·							
₹  X	hild Yes	≱pendent ch	ities of a spouse or dependent child committee on Ethics.	"unearned" income, transactions, or liabilitiunless you have first consulted with the Co	arned" income ss you have fir	er assets, "une: wer "yes" unles	<b>EXEMPTION</b> —Have you excluded from this report any other assets, because they meet all three tests for exemption? Do not answer "yes"
<b>8</b> ⊠	Yes	ot be	ccepted trusts" need no	s and certain other "exc spouse, or a dependen	nittee on Ethic ting you, your	d by the Comm a trust benefit	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?
<b>ω</b>	SE QUESTIONS	)F THES	SWER EACH OF THESE	- AN	TINFOR	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	es" response.	each "Ye	lule attached for each "Yes"	schec	and the a	e answered	Each question in this part must be answered and the appropriate
<b>₹</b>	Yes	\$5,000 from	pensation of more than to prior years? tach Schedule VI.	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.	N <sub>o</sub>	Yes 🔀	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.
<b>₽</b>	Yes	rangement	portable agreement or arrangement ttach Schedule V.	V. Did you have any reportable agreemen with an outside entity? If yes, complete and attach Schedule V.	<b>8</b> □	Yes	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.
<b>8</b> ⊠,	Yes 🔲	эеfore the da эг <u>two</u> years?	portable positions on or before the date allendar year or in the prior two years?	IV. Did you hold any report of filing in the current call if yes, complete and att	<b>№</b>	Yes X	<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?</li> <li>If yes, complete and attach Schedule I.</li> </ol>
				ANSWER EACH OF THESE QUESTIONS	OF THES	ER EACH	PRELIMINARY INFORMATION — ANSWE
		more th				Office:	employee Employing Office:
assessed who files	<i>ity</i> shall be	A <i>\$200 pena</i> against any	Check if Amendment	" 8/28/12	Date of Election:	n'izona	Filer Candidate for the State: Art House of Representatives District: ——
5	S. HOUSE OF REPRESENTATIVES (Office Use Only)	S. HOUSE O					
<u> </u>	DOIZ SEP 12 PM 1: 32	DOIZ SEP	g-uner	Daytime Telephone:	Daytime	<b>1</b> .	Name: Mark Stophen Koskiniemi
	SEP 0 4 2012	'SEP	I B and new employees	FORM For use by candidates a	-	28,2012	FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 20// - August 2
Page 1 of 7	<b>.</b>					TIVES	HINTED STATES HOUSE OF BEDRESENTATIVES

## SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Mark Stephen Koskiniemi

Page Z 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) 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 (include date of receipt for honoraria)	TVD	Amount	unt
Course (include date of receipt for nonotatia)	- y po	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
	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
Pima County, Tueson, AZ	Salary	26,655	54,751
A Step Above Senior Services, Tucson, AZ	Sporse Wages	NA	NA
		3 S	
	22.		

Awelli	ベミコ	· Vanguard Target Rettrement 2085 Find	Vanguard IRA	JT Westpac (Australia) Accounts Wassa Wassa Australia	IT Bank of America Accounts	JT 1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP, SP Mega Corp. Stock	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 \$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 Schedule III requirements, please refer 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 IRAs and other reitirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the
X	Χ	*		*	×	×	Indefinite	×	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."
×	<b>X</b>	<b>×</b>		<b>×</b>	<b>×</b>	×	Royalties	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST  Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	Type of Income  Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
	×	X					×	X	None	Amount of Income  For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred 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.

### SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Name Mark Stephen Koskiniemi

Continuation Sheet (if needed)

8 SP, Ë Bulab Holdings ESOF, Memo National Financial Supils Prodential Methifo Universal life Asset and/or Income Source armers Insurance Prime Fund Capital First Eagle Cloba Class C FORD MOTOR W. Stock INTEL 3M Company Stock DISH Network Stock and Envity Series 6 Portalio Series 10 BLOCK A Stock Dividen 3 8 None \$1 - \$1,000 $\boldsymbol{\omega}$ \$1,001 - \$15,000 O O \$15,001 - \$50,000 Value of Asset Ш \$50,001 - \$100,000 **BLOCK B** শ \$100,001 - \$250,000 G \$250,001 - \$500,000 \$500,001 - \$1,000,000 Ι \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 ᄌ \$25,000,001 - \$50,000,000 Over \$50,000,000 NONE DIVIDENDS RENT Type of Income INTEREST BLOCK C **CAPITAL GAINS** EXCEPTED/BLIND TRUST 2/4 Other Type of Income (Specify: e.g., Partnership Income or Farm Income) None \$1 - \$200 \$201 - \$1,000 **Current Year** \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 -- \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 Amount of Income \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 BLOCK D Over \$5,000,000 None \$1 - \$200 \$201 - \$1,000 Preceding Year \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 -- \$50,000 \$50,001 - \$100,000 × \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000

This page may be copied if more space is required

#### SCHEDULE III — LIABILITIES

Name Mark Stophen Koskiniemi Page 5 of-

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

SP, DC,	Creditor	Date Liability Incurred mo/year	Type of Liability	\$10,001— > \$15,000 - >	\$50,000 \$50,001— \$160,900	\$100.001	\$250,001— m	\$500,000 · · · =	\$500,000 TI	\$500,001—	\$500,000 T \$ 1,000,000 T \$ \$5,000,000 T \$ \$25,000,000 T
	Example:   First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE				×		i		
TT	American Express	12/2011	Credit Card	<b>&gt;</b>	$\overline{}$						
	American Express Optima	1102/211	Credit Card	**************************************							
	Citibank	1105/21	12/2011 Credit Card	<b>\</b>							
	Chase	12/2011	12/2011 Credit Card	<b>X</b>	<b>' `</b>	9- -, , , ,		100			
SP	SP Bank of America	11/2011	12/2011 Credit Card		. /						

#### SCHEDULE IV — POSITIONS

cer, 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. 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 offi-

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);

#### SCHEDULE III — LIABILITIES

Name Mark Stephen Koskiniemi

Page 6 of 1

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. 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

	Creditor  Creditor  Creditor  Incurred mo/year  Example:   First Bank of Wilmington, DE   May 1998   Mortgage on 123 Main Street, Dover, DE   12/2011   Credit Card   Cred	Date Liability Incurred mo/year  May 1998  Mortgage on 123 Main Street, Dover, DE  12/20// Credit Card	Date   Liability   Type of Liability     A   B   C	SP, DC, JT	Example: First	SP Sears				
	Type of Liability  Mortgage on 123 Main Street, Dover, DE  Credit Card	Type of Liability  Type of Liability  Mortgage on 123 Main Street, Dover, DE  \$15,000  \$15,000  \$15,001	Type of Liability  A B C  Mortgage on 123 Main Street, Dover, DE  \$10,000   \$15,000   \$150,000   \$100,000   \$1	Date Liability Incurred mo/year	May 1998	1105/211				
Date Liability Incurred mo/year  May 1998  / 2/20//	\$10,001— \$15,000 >	\$15,000	\$15,000 w \$15,001— w \$50,000 c	Type of Liability						
Type of Liability  Mortgage on 123 Main Street, Dover,  Credit Card		\$15,001— <b>w</b>	\$50,000 W \$50,001— O \$100,000 O	10,001— <b>&gt;</b>	, a					
Type of Liability  Nortgage on 123 Main Street, Dover, DE  \$10,001   \$15,001   \$15,001   \$15,000   \$15,000   \$100,000   \$	\$100,000	\$250,000 m s		500,001— T E				5.1		
Type of Liability  A B  Credit Card  Sto,000  \$10,001  \$10,001  \$10,000  \$100,000  \$100,000  \$100,000  \$100,000  \$100,000  \$100,000	\$100,000	\$250,000 D S S S S S S S S S S S S S S S S S	\$500,001— T E	1,000,001— G 5,000,000			1000			
Nortgage on 123 Main Street, Dover, DE   S10,001   S15,000   X   S50,000   X   S50,000   X   S50,000   X   S50,000   X   S50,000   S500,000   S500,000   S1,000,000   S1,000	\$190,000	\$250,000 m \$500,000 m \$500,000 m \$1,000,000 m	\$500,001— T Lab \$1,000,0001— G S5,000,000	5,000,001— <b>エ</b>	7					
Type of Liability   Amount of Liability	\$100,000 T S500,000 T S5,000,000 T S5,000,000 T S25,000,000 T S25,000 T S2	\$250,000 m store of the store o	\$5,000,001— <b>x</b> \$25,000,000	W 14 W 12 13	1.4	- , 2		\$4.	1 11	
Type of Liability   Amount of Liability   Amount of Liability   Amount of Liability   S10,001—	\$100,000  × \$100,001— □ \$250,000 m \$250,000 m \$500,001— □ \$1,000,000 □ \$1,000,001— □ \$5,000,001— □ \$25,000,001— □ \$25,000,001— □ \$25,000,001— □ \$25,000,001— □	\$250,000 m st out of the state	\$5,000,001— <b>x</b> \$25,000,001— <b>x</b> \$25,000,001— \$50,000,000	25,000,001— 50,000,000			(, r)			<del></del>

#### SCHEDULE IV — POSITIONS

prise, 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 of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enter-

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

_				г
			Position	allu pusitionis solety of all fioriorally fiature.
			Name of Organization	atul G.

#### SCHEDULE V — AGREEMENTS

Name Mark Stophen Koskiniemi Page-

of \_

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.

Date	Parties To	Terms of Agreement
21/8/9	Myself & Pima County	Leave of absence taken under Finna County Personnel Policy 8-108D. Candidacy for Elective
		Office. Leave taken to campaign.
		•

# SCHEDULE VI — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

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. 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

Example: Doe Jon							
ies & Smith, Hometown, Homi							
estate							
Accounti		,					
ing services							
		,					
		-					
	Doe Jones & Smith, Hometown, Homestate Accounting services	Doe Jones & Smith, Hometown, Homestate Accounting services	Doe Jones & Smith, Hometown, Homestate Accounting services	Doe Jones & Smith, Hometown, Homestate Accounting services	Doe Jones & Smith, Hometown, Homestate Accounting services	Doe Jones & Smith, Hometown, Homestate  Accounting services	Doe Jones & Smith, Hometown, Homestate