\$500,001-\$1,000,000	Je of the se of the market vinarket verse reporting the relations of the value should be related to the related th	ur spo	,	<u>.</u>					500,000	\$250,001-\$			×						
\$1,000,001-\$5,000,000	a reposition of the should should be	juse o		I					1,000,000	\$500,001-\$								×	•
\$5,000,001-\$25,000,000	orting pleas	r depe	7	_					\$5,000,000	\$1,000,001							×	,	
\$25,000,001-\$50,000,000 ×.  Over \$50,000,000	perior se spe and i ione."	anden	-]	-					\$25,000,000	\$5,000,001									
Over \$50,000,000 F	d. If y sind sind	t child	ς .	_					1-\$50,000,000	\$25,000,00									
C TOC A 4110- 64 000 000*	If you use a sify the method included only child in which	₹		F					200,000	Over \$50,0									
<u></u>				3				*000,000	Asset over \$1	Spouse/DC									
NONE S	Type of Incom Check all columns that apply. If generate tra-deferred income (such 529 accounts), you may check it column. Dividends, interest, an even if reinvested, must be disc for assets held in taxable accoun if the asset cenerated no income of	If the asset generated to income du period.								NONE									
× DMIDENDS	Check all colur generate tax-del 529 accounts), column, Divid soun if relines soun if relines for assets held if the asset cen	g 98.86	1						}	DIVIDENDS	×	_				<u> </u>			
RENT	colur ax-def ax-def inves inves held	t gen								RENT							<u> </u>	$\times$	,
INTEREST INTEREST	Typomns 1 female you you in tall in ta	erateo								INTEREST				×	<u>×</u>	×			
CAPITAL GAINS	Type of Incom Ins that apply. Fe femed income (such you may check it ends, interest, an intake account in taxable account	8							AINS	CAPITAL G		L			L.,				
EXCEPTED/BLIND TRUST	ipply me (su check	ncome	_	<u>.</u>					/BLIND TRUS	EXCEPTED					<u> </u>				
TAX-DEFERRED	Type of Income Check all columns that apply. For generate tax-deferred income (such as 529 accounts), you may check the column. Dividends, interest, and aven if reinvested, must be disclos for asserts held in taxable accounts. If the asset centrated no income durin	duni							RRED	TAX-DEFER									
	accounts that 401(k), IRA, or Tax-Deferred capital gains, ed as income Check "None" of the resortion	g the reporting					rm Income)	ncome or Fa				Royalbes	Partnership Income						
None Si Co	Amount of Income For assets for which you checked "Tax-Deferred" in I may check the "None column. For all other assets category of income by checking the appropriate buildends, inferrest, and capital gains, even if must be disclosed as income for assets held accounts.  Check "None" if no income was concepted.	generated. "Column X in which yo	1	-											_				
None	heck bry of sinds, stard	min XII	_	=			<u></u>	-				<u> </u>	<u> </u>	×	×	X	<u> </u>		
\$201-\$1,000 = C T to a g of	for whithe "h f inco f inter inter Ch	lis for	-1				,					_			_				
× \$1,001-\$2,500 < 0 n n n n n n n n n n n n n n n n n	which yo "None" "None to ncome to sterest, a closed a	r asse no ir	-1								×	<u></u>				ļ	H		
\$2,501-\$5,000 < ne st ne	Amount of Income n you checked Tax-Defens no column. For all other a e by checking the approp st, and capital gains, eve td as income for assets k 'None' if no income	ts hel	-1					,	•		Щ	_			<u> </u>				
\$5,001.\$15,000 ≤ ½ å	mt of In secked "Ta mecked "Ta mecking thecking the capital g recome fo	d by y	-1									ļ <u>-</u>			_	<u> </u>		×	
\$15,001-\$50,000 \(\delta\)	of Income  of Income  (ed Tax-Deferre  i. For all other a  king the appropriat gains, even  me for assets  if no income	our sp	-1	···									<u> </u>		$\vdash$		×		
\$50,001-\$100,000 \(\geq\)	Defen other approns, en assets toome	pouse	-1	··········	<del></del> -						ļi	<u> </u>	-		<u> </u>		<u> </u>		
\$100,001-\$1,000,0000 🔀 💆	red" in B assets i opriate opriate ven if r ven if a	or de	-1									-	_	$\vdash$		_	-		
\$1,000,001-\$2,000,000 × 9	d" in Block C., ) ssets indicate sriate box belo in if reinvest held in taxal was earmed	pende	-1				<del></del>					<u> </u>	_		<u> </u>		<del> </del>	_	
None		int c <u>hi</u>	-1				000,000*	me over \$1.0			$\vdash$			H			_		
	= 0 0 0 0 ± s			<b>64</b> 5 5 5 5			*****			·	र्	<u> </u>		H					
peniod. If only a portion of an asset was sold, please indicate as follows: (S (part)). Leave this column blank if there are no transactions that exceeded \$1,000.	\$ 0 S 6 G 6 G 7	the re priod only a asset	lows: (S	have thing ank if the transal at excer, 1000.						s, s(p	oart)			ŧ					
# # # # # # # # # # # # # # # # # # #	Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E) the report 1000 in the report 1000	in the reporting period. If only a portion an asset was se	(par	s colu ere a ctions eded						art), o					]	}	}		

## SCHEDULE C - EARNED INCOME

Name: LORETTH SANCHEZ Page 3 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) totaling \$200 or more during the reporting period. 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

INCOME LIMITS and PROHIBITED INCOME: The 2014 limit on outside earned income for Members and employees compensated at or above the "serior staff" rate was \$26,955. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited.	pensated at or above the "senior staff" rate rere totally prohibited.	was \$26,955. In addition, certain
Source (include date of receipt for honoraria)	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
Examples: State of Maryland  Civil War Roundtable (Oct. 2) Ontario County Board of Education	Legislative Pension Spouse Speech Spouse Salary	\$18,000 \$1,000 WA
IM Sourcino Ino POSTA MESA CA	Same Salary	4/10
	d	

#### SCHEDULE D - LIABILITIES

Name: LORETTA SANCHEZ Page -4

잌 6

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); 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 \*Column K is for ilabilities held solely by your spouse or dependent child. you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000.

			SP, DC, JT		
DNG	NATIO	Example			
	MATIONSTAR, Dallas, TX	First Bank of Wilmington, DE	Creditor		
04/13	04/13	5/98	Date Liability Incurred MO/YR		
MORTERGE ON VIA ARR 8A,	NORTHAGE ON TOWNER SA	Mortgage on Rental Property, Dover, DE	Type of Liability		
eA,	SA		\$10,001- \$15,000	>	
Due 3			\$15,001- \$50,000	8	
			\$50,001- \$100,000	6	
		×	\$100,001- \$250,000	0	
×	×		\$250,001- \$500,000	Πħ	moun
	<u> </u>				
			\$500,001- \$1,000,000	71	l of Li
				т 6	Amount of Liability
			\$1,000,000 \$1,000,001-		t of Liability
			\$1,000,000 \$1,000,001- \$5,000,000 \$5,000,001-	<b>о</b>	t of Liability
			\$1,000,000 \$1,000,001- \$5,000,000 \$5,000,001- \$25,000,000 \$25,000,001-	<b>о</b>	t of Liability

#### **SCHEDULE E - POSITIONS**

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. **Exclude**: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

		TRUSTEE	Position
		CHAPMIAN UNIVERSITY I UNIVERSITY DR. ORANGE CA 92866	Name of Organization

### SCHEDULE F - AGREEMENTS

Name:	
LORETTA	
SANCHEZ	
Page 5 of 6	

Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

			100 E 100	Date
	PUBLISHING	RICHAIRD BUSICIN GRAND CENTRAL	MOVE AND LORGIN SMUCHEZ, LINDAT. SHINCHEZ "DREAM IN COLUK" BOOK CONTRACT	Parties to Agreement
			"DREAM IN COLUNC" BOOK CONTRACT	Terms of Agreement

#### **SCHEDULE G - GIFTS**

Report the source (by name), a brief description, and the value of all gifts totaling more than \$375 received by you, your spouse, or your dependent child from any source during the year. **Exclude**: Gifts from relatives, gifts of personal hospitality from 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 \$150 or less need not be added towards the \$375 disclosure threshold. **Note**: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

						Example:	
1						ıple:	
'					2	Mr. Joseph	
 	 				Q	Mr. Joseph Smith, Arlington, VA	Source
						lon, VA	
	i						
						Sil	
						Silver Platter (determination of personal friendship received from the Ethics Committee)	
			:			termination o	
						of personal frie	
			}	! !		endship recei	
						ved from the	
				1   		Ethics Comm	Description
				]		iftee)	tion
			)			  -   i	
		) }	)	•		i	
			,			: 	
						\$400	<u> </u>
							Value
	L	<u> </u>					]

# **SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS**

Name: LORETTH SANCHEZ Page 6 of 6

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$375 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

**EXCLUDE:** Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer

ule ilei.						
	Source	Date(s)	City of Departure Destination	Lodging? (Y/N)	Food? (Y/N)	Family Member Included? (Y/N)
	Government of China (MECEA)	Aug. 6-11	DC-Beijing, China - DC	≺	۲	z
exemples.	Habitet for Humanity (charity fundraiser)	Mar. 3-4	DC-Boston-DC	٧	*	٧
GERMA	GERMAN MAIRSHALL FUND OF THEUST APRIL 11-23 NEWARK-NEW	APRIL 11-23	- I HIP CM DAY - YOLK MEN	7	7	ح
ROBER	ROBERT BOSCH STIPTUNG	Post I	MUMBAI- ROME-LAX			
	79.					
ORCAR	ORCANIZATION OF IRANIAN	Jun 26-20	DC-PAIRIS-DC	2	יכ	کا
AMO	AMERICAN COMMUNITIES					
GERMA	GERMAN MARSHALL FUND OF UST	Jun 29-	PARIS-BUCHAREST-	R	7	ک
		Jur32	EDINBURGH	:		1.
ABC	ABC NEWS	Dec 6-7	HARRISBURG, PA - NYC-	ic	ح	2
			LAX ,			
	1100					
SERMA	GERMAN MARSHALL FUNDOF USA Dec 12-14	Dec 12-14	LAGUNA BEACH, CA	y	يد	R
ROBER	ROBERT BOSCH STIFTUNG					