(Yes No V	,,	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.	ssets, "unearned" ir ? Do not answer "y	i	Exemptions
<u>(</u>	Yes □ No ✔		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?	oved by the Commit details of such a tru	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain disclosed. Have you excluded from this report details of such a trust benefiting you, your s	Trusts-
(Yes No 🗸		itial Public Offering?	d as a part of an Init	Did you purchase any shares that were allocated as a part of an Initial Public Offering?	IPO-
"	JESTIONS	SE QL	INFORMATION ANSWER EACH OF THESE QUESTIONS	, OR TRUST I	IPO and EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	IPO and EXCL
ate	he appropri	1 and th	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	Yes ✓ No 🗆	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.	V. (more than \$10,00 If yes, complet
			If yes, complete and attach Schedule IX.		if yes, complete and attach Schedule IV.	If yes, complete
8 €	Yes U	outside	Did you have any reportable agreement or arrangement with an outside IX. entity?	Yes No V	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?	Did you, your spo IV. reportable asset I period?
8	** **	ling in the	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year? If yes, complete and attach Schedule VIII.	Yes V No	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.	III. more than \$200 ir more than \$1,000 if yes, complete
ŏ □	₹	nan \$350	VII. reimbursements for travel in the reporting period (worth more than \$350 from one source)? If yes, complete and attach Schedule VII.	Yes No	you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	II. you for a speech, If yes, complete
			if yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.	If yes, complete
No S	Yes 🗆 N	He gift in therwise	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$350 and not otherwise	Yes 🗸 No 🗌	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	Did you or your s
			QUESTIONS	OF THESE QUESTIONS	PRELIMINARY INFORMATION ANSWER EACH	PRELIMINARY
ys -	more than 30 days late.	more late.	Termination Date:	☐ Termination	Annual (May 15)	Report Type
inst	be assessed against	be as:			House of Representatives District:	Status -
		OKS V	Officer Or Employing Office:		Member of the U.S. State: CA	
(y) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	/川は門は一分 ドロ ショ (Office Use Only)	(Of	(Daytime Telephone)	i i	(Full Name)	
					Devin Gerald Nunes	
HAND DELIVERED	ED CH	HA	FORM A Page 1 of 6 For use by Members, officers, and employees	TATIVES MENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT	UNITED ST

SCHEDULE I - EARNED INCOME

Name Devin Gerald Nunes

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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.

Source	Туре	Amount
Tulare County Office of Education	Spouse Salary	N/A

				; ;	
SCHEDULE	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	IE Name Devin Gerald Nunes	rald Nunes		Page 3 of 6
	BLOCK A	вгоск в	вгоск с	BLOCK D	BLOCK E
ASSet Identify (a) each a value exceeding \$ reportable asset c "unearmed" incon	Asset and/or Income Source ldentify (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 "unearmed" income during the year.	Year-End Value of Asset Indicate value of asset at close of reporting year. If you use a valuation	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	Amount of Income For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in
Provide complete For all IRAs and o each asset held ir For rental or other a description, e.g.	Provide complete names of stocks and mutual funds (do not use ticker symbols.) For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds. For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and a city and state.	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	(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	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.	reporting year.
For an ownership in state the name of the location in Block A.	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.	generated income, the value should be "None." This column is for assets	duning are reported period.	generated by assets held solely by your spouse or dependent child.	
Exclude: Your per (unless there was \$5,000 or less in a in, or income deri Savings Plan.	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 a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	held solely by your spouse or dependent child.			
if you so choose, you may indispouse (SP) or dependent child optional column on the far left.	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 discuinstruction booklet.	For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.				
JT	Alpha Omega Winery, LLC		None	NONE	
JT	Bank of America, Savings Account	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
T	Condo, Visalia, CA	\$100,001 - \$250,000	RENT	\$5,001 - \$15,000	
	WND Books, Inc	Indefinite	Other: Copyright royalties	NONE	

SCHEDULE V - LIABILITIES

Name Devin Gerald Nunes

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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 for liabilities held solely by your spouse or dependent child. owed during the year. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless it is rented out or you are a Member); 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 preceding calendar year exceeded \$10,000. *This column is

	JT	SP, DC, JT
	Chase Bank	Creditor
	Dec 2010	Date Liability Incurred
	Mortgage on primary residence, Tulare, CA	Type of Liability
!	\$100,001 - \$250,000	Amount of Liability

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Devin Gerald Nunes Page 5 of 6

spouse or dependent child that is totally independent of his or her relationship to you. 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 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 Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 received by you, sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under 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

American Enterprise March 8-11 CA None Institute Oct 6-10 Oct 6-10 DC-Sea Island, GA-Fresno, CA Y N N None None	Source	Date(s)	Point of Departure DestinationPoint of Return	(Y/N)	Food? (Y/N)	Was a Family? Food? Member Included? (Y/N)	Days not at sponsor's expense
Oct 6-10 DC-Lisbon-Fresno, CA Y N N	American Enterprise Institute	March 8-11	DC-Sea Island, GA-Fresno, CA	~	~	Z	None
	FLAD	Oct 6-10	DC-Lisbon-Fresno, CA	~	Z	Z	None

SCHEDULE VIII - POSITIONS

Name Devin Gerald Nunes

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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 honorary nature; and positions listed on Schedule I.

Position Name of Organization Limited Partner Alpha Omega Winery		
	Position	Name of Organization
	Limited Partner	Alpha Omega Winery