×	Yes	pendent child	ities of a spouse or dependent child Committee on Ethics.	transactions, or liabil	arned" income, ss you have firs	er assets, "une wer "yes" unle	his report any other ption? Do not ans	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or c because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics	EXEMPTION— because they ma
No	Yes 🔲	ot be	ccepted trusts" need n	and certain other "expouse, or a depende	nittee on Ethics ling you, your s	ed by the Comn n a trust benefit	nd Trusts" approve	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
<u>v</u>	EACH OF THESE QUESTIONS	OF THESE	S	MATION — ANSW	TINFORM	OR TRUS	EPENDENT,	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLUSION
	esponse.	each "Yes" r	ule attached for each "Yes" response	propriate sched	and the ap	e answered	s part must be	Each question in this part must be answered and the appropriate schedule	
No	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 compens a single source in the two prit If yes, complete and attach	No	Yes ×	have any report- orting 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 sable liability (more if yes, complete a
X	Yes 🔲	rangement	oorlable agreement or arrangement trach Schedule V.	V. Did you have any reportab with an outside entity? If yes, complete and attach	No D	Yes X	eceive "unearned" d or hold any end of the period?	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 s income of more th reportable asset w
№	Yes X	vefore the date	IV. Did you hold any reportable positions on or before the date of tiling in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	 Did you hold any report thing in the current case of tiling in the current case of the yes, complete and at 	No I	Yes	e (e.g., salaries or porting period?	 Did you or your spouse have "earned" income (e.g., salaries fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I. 	l. Did you or your fees) of \$200 or m
				ANSWER EACH OF THESE QUESTIONS	OF THESE	R EACH	N - ANSWI	PRELIMINARY INFORMATION - ANSW	PRELIMINA
							blue or black ink	see time of print clearly in	In all contions of
assessed who files		A \$200 penalty shall be against any individual more than 30 days late.	Check if Amendment	Nov. 6, 2012	Date of Election:	irginia 10th	State: V District: Employing	X Candidate for the House of Representatives New officer or employee	Filer Status
U.S. HÖUSE OF REPRESENTATIVES (Office Use Only)	J.S. HÖUSE OF RE (Office Use Only)	ç.							
PM 4: 21	2012 MAY IL PH L: 21	%		Daytime Telephone:	Daytime 1			Kristin Ann Cabral	Name: Kr
HAND DECIVERED	AND D		₹ B and new employees	FORM B For use by candidates and	Fo	ATIVES	REPRESENTAT ATEMENT - April 30, 2012	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2012 - April 30, 2012	FINANCIAL Period cover

SCUEDULE I—EARNED INCOME (INCLUDING HONORARIA)

Name Kristin Ann Cabral 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.	stirement programs, and benefits	received under the Social S	Security Act.
Cinclude detect receipt for beneverie	Tune	Amount	unt
Source (include date of lecelph of Horioralia)	1 4 100	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
- 1	Director's Fee	\$400	\$3,200
Examples: XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
Brevan Howard, Inc.	Spouse Salary	\$91,667	\$275,000
Brevan Howard, Inc.	Spouse Salary	\$771,090	\$1,629,337
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							DC, Examples:	\dashv	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 \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income derived from, a lederal refirement 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 (OC) or is jointly held with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	provide a complete address.	provide unity the name or the institution recently and account and its value at the end of the reporting period. For rental or other real property held for investment,	BLOCK A Asset and/or Income Source Asset and/or Income Source Asset and/or Income Source income with a tair market value exceeding \$1,000 at of income with a tair market value exceeding \$1,000 at of income with a tair market value exceeding \$1,000 at of the end of the reporting period, and (b) any other 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 licker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you plans) that are self-directed (i.e. plans in which you plans) that are self-directed the your each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, the account that exceeds the reporting thresholds.
Fidelity Avd New Insights	Fidelity	Fidelity Adv Strat Income	Fidelity Adv Emerging Funds	Fidelity Adv Intm Bond	Fidelity Adv Small Cap		ampl		owner not p not	80	tand o	BLOCK A Asset and/or Income Source tity (a) each asset held for investment or production with a fair market value exceeding \$1.00 and of the reporting period, and (b) any or table asset or sources of income which generated asset or sources of income during the year table asset or sources of income during the year table asset or sources of income during the year table asset or sources of income during the year table asset or "unearned" income during the year table asset of the repireted (i.e., plans in which the power, even if not exercised, to select the investments), provide the value for each asset the account that exceeds the reporting thresh eaccount that exceeds the reporting thresh eaccount was accounts which are not self-dire
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y A	y /	y A	Y	A	A		(n	SP Mega Corp. Stock	publicly traded, state the name of the business publicly traded, state the name of the businatura of its activities, and its geographic Block A. Block A. The personal residence, including second vacation homes (unless there was rental or less in personal checking or savings and any financial interest in, or incomes and any financial interest in, or incomes median retirement program, including savings Plan. Choose, you may indicate that an asset or choose.	te ac	er a	nd/ asset tair r repo or so or or so or so or or so or or so or or so or or o
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X	<u> ×</u>	×	+	×	-	U	ē	×	\$50,001 - \$100,000		£ ∃	Value of Asset 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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Continuation Sheet (if needed) SCHEDULE II -- ASSETS AND "UNEARNED" INCOME SP SP SP SP Ţ 8 ŞP, DC Virg. College Savings Plan DC Virg. College Savings Plan Ę Wells Fargo acct & money m Spartan Int'l Index Adv Spartan 500 Index Spartan Ext Mkt IDX Adv Wells Fargo account - IRA Fidelity Adv Mid Cap II Franklin Templeton Founding Franklin Templeton Founding Franklin Templeton Growth Franklin Templeton Foreign Franklin Templeton Corefolio Wells Fargo account - IRA Asset and/or income Source BLOCK A None 8 1 - 1,000× X × × × × \$1,001 - \$15,000 O × × × × × \$15,001 - \$50,000 O Value of Asset \$50,001 - \$100,000 ш BLOCK B \$100,001 - \$250,000 × G \$250,001 - \$500,000 I \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 ſ \$5,000,001 - \$25,000,000 ㅈ \$25,000,001 - \$50,000,000 Over \$50,000,000 × NONE × X $\overline{\times}$ DIVIDENDS RENT Type of Income × INTEREST × BLOCK C **CAPITAL GAINS EXCEPTED/BLIND TRUST** Other Type of Income (Specify: e.g., Partnership Income or Farm Income) Name × × × X × × × None \$1 - \$200 Kristin Ann Cabral \$201 - \$1,000 ≡ × **Current Year** \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 ¥ VIII \$50,001 - \$100,000 Amount of Income \$100,001 - \$1,000,000 × \$1,000,001 - \$5,000,000 × BLOCK D Over \$5,000,000 × × X × X None × × × \$1 - \$200 = × \$201 - \$1,000 ≡ Preceding Year **Z** \$1,001 - \$2,500 \$2,501 - \$5,000 NI VII VIII \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 ⋝ \$100,001 - \$1,000,000 <u>o</u> \$1,000,001 - \$5,000,000 6 Over \$5,000,000

SCHEDULE III — LIABILITIES

Name Kristin Ann Cabral Page 5_ of 6

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-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 reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furniling 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.

SP,	JT DC,	Exa	A		
	Creditor	Example: First Bank of Wilmington, DE	American Express		
Date	incurred mo/year	May 1998	Dec. 2011		
	Type of Liability	Mortgage on 123 Main Street, Dover, DE	Revolving charge account		
A	\$10,001— \$15,000		×		
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SCHEDULE IV - POSITIONS

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

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

and positions solely or an iteriorary materior	TICKMI C
Position	Name of Organization
Dranesville Trustee	Fairfax County Public Library Board of Trustees
Co-Founder	Protect Virginia's Vote

SCHEDULE V — AGREEMENTS

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me Kristin Ann Cabral	
Page 6 of 6	
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Identify the date, parties to, and general terms of any agreement or arrangement 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.

City broad manager by a control or specific	
Date Parties To	Terms of Agreement
	- Application of the state of t

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