Yes No K		disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?  Exemptions— Have you excluded from this report any other assets, "unearmed" income, transactions, or liabilities of a spouse or dep
STIONS	MATION ANSWER EACH OF THESE QUESTIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWE
	schedule attached for each "Yes" response	If yes, complete and attach Schedule V.
d and the appropriate	Each question in this part must be answered and the appropriate	Did you, your spouse, or a dependent child have any reportable liability  (more than \$10,000) during the reporting period?  Yes 📝 No 🗔
	If yes, complete and attach Schedule IX.	If yes, complete and attach Schedule IV.
Yes No 🗸	Did you have any reportable agreement or arrangement with an outside IX. entity?	Did your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting Yes No Predict?
<b>S</b>		If yes, complete and attach Schedule III.
	≦	
than \$335 Yes 🗸 No 🗌	Uid you, your spouse, or a dependent child receive any reportable travel or VII. relimbursements for travel in the reporting period (worth more than \$338 from one source)?  If yes, complete and attach Schedule VII.	you for a speech, appearance, or article in the reporting period?  Yes No V  If yee, complete and attach Schedule II.
	If yes, complete and attach Schedule VI.	If yes, complete and attach Schedule I.
ble gift in otherwise Yes No V	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)?	Did you or your spouse have "semed" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?
	QUESTIONS	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS
late.		Type (🗹)Annual (May 15) 🗆 Amendment 🗀 Termination
more than 30 days	Termination Date:	Report
A \$200 penalty shall be assessed against anyone who files	Officer Or Employing Office: Employee	Filer House of Representatives  State: AZ  State: AZ  District: 4
LAND THE PARTY OF THE PROPERTY	(Daytime Telephone)	(Full Name)
2011 MAY -2 PM 3: 54	202-225-4065	Edward L. Pastor
1 'EGISI ATIVE RESOURCE CENTIR		CALENDAK TEAK 2010 FINANCIAL DISCLOSUKE STATEMENT
Page 1517/AIND DELIVERY EXILED	FORM A Page 1517/1	UNITED STATES HOUSE OF REPRESENTATIVES

## **SCHEDULE I - EARNED INCOME**

Name Edward L. Pastor Page 2 of 7

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 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.

1.000		
Source	Туре	Amount
US House of Representatives	Salary	\$171,922
AZ Elected Officials Retirement System	Pension	\$26,398
AZ State Retirement System	Spouse Pension	\$35,600
Social Security Administration	Pension	\$26,962
Social Security Administration	Spouse Pension	\$20,604

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SP SP vacation homes (unless there was rental income during the reporting Exclude: Your personal residence, including second homes and activities, and its geographic location in Block A. publically traded, state the name of the business, the nature of its For an ownership interest in a privately-held business that is not For rental or other real property held for investment, provide a complete of the institution holding the account and its value at the end of the asset held in the account that exceeds the reporting thresholds. For exercised, to select the specific investments), provide the value for each self-directed (i.e., plans in which you have the power, even if not For all IRAs and other retirement plans (such as 401(k) plans) that are generated more than \$200 in "unearned" income during the year. a fair market value exceeding \$1,000 at the end of the reporting period, address. reporting period. retirement accounts which are not self-directed, provide only the name symbols.) Provide complete names of stocks and mutual funds (do not use ticker and (b) any other reportable asset or sources of income which Identify (a) each asset held for investment or production of income with Asset and/or Income Source Aviva Life & Annuity Co Union CD (cash only) Desert Schools Federal Credit Union Union Savings Account (cash Congressional Federal Credit Des Moines, IA Aviva Life & Annuity Co Desert Schools Federal Credit (cash value) RA (cash only **BLOCK A** (cash value) \$15,000 \$1,001 -\$50,000 \$15,001 -\$100,000 \$50,000 \$15,001 -\$50,001 -\$50,001 asset was sold and is other than fair market None." the value should be it is generated income the method used. If an value, please specify valuation method at close of reporting year. If you use a Value of Asset ncluded only because 100,000 Year-End **BLOCK B** Name Edward L. Pastor DIVIDENDS DIVIDENDS Check all columns that NTEREST NTEREST NTEREST during the reporting generated no income Check "None" if the asset be disclosed as income. even if reinvested, must interest, and capital gains columa. Dividends, check the "None" plans or IRAs), you may generate tax-deferred apply. For retirement income (such as 401(k) nvestments or that ou to choose specific accounts that do not allow Type of Income BLOCKC \$1,001 - \$2,500 \$1,001 - \$2,500 \$1,001 - \$2,500 \$201 - \$1,000 \$201 - \$1,000 of income by checking the generate tax-deferred income earned or generated. "None" if no income was disclosed as income. Check reinvested, must be capital gains, even il Dividends, interest, and appropriate box below. specific investments or that do not allow you to choose assets, indicate the category "None" column. For all other IRAs), you may check the For retirement accounts that such as 401(k) plans or Amount of Income BLOCK D reporting year. \$1,000 tn exceeding exchanges (E) (P), sales (S), or Transaction had purchases Indicate if asset BLOCK E Page 3 of 7

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME		District		Dana A of 7
1	•	Name Edward L. Pastor	L. Pastor		Page 4 or /
- SP	Desert Schools Federal Credit Union Savings Account (cash	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	
	Marisol Federal Credit Union Savings Acct (cash only)	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
SP	Met Life Annuity (not self directed)	\$50,001 - \$100,000	INTEREST	\$2,501 - \$5,000	
	Met Life Annuity (not self directed)	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
Sp	Nationwide Retirement Services (457 Plan not self directed)	\$15,001 - \$50,000	N/A	N/A	
	Residential Lot, Guadalupe, AZ	\$1,001 - \$15,000	N/A	N/A	
	Thrift Savings Plan, Washington DC	\$500,001 - \$1,000,000	N/A	N/A	

#### **SCHEDULE V - LIABILITIES**

Name Edward L. Pastor

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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 all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; 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.

\$15,001 - \$50,000	Mortgage on 649 C St #304, Washington DC	Mar 1995	Wells Fargo Bank, Des Moines, IA	JT
\$15,001 - \$50,000	Mortgage on 1015 W Campbell Ave., Phoenix, AZ	Dec 1997	Washington Mutual Bank, Milwaukee WI	JΤ
Amount of Liability	Type of Liability	Date Liability Incurred	Creditor	SP, DC, JT

# SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Edward L. Pastor

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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 (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 you. amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you,

None	<b>Y</b>	~	<b>Y</b>	Aug 16-21 Phx-Vancouver BC Canada- Phx	Aug 16-21	The Aspen Institute
Days not at sponsor's expense	Was a Family 7 Food? Member Included? (Y/N) (Y/N)	Food? (Y/N)	Lodging? (Y/N)	Point of Departure DestinationPoint of Return	Date(s)	Source

### **SCHEDULE VIII - POSITIONS**

Name Edward L. Pastor

Page 7 of 7

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

Position	Name of Organization
Member	Congressional Hispanic Caucus Washington, DC
Member	Congressional Hispanic Caucus Institute Washington, DC