

JAN 31 2014

**UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT**

FORM B

For use by candidates and new employees

Period covered: January 1, 2013 - Jan 30, 2014

LEGISLATIVE RESOURCE CENTER Page 1 of 6

2014 FEB 12 PM 1:26

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Name: Josanna Lynn Garcia Botelho Daytime Telephone: _____

CE

(Office Use Only)

Filer Status	<input checked="" type="checkbox"/> Candidate for the House of Representatives	State: <u>California</u> District: <u>sixteen</u>	Date of Election: <u>6/3/2014</u>	<input type="checkbox"/> New officer or employee	Employing Office: _____	<input type="checkbox"/> Check if Amendment	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
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In all sections, please type or print clearly in blue or black ink.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

<p>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? If yes, complete and attach Schedule I.</p>	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p>	<p>IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.</p>	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p>
<p>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.</p>	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p>	<p>V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.</p>	<p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/></p>
<p>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.</p>	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p>	<p>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.</p>	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p>

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

<p>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?</p>	<p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/></p>	
<p>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? Do not answer "yes" unless you have first consulted with the Committee on Ethics.</p>	<p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/></p>	

Name Joanna Lynn Garcia Botelho Page 2 of 6

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

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Name Taanna Lynn Garcia Botello Page 3 of 6

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Continuation Sheet (if needed)

Page 7 of 6[illegible]

SCHEDULE III - LIABILITIES

Name Joanna Lynn Garcia Botelho

Page 5 of 6

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 furniture, 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 sibling 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, DC, JT	Creditor	Date Liability Incurred mo/year	Type of Liability	Amount of Liability										
				A	B	C	D	E	F	G	H	I	J	K
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE	\$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	Spouse/DC Liability over \$1,000,000
	American Ag Credit	June 2003	Mortgage on 13610 Ave 21 1/2, Chard, OH						X					
	US Bank	Oct. 2003	Auto loan on Ford Fusion		X									
	American Ag Credit	June 2003	Almond Farm Operating Loan			X								
	Bank of America Mortgage	June 2003	Mortgage on 13610 Ave 21 1/2, Chard, OH				X							
	Bank of America Mastercard	Recurring	Credit Card	X										

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, partner, proprietor, representative, employee, or consultant of any corporation, company, 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.

Position	Name of Organization
Office Technician, Associate Grant Program Analyst, Staff Services Analyst	State of California - Valley State Prison for Women, Had Chambers, Valley State Prison
Board of Directors	Nature Association of Realtors
Owner/Sole-Proprietor	Joy's Well Drilling & Construction
Broker/Regional/Treasurer/Director	Muir Street Realty, Inc.
EO 1 Single Member Manager	LSB Farms, LLC (Formerly sole proprietorship dba. B&G Enterprises)

Name Tanna Lynn Carra Botelho Page 6 of 6

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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.**

GPO: 2013 78-885 (mac)

U.S. HOUSE OF REPRESENTATIVES
LEGISLATIVE RESOURCE CENTER
COMMITTEE ON ETHICS
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OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
CANDIDATE FINANCIAL DISCLOSURE
EXTENSION REQUEST FORM

Name of Candidate: Joanna Lynn Garcia Botelho Date: 10/24/13
Date of Special/Primary Election: June 3, 2014
State/District of Election: California/16th District

Financial Disclosure Statement Report Type (check one):
☒ Report due in 2013 ☐ Report due in 2014 ☐ Amendment ☐ Other Specify

The length of time for which extension is requested (check one):
☐ 30 days ☐ 60 days ☒ 90 days ☐ Other Specify number of days or specific date

For Ethics Committee Use Only
Your request for an extension of time in which to file the Financial Disclosure Statement referenced above is hereby granted. Your report must be filed on or before 1/31/14. The Ethics Committee may grant additional requests, which may not, in the aggregate, exceed 90 days from the original due date for this report.

Date: 11/5/13

K. Michael Conway, Chairman
Linda T. Sanchez, Ranking Member

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COMMITTEE ON ETHICS
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