Yes	child because	sactions, or liabilities of a spouse or dependent child because with the Committee on Ethics.	y" income, trans	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee or
Yes	closed. Have you	d certain other "excepted trusts" need not be discild?	e on Ethics and dependent chil	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and continued from this report details of such a trust benefiting you, your spouse, or dependent child?
NOITSBU	F THESE G	— A	T INFORI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
swered and "Yes" resp	must be ansed for each	Each question in this part rappropriate schedule attache	No	V. 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 V. Yes
Yes	arrangement with	IX. Did you have any reportable agreement or a an outside entity? If yes, complete and attach Schedule IX.	No	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.
Yes	or before the date	VIII. Did you hold any reportable positions on o of filing in the current calendar year? If yes, complete and attach Schedule VIII.	8	III. 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 III.
Yes	receive any the reporting	VII. Did you, your spouse, or a dependent child reportable travel or reimbursements for travel in period (worth more than \$350 from one source if yes, complete and attach Schedule VII.	× ×	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.
Yes	receive any regating more	VI. Did you, your spouse, or a dependent child reportable gift in the reporting period (i.e., aggr than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VI.	S D	I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes Yes
		E QUESTIONS	OF THES	PRELIMINARY INFORMATION — ANSWER EACH
ne who files	against anyo 30 days late.	Termination Date:		Annual (May 15, 2012)
alty shall be	A \$200 pena	or Employing Office:	Officer o	Status Member of the U.S. State: C.A. House of Representatives District:
Mice Psk Only)	M			
Y 15 PH 2:	,) / 2012 MA	Telephone: 202-225-1880	Daytime 1	Name: John Garamendi
IVE RESOURCE (LEGISLATI			
TAND IVERED		Form A For use by Members, officers, and employees	MENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT
	Yes No No Supersonse. Page 1 of 12 Page 1	VERESOURC Y 15 PM Wes Wes Yes Yes Yes Yes Yes Yes Y	Form A Members, officers, and employees Ving Office: Termination Termination Date: Termi	Form A Members, officers, and employees Ving Office: Termination T

Name John Garamendi Page 2

of 12

SCHEDULE I—EARNED INCOME

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 Beserve have) federal retirement programs, and benefits received.

Source Type Am	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
Examples: State of Maryland	Legislative Pension	\$9,000
Ontario County Board of Education	Spouse Salary	NA NA
California Exposition & State Fair	Spouse Salary	NA
California Public Employees Retirement System	Spouse Pension	// <i>H</i>
California Public Employees Retirement System	Pension	8800
Colifornia Legislators Retirement System	pension	80000
		-

	Name	
	Joh	_
	n (7.	`
	arai	•
	men	
	K:	
1	P	

'age 3 of 12

SCHEDULE II — PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. A green enverlope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
shington, DC	Speech Article	Feb. 2, 2011 Aug. 13, 2011	\$2,000 \$500
			,
			,
		3	
	,		
			-

BLOCK B

Asset and/or Income Source

more than \$200 in "unearned" income during the year. reportable asset or sources of income which generated the end of the reporting period, and (b) any other Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at

Provide complete names of stocks and mutual funds (do

not use ticker symbols.)

account that exceeds the reporting thresholds. For retireinvestments), provide the value for each asset held in the For all IRAs and other retirement 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 the name of the institution holding the account and its ment accounts which are not self-directed, provide only

For rental or other real property held for investment, pro-vide a complete address.

value at the end of the reporting period.

ness, the nature of its activities, and its geographic locathat is not publicly traded, state the name of the busi-For an ownership interest in a privately-held business

Savings Plan. from, a federal retirement program, including the Thrift ing \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived income during the reporting period); any deposits totalhomes and vacation homes (unless there was rental Exclude: Your personal residence, including second

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.

Mega Corp. Stock Simon & Schuster

Examples:

JT Cabin, Big Meadows Tract

house E. Capital & 10th Washin

7344 GWINST. Valley SMIN

1st Bank of Paducah, KY Accounts

Ranch Goodell Rd, Valley

Cal Legislators Betirene

For additional assets and unearned income, use next page

CALPERS

Value of Asset

please specify the method used. method other than fair market value, reporting year. If you use a valuation Indicate value of asset at close of

generated income, the value should be year and is included only because it If an asset was sold during the reporting "None."

disclosed as income. Check "None" if the asset generated no income dur-

ing the reporting period.

Type of Income

gains, even if reinvested, must be Dividends, interest, and capital that generate tax-deferred income Check all columns that apply. For may check the "Tax-Deferred" column you to choose specific investments <u>or</u> retirement accounts that do not allow (such as 401(k) plans or IRAs), you

BLOCK C

Amount of Income BLOCK D

earned or generated the appropriate box below. Dividends, cate the category of income by checking Deferred" in Block C, you may check the For assets for which you checked "Taxincome. Check "None" if no income was reinvested, must be disclosed as interest, and capital gains, even if "None" column. For all other assets, indi-

year \$1,000 in or exchanges (P), sales (S) purchases asset had Fransaction reporting (E) exceeding Indicate if the BLOCK E

		\sim	<u> </u>				_			
1		2	3.	ή	*				None	A
		5 6	7	2	CA		ਤ		\$1 - \$1,000	В
		2	~	be			Indefinite		\$1,001 - \$15,000	С
			2				6		\$15,001 - \$50,000	D
		F	•					×	\$50,001 - \$100,000	ĺπ.
		<u>ک</u> ر				X			\$100,001 - \$250,000	יד
					1				\$250,001 - \$500,000	9
				۲					\$500,001 - \$1,000,000	I
			~						\$1,000,001 ~ \$5,000,000	
			_			L	<u> </u>		\$5,000,001 - \$25,000,000	٢.
							L		\$25,000,001 - \$50,000,000	~
									Over \$50,000,000	г
									NONE	
							-	×	DIVIDENDS	
				~	V	×			RENT	
									INTEREST	
							Γ_	×	CAPITAL GAINS	
									EXCEPTED/BLIND TRUST	
									TAX-DEFERRED	
pension	pension	•	cattle				Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	
									None	-
									\$1 - \$200	=
									\$201 – \$1,000	
								×	\$1,001 - \$2,500	7
									\$2,501 – \$5,000	\
	_			7		×			\$5,001 – \$15,000	N
			~		<				\$15,001 – \$50,000	≦
1							_		\$50,001 – \$100,000	¥
							×		\$100,001 - \$1,000,000	×
					<u> </u>				\$1,000,001 ~ \$5,000,000	×
									Over \$5,000,000	×
ļ			<u></u>				***	S (partial)	sold, please indicate as follows: (S) (partial) See below for example. P, S, E	If only a portion of an asset is

This page may be copied if more space is required.

Continuation Sheet (if needed)		NWO Faller	ONN CINYAMENEY Page	ge or
BLOCK A Asset and/or income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
γ	000 -	UST		ŷŢ
JT DC,	\$15,000 -\$50,000 -\$100,000 (-\$250,000 1-\$500,000 1-\$1,000,000 01-\$5,000,000 01-\$25,000,000 001-\$50,000,000	ST GAINS ED/BLIND TRU ERRED pe of Income e.g., hip Income or	\$2,500 \$5,000 \$15,000 - \$50,000 - \$100,000 - \$1,000,000 01 - \$5,000,000	
	\$15,001 \$50,001 \$100,00 \$250,00 \$500,00 \$1,000,0 \$5,000,0	NONE DIVIDER RENT INTERE CAPITAL EXCEP TAX-DE Other Ty (Specify	\$50,001 \$100,001	υνοι φο _ι
American Funds 401k				
FNDMNTZ INVA	<	X		
Hew Economy A	~	7		
Small Cap World A				
Health Fusion Comm sto	7	_		
Inc Commisto	X-	V V		PS
SP CalPERS - Pension		pension		
57 OutReach Media Solution	lan V	1/		
SP Grupe Squaw Valley Le	REstate			
59 5-250/ interest/ shave	~	Tartness y		:
CO TENTA				
inherited funtself d	inacted v	Hone		
K K	rects V	Y	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	}
	<	T	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
an Nutimal Life Iusura	rice Trom	X		
				į

John Gayamendi Rage Lotiz

FROM: John Garamendi CA 10

TO: Committee on Ethics May 7, 2012

RE: Financial Disclosure Report

After managing the family ranch for 20 years my mother, Mary Jane Garamendi, at the age of 90 found it too difficult to continue with the responsibilities and relinquished her control of the Garamendi Family Trusts. The trusts comprise the Garamendi McSorley Ranch located south of Mokelumne Hill California along State Highway 49 and 26, four rental houses located on the ranch, barns, and miscellaneous farm equipment. My sister and I were asked to assume the trusteeship. I assumed this task in February of 2011. All income from the ranch is for the benefit of Mary Jane McSorley, and all assets are within the trust and for her benefit and remainder beneficiaries.

Schedule III explanations.

Garamendi Family Trusts assets and income are displayed

SP owns a 5.25 % interest in the Grupe Squaw Valley LLC owner of a shopping center located on March Lane and I- 5 in Stockton, CA. The income is partnership income.

Spouse has a 1/3 beneficial interest in the JE Wilkinson Trust which is an inherited and not self- directed trust.

John Garamendi CA 10

This page may be copied if more space is required.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed)

Name John Garamend; Page 7 of 12

																					SP, DC, JT	
															cell Tower-Timobile	11	Industral lease	Grossland Reserve Program	Grazina lease	Garamendi Family Tra		BLOCK A Asset and/or Income Source
\vdash	+					 	<u>. </u>	├ ─		ļ	_			<u>_</u>			-	<u>ξ</u>	_	15	None >	
H	+			┢	├	├			┝	-		_	ļ <u>.</u>	<u> </u>	<u> </u>	-	-	$\overline{\Delta}$			\$1 - \$1,000 ED	
\vdash	+	 _			-	 	<u> </u>	⊢			 	<u> </u>	ļ <u>.</u>	<u> </u>	<u> </u>	 	<u> </u>	¥ Q\$ <i>V</i>	<u> </u>	ļ	\$1,001 - \$15,000 O	
ŀ	+	 			 	ļ	<u> </u>	ļ		├			ļ		<u> </u>	ļ	_	<u>'</u>	<u> </u>	_	\$15,001 - \$50,000	٧a
ŀ	+	 			├	ļ			_		<u> </u>		<u> </u>	ļ			<u> </u>				\$50,001 - \$100,000 m	BLOCK B Year-End Value of Asset
F	+	 		ļ		 	ļ	-	ļ		_	ļ	<u> </u>	<u> </u>		_	<u> </u>				\$100,001 – \$250,000 TI	BLOCK B Year-End ue of As
ŀ	-	 				 	ļ	-		ļ	_	ļ		ļ		<u> </u>	ļ		ļ		\$250,001 – \$500,000 ଦ	
\mathbf{F}	+	 			-	ļ	<u> </u>	ļ	<u> </u>	<u> </u>	ļ			<u> </u>	ļ	<u> </u>	<u> </u>		<u> </u>	ļ	\$500,001 - \$1,000,000 =	SS G
H	4	 	<u> </u>		_	<u> </u>	ļ	<u> </u>	_	·	ļ		ļ		<u> </u>		<u> </u>		_	7	\$1,000,001 - \$5,000,000 -	et
ŀ	4	 		ļ	<u> </u>	ļ		<u> </u>		<u> </u>			<u>L</u>	L							\$5,000,001 - \$25,000,000 °-	
L	4		<u> </u>	<u> </u>	<u> </u>	<u> </u>	ļ	<u> </u>	ļ	<u> </u>						<u> </u>		<u> </u>	<u> </u>		\$25,000,001 - \$50,000,000 ス	
L	_																				Over \$50,000,000	
L	\perp					<u> </u>				L.											NONE	
L	╛																				DIVIDENDS	
																			マ	1	RENT	
L																			<u> </u>		INTEREST	0
																	1		-		CAPITAL GAINS	BLOCK C Type of Incom
	Т																		\vdash		EXCEPTED/BLIND TRUST	BLOCK C Type f Incom
Γ	T															1			-		TAX-DEFERRED .	∄ 6
																					Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	T
L	4	 		ļ																	None —	
L	\downarrow	 	<u> </u>	<u> </u>			1_	$oxed{oxed}$	<u></u>	<u> </u>											\$1 - \$200 =	An
L	\perp																				\$201 – \$1,000 =	ō
L	┙																				\$1,001 - \$2,500 <	n P
L																					\$2,501 - \$5,000 <	BLOCK Int of I
															<						\$5,001 - \$15,000 ≤	
	T			<u> </u>			Ţ.,									र	<	₹	₹	П	\$15,001 - \$50,000 <u>≤</u>	BLOCK D Amount of Income
	\top							1							<u> </u>	\Box		<u> </u>	\vdash	1	\$15,001 - \$50,000 <u>\$</u> \$50,001 - \$100,000 <u>\$</u>	Ž
	1					Г		1	<u> </u>								†		 	\Box	\$100,001 - \$1,000,000	W
	7				<u> </u>							\vdash				ļ · · · ·	<u> </u>		\vdash		\$1,000,001 - \$5,000,000 ×	
	\dagger					\vdash			\vdash							\vdash	 		\vdash		Over \$5,000,000 ×	
r	1														_		_				2.3. 40,000,000	
																		,			ர வு ள	BLOCK E Transaction

SCHEDULE IV— TRANSACTIONS

Report any purchase, safe, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real prop- of Transaction Type Date **Amount of Transaction**

سست				71										 ·	 ····	 		
or depend	resulted in action. Ex	dren, or the ates renta cate (i.e.,	Capital Gu of \$200, ct III.	SP, DC, JT	SP:	SP	SP		-		·							
ent child during the reporting	a capital loss. Provide a brillude transactions between	e purchase or sale of your income. If only a portion "partial sale"). See examp	Nns — if a sales transaction sck the "capital gains" box		Example: Mega Corpo	Solazyme	Outreach Me											
or dependent child during the reporting period of any security of real prop-	resulted in a capital loss. Provide a brief description of any exchange trans- action. Exclude transactions between you, your spouse or dependent chil-	dren, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	Asset	mm	Solazyme Common Stick	Outreach Media Solutions-long											
of Tr		CHASE	PUR			7	7											
ansa		Ξ	SALE		×	7							,					
of fransaction		HANGE	EXCI															
ı	Capital ed \$200	Box if C Exceeded	Check Gain E			۲												
Date	(MO/DAY/YR)	Ouarterly, Monthly, or	BI-weekiy, if applicable		10-12-11	8-5-11 5	1-1-11 7								, , , , , , , , , , , , , , , , , , , ,			
	A		\$1,001 \$15,00															
	00	1- 0	\$15,00 \$50,00	:	×		1											
	ဂ	1- 00	\$50,00 \$100,0															
לוויסטוור אוויסטוור	Ū	01- 000	\$100,0 \$250,0			7												
2	П		\$250,0 \$500,0													-		
וומווסמטנוטוו	IJ	01- 0,000	\$500,0 \$1,000															4
3000	۵	,001- ,000	\$1,000 \$5,000															
[I	00,000	\$5,000 \$25,00		L													
	_		\$25,00 \$50,00	-	ļ	1	<u> </u>	-	ļ	<u> </u>			<u> </u>		<u> </u>		<u> </u>	
Ι.			Over	ш.	₩	Ь	1		1			_L	┙~	 	 Щ	 1	L	

1 2

SCHEDULE V— LIABILITIES

Name John GARMANAL

Page 9 of 12

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 it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a mortgages on personal residences. charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. NOTE: Pending legislation may require Members to report business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving

		Date				_	Amount of Liability	t of Li	ability			L
)		Liability		٧	8	0	9 E	- T	۵	Ħ	-	ر
7 D X	Creditor	Incurred Mo/Year	Type of Liability	\$10,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000 \$100,001-	\$250,000 \$250,001-	\$500,000 \$500,001-	\$1,000,000 \$1,000,001- \$5,000,000	\$5,000,001- \$25,000,000	\$25,000,001 \$50,000,000	Over \$50,000,000
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main St., Dover, DE				×	-				
H	James Aberle - Cabin Big Mulles 2001	s Zopl	Mortgage paid of 10-2011	1								
H	Chase Bank	2005	Mortgage & Home Equity	Waln	wto	38	2	_				
T	Amuican Express		revolving credit line	7						-		
H	Bank of America		revolving Credit line		7							
1	US Bank		Mortgage Personal residence	.6	<u></u>	<u> </u>			:			
•				,								

SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of 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 \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

SCHEDULE V- LIABILITIES

Name John Garamendi Page 10 ortz

business in which you own an interest (unless you are personally liable); 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. NOTE: Pending legislation may require Members to report 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 it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a mortgages on personal residences.

							Amou	nt of	Amount of Liability	Ą		
6		Liability		A	8	2	0	וח			0	
J C,	Creditor	Incurred Mo/Year	Type of Liability	\$10,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000 \$100,001-	\$250,000 \$250,001-	\$500,000 \$500,001-	\$1,000,000	\$5,000,000	\$5,000,001- \$25,000,000 \$25,000,001	\$50,000,000 Over
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main St., Dover, DE				×		_	_		\vdash
77	Bank of Stockton	12-2009	12-2009 Mortauge 7344 Gwin st 9525	,~		<u> </u>	1	<u> </u>				
T	Bank of Stockton	5-2011	5-2011 construction loun 95252			<u> </u>		<u> </u>	ļ		<u></u>	
	V											
							 	<u> </u>	<u> </u>			
									<u> </u>			

SCHEDULE VI— GIFTS

Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of 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 \$140 or less need not be added towards the \$350 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375

Name John Garamendi

Page // of /2

SCHEDULE VII— TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$350 received by

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.

Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Number of days not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	z	z	Z	None
Roycroft Corporation	Aug. 6-11	DC—Los Angeles—Cleveland	Y	~	Υ	2 Days
Aspen Institution		DC-SANJOUN - DC	Y	y	X	Моне
Aspen Institution		Sacramento-Baniff-Schouneab /	rento Y	ر ا	V	none
				<u>.</u>		
						5 5 5 5 6 6 7 7 8

SCHEDULE VIII—POSITIONS

Name John CANAMEND.

Page 12 of 12

organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

tions); 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 political parties and campaign organiza-

			Position
		More	Name of Organization

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an 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

Date	Parties To	Terms of Agreement
	Cal PERS	pension
	Cal Legislators Betweent	Pensim
42	CMPERS	DENSION.
,		