F		pendent child	ities of a spouse or dependent child	EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities	rned" income	er assets, "unes	eport any oth	ed from this r	EXEMPTION — Have you excluded from this report any other assets,	EXEMPTION
No ×	Yes	ot be	cepted trusts" need n	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?	ittee on Ethics ng you, your s	ed by the Comm	rusts" approve details of sucl	lified Blind Tr	ails regarding "Qua e you excluded fron	TRUSTS-Der
· · · ·	ER EACH OF THESE QUESTIONS	)F THESE (		MATION — ANSW	T INFORM	OR TRUS	ENDENT,	SE, DEPI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLUSIC
	esponse.	attached for each "Yes" response.		Each question in this part must be answered and the appropriate schedule	and the a	e answered	art must b	n in this p	Each question	
S S	Yes X	\$5,000 from	pensation of more than \$5,000 from № prior years? tach Schedule VI.	VI. Did you receive compensation of n a single source in the two prior years? If yee, complete and attach Schedul	×	eg □	any report- g period?	dent child have ng the reporting le III.	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, you able liability (mo if yes, complete
<u>₹</u>	<b>6</b> €	rangement	contable agreement or an itach Schedule V.	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	<b>₹</b>	Yes  X	we "unearned" hold any of the period?	ent child receive rting period or 2000 at the end le M.	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 income of more reportable asset if yes, complete
₹ 	Yes	before the date or two years?	trach Schedule IV.	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.	š	Yes X	3., salaries or ng period?	ed" income (e.g e in the reporte le I.	<ol> <li>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.</li> </ol>	I. Did you or you fees) of \$200 or If yes, complete
				In all sections, please type or print clearly in blue or black ink.  PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS	OF THES	ER EACH	or black ink.  - ANSW	AATION -	In all sections, please type or print clearly in blue or black ink PRELIMINARY INFORMATION — ANSW	In all sections, PRELIMIN
		more than 30 days late				Office:	Employing Office:		New officer or employee	Status
assessed		A \$200 penalty shall be	Check if Amendment	June 2014	Date of Election:	State: California	State: _C2 District:	the resentatives	X Candidate for the House of Representatives	Filer
	(Office Use Only)	(C								
is	OFFICE OF THE CLERK US. HOUSE OF REPRESENTATIVES	OFFICE OF S. HOUSE OF RI	U	Daytime Telepho	Daytime			Chew	Robin Leo	Name:
FR <b>4</b>	EGISLATIVE RESOURCE CENTER 2013 OCT -7 PM 3: 49	EGISLATIVE RI	# B and new employees	FORM B For use by candidates and		ATIVES	PRESENTATION NENT 19/27/2013	E OF REF RE STATE 2013 -	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 201309/27/2013	FINANCIA Period cove

## SCHEDULE I - EARNED INCOME (INCLUDING HONORARIA)

Name Robin Leo Chew

Page 2 | | 5 |

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.

Excitute. Initially pay (and as inautial and of inserts pay), exertal formation programs, and contain	3	COCITOR GIRCO COCIAI COCAIRI	Jooding J. Co.
Course (include data of receipt for honoraria)	Type	Amount	unt
Octive (incline care or teverby or trouvierse)	1 1 100	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
	Spouse Salary	AN	NA
proU.net, Inc., Campbell, CA (President)	Salary	\$98,064	\$128,687
Lucidcafe.com, Emerald Hills, CA (Owner)		loss	loss

### SCHEDU

DULE II — ASSETS AN	DULE II — ASSETS AND "UNEARNED" INCOME		Name Robin Leo Chew Pa	Page 3 of 5	
BI OCK A	B OOK B	BI OCK C	פוססעס		
ot and/or Impared Salina	Value of Appar	BLOCK	- U SACORE		
et and/or income Source	Value of Asset	Type of Income	Amount of Income		-
each asset held for investment or production with a tair market value exceeding \$1,000 at reporting year. If you use a valuation of the reporting period, and (b) any other asset or sources of income which generated \$200 in "unearned" income during the year.	ë, S	Check all columns that apply. For assets for which retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) and capital gains	Check all columns that apply. For assets for which you checked "Tax-Deferred" in Block C, you may allow you to choose specific investments <u>or</u> that generate tax- income by checking the appropriate box below. <b>Dividends, interest</b> , deferred income (such as 401(k)) and capital gains, even if reinvested, must be disclosed as	Block C, you may the category of dends, interest, a disclosed as	
implete names of stocks and mutual funds	If an accept was sold during the report	plans or IRAs), you may check the	modele names of stacks and mutual funds. If an accept was sold during the report.   plans or IRAs), you may check the important Check "None" if no important or prepared or prepared of the pr	enerated	

shares	proU.net, Inc.(1.5 M		DC, Examples: Simon & Schuster	SP Mega Corp. Stock	ing \$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 (SP) 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 Schadule II requirements, please refer to the instruction booklet.	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental increase during the second and the second total increase during	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.	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.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use ticker symbols).	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.	Asset and/or Income Source	
	x	ж ×	Indefi		None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$15,000 \$50,001 - \$100,000 \$160,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 Spouse/DC Asset over \$1,000,000*	- P. G.	A B C D E F G H I J K L M	This column is for assets solely held by your spouse or dependent child.		If an asset was sold during the report- ing year and is included only because	Indicate value of asset at close of at reporting year. If you use a valuation method other than fair market value, please specify the method used.	Value of Asset	
	s corp	X	Royaltes	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of income (Specify: e.g., Partnership Income or Farm I	Income)	\$	during the reporting period.	If the asset generated no income	plans or IRAs), you may check the "Tax-Deferred" column, Dividends,	Check all columns that apply. For retirement accounts that do not allow you to choose specific invesiments or that generate tax-deferred income (such as 401(k)).	Type of Income	
	x	×	×	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,601 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*		Current Year		* This column is for income derived from assets solely held by your spouse or dependent child.	=	For a check	Amount of Income	
	X	×	×	×	\$1 - \$200 \$204 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$10,0001 - \$1,000,000 \$1,000,001 - \$5,000,000 Spouse/DC Income over \$1,000,000		Preceding Year	] 	d from assets solely held by your	was earned or generated.	tssets for which you checked "Tax-Deferred" in Block C, you may k the "None" column. For all other assets, indicate the category of me by checking the appropriate box below. Dividends, interest, capital gains, even if reinvested, must be disclosed as	Income	· ·

For additional assets and unearned income, use next page.

#### SCHEDULE III - LIABILITIES

Name Robin Leo Chew Page 4 of 5

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 sibowed 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

			Γ	JT DC,	T
		N/A	Example: First Bank of Wilmington, DE	Creditor	ويززان والربيب المراوي والمساور والمارون والمراوي والمراوي والمراوي والمراوي والمراوي والمراوي
			May 1998	Date Liability Incurred mo/year	
	-		Mortgage on 123 Main Street, Dover, DE	Type of Liability	والمنافي والمسترين
		 	r	\$10,001— \$15,000	
			L	\$15,001— \$50,000 <b>D</b>	
		 	L	\$50,001— \$100,000 O	
 		 	<b>!</b>	\$100,001— \$250,000 □ \$250,001—	
 		 	L	\$500,000 M Amou	
 -		-	┢	\$1,000,000 T 3 \$1,000,001— Q \$5,000,000 G	
 			┢	\$500,000 m s500,001— \$1,000,000 m \$5,000,000 G \$5,000,000	
 <i>7</i>			卜	\$25,000,000 \$25,000,001—	
 ,			┢	Over \$50,000,000 C-	
				Spouse/DC Liability over ス \$1,090,000	

#### SCHEDULE IV - POSITIONS

any nonprofit organization, any labor organization, or any educational or other institution other than the United States 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 officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise,

and positions solely of an honorary nature. Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

Position	Name of Organization
See Schedule I	

Use additional sheets if more space is required.

#### SCHEDULE V — AGREEMENTS

Name Robin Leo Chew Page 5 5

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		service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or contin	Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a k	
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Date	Parties To	Terms of Agreement
	N/A	

# 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
See Schedule I	

GPO: 2013

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