



Filing ID #10003596

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • B-106 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Mr. Raul Ruiz
Status: Member
State/District: CA36

FILING INFORMATION

Filing Type: Amendment Report
Filing Year: 2013
Filing Date: 07/15/2014

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Tx. > \$1,000?
Charles Schwab ⇒ Apple Inc. (AAPL)		\$50,001 - \$100,000	None	<input type="checkbox"/>
Charles Schwab ⇒ Automatic Data Processing, Inc. (ADP)		\$15,001 - \$50,000	None	<input type="checkbox"/>
Charles Schwab ⇒ Berkshire Hathaway Inc. New (BRK.B)		\$15,001 - \$50,000	None	<input type="checkbox"/>
Charles Schwab ⇒ Coca-Cola Company (KO)		\$15,001 - \$50,000	None	<input type="checkbox"/>
Charles Schwab ⇒ iShares Silver Trust (SLV)		\$1,001 - \$15,000	None	<input type="checkbox"/>
Charles Schwab ⇒ Microsoft Corporation (MSFT)		\$15,001 - \$50,000	None	<input type="checkbox"/>
Charles Schwab ⇒ Money Market Fund - BDC		\$1,001 - \$15,000	None	<input type="checkbox"/>
Charles Schwab ⇒		\$15,001 - \$50,000	None	<input type="checkbox"/>

Asset	Owner	Value of Asset	Income Type(s)	Income Tx. > \$1,000?
Precision Castparts Corporation (PCP)				
Charles Schwab ⇒ SPDR Gold Trust (GLD)		\$1,001 - \$15,000	None	<input type="checkbox"/>
Charles Schwab ⇒ Visa Inc. (V)		\$50,001 - \$100,000	None	<input type="checkbox"/>
EMP PS/401(K) Plan ⇒ Fidelity Advisor Freedom 2035 Fund - Institutional Class (FITHX)		\$100,001 - \$250,000	None	<input type="checkbox"/>
Personal Bank of America Accounts		\$1,001 - \$15,000	Interest	\$1 - \$200 <input type="checkbox"/>
UC Retirement Savings Plan ⇒ UC Savings Fund (Bond Fund)		\$1,001 - \$15,000	None	<input type="checkbox"/>

* Asset class details available at the bottom of this form.

SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE C: EARNED INCOME

Source	Type	Amount
Emergency Medicine Physicians	Payout of vested "equity" in company	\$13,163.88

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	American Education Services	August 2005	Student Loan	\$100,001 - \$250,000

SCHEDULE E: POSITIONS

Position	Name of Organization
President	Raul Ruiz MD and Associates
Board Member	Dr. Carreon Foundation
Board Member	Volunteers in Medicine

Position	Name of Organization
Director	Coachella Valley Healthcare Initiative
Member of the Advisory Board	Health Career Connections
Senior Advisor / Mentor	Future Physician Leaders

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
December 2012	University of California Riverside School of Medicine	Two year leave of absence without pay for Dr. Raul Ruiz, Senior Associate Dean for Community Partnership & Engagement, and Health Services Clinical Professor. Effective January 1, 2013 - December 31, 2014
June 2012	Emergency Medicine Physicians	Agreed to move from full-time to part-time status w/ per diem hourly wages, no benefits, and only medical liability coverage while working. The agreement also includes a monthly payment of 1,069.99 (26,327.70) to payout a 30% vested equity interest in EMP LLC. That payment began on 4/25/2012, and will end on March 25, 2014.

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

Trip Details				Inclusions		
Source	Start Date	End Date	Itinerary	Lodging?	Food?	Family?
American Israel Education Foundation	08/4/2013	08/12/2013	Palm Springs - Tel Aviv - Palm Springs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

SCHEDULE A AND B ASSET CLASS DETAILS

- o Charles Schwab
- o EMP PS/401(K) Plan
- o UC Retirement Savings Plan

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

IPO: Did you purchase any shares that were allocated as a part of an Initial Public Offering?

☐ Yes ☒ No

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 dependent child?

☐ Yes ☒ No

Exemption: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

☐ Yes ☒ No

COMMENTS

CERTIFICATION AND SIGNATURE

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Mr. Raul Ruiz , 07/15/2014