<b>₹</b>	Yes 🔲	pendent child	ilities of a spouse or dependent child Committee on Ethics.	"unearned" income, transactions, or liabilities of a spouse or ounless you have first consulted with the Committee on Ethics	arned" income ss you have fit		<b>EXEMPTION</b> —Have you excluded from this report any other assets, "unearned" income, transactions, or liabil because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the (	g m
N <sub>O</sub>	Yes 🔲	ot be	ent child?	s and certain other "e spouse, or a depende	nittee on Ethic ting you, your	ed by the Comr h a trust benefi	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?	요크
<u> </u>	QUESTION	)F THESE (	NSWER EACH OF THESE QUESTIONS	MATION — AN	T INFOR	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	
	esponse.	each "Yes" r	dule attached for each "Yes" response	ppropriate scheu	and the a	e answered	Each question in this part must be answered and the appropriate sched	
₹	Yes 🔲	\$5,000 from	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.	VI. Did you receive co a single source in the t It yes, complete and t	∆	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> g=
Š.	Yes	rangement	eportable agreement or arrangement attach Schedule V.	V. Did you have any reportable agreemer with an outside entity? If yes, complete and attach Schedule V.	<b>₹</b>	γ <sub>eg</sub>	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>=</b> a 5 =
<u>₹</u>	Yes	pefore the date	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.	IV. Did you hold any re of filing in the current of filing in the current of fives, complete and a	<u>\$</u>	¥ <b>∑</b>	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.	<b>=</b> ₫-
l			S	EACH OF THESE QUESTIONS	OF THES		PRELIMINARY INFORMATION — ANSWER	
							in all sections, please type or print clearly in blue or black ink	<del>-</del>
assessed who files	A \$200 penalty shall be a against any individual versions are than 30 days late.	A \$200 pen against any more than 3	Check if Amendment	" // <b>/</b> //3	Date of Election:	Office:	Filer Candidate for the House of Representatives District:  Status New officer or Employing Office:	· · · · · · · · · · · · · · · · · · ·
	(Office Use Only)	·						Γ
E	PRESENTATIVES	OFFICE OF THE SENTATIVES		Daytime Telephone	Daytime		Name: Alan LOWENTHAL	T <sub>z</sub>
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	GISLATIVE RESOURCE CLATE.	GISLATIVE RES	and new employees	For use by candidates		2012	Period covered: January 1, 2011 - 2011	- To -
Page 1 of 7	OCT 16 2012	007	M B	FORM B		ATIVES	UNITED STATES HOUSE OF REPRESENTATIVES	
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# SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Alan LOWENTHAL

Page 2 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
nore 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 ben	ement programs, and benefits re	efits received under the Social Security Act	Security Act.
Source (include date of receipt for honoraria)	Type	Amount	ount
Course (monde date of tecept for notionally)	JPC	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
First Bank & Trust, Houston, TX	Director's Fee	<b>\$4</b> 00	\$3,200
	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
SHATE of Calyonnia - STATE SCRATOS	Salary	79,400	# 95,280
CALIFORNIA Public Employees Retirement System	Herson, Bake Whit.	739,000	# 47,000
The Permanente medical GROUP	spouse SALATY		
SOUTHBLE CALIFORNIA PERMANENTE MEDICAL GROUP	Spause sacary		
CALIFORNIA COMMUNITY Colleges Bd. of Gor.	spouse shoon	1	

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Sun America - retirement	SANJINGS Plus Program	Allianz - Annuny	DXY Long Beach	LBS7CU Oplit union	TAChars a marcian to	1st Bank of Padu	Examples:	SP Mega Corp. Stock	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 pinithy held with your spouse (JT), in the optional column on the far left.  For a detailed discussion of Schedule II requirements, please refer to the instruction booklet.	account and its value at the end of the reporting period.	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 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 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 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
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			4-1-axx				Royalties	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		BLOCK C  Type of Income  Check all columns that apply. For retirement accounts that do not allow you to choose specific investments of that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "Tax-Deferred" column. Dividends, interest, and capital gains, even interest, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
	<u>ス</u>	X		ļ			_		None		
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## SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Name Alan LowenTHAI

Page 4 of 7

Continuation Sheet (if needed)

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I <i>3</i> -	CHISTIS CH, Sontier	Golub Cap		Engritte Greaty	EL PASO Carp	E-847	CATERPILLAR	Brokfield	Berg Worner	Blackrock	Amerem Bur Corp	ITC Holding Corp	DISNEY		Asset and/or Income Source	BLOCK A
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### SCHEDULE II — ASSETS AND "UNEARNED" INCOME

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SCHEDULE II — A continuation Sheet (if needed)	BLOCK A  Asset and/or income Source		} = 9	}	8	CA	(0)		CEOWN CA	CEOWN CA		CACOWN CA FORD MO CROWN CA FORD MO					
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EARNED" INCO	BLOCK B Value of Asset	7	000 0,800 1,000 00,000 000,000 5,000,000	1 - \$50,000 1 - \$100,01 01 - \$250,1 01 - \$500,1 01 - \$1,001 ,001 - \$5,0 0,001 - \$5,0	\$50,00 \$100,0 \$250,0 \$600,0 \$1,000 \$5,000 \$25,00	\$50,00 \$100,0 \$250,0 \$600,0 \$1,000 \$5,000 \$25,00	\$50,00 \$100,0 \$250,0 \$600,0 \$1,000 \$5,000 \$25,00	\$50,00 \$100,0 \$250,0 \$500,0 \$1,000 \$5,000 \$25,00	\$50,00 \$100,0 \$250,0 \$500,0 \$1,000 \$5,000 \$25,00	\$50,00 \$100,0 \$250,0 \$500,0 \$1,000 \$5,000 \$25,000	\$50,00 \$100,0 \$250,0 \$500,0 \$1,000 \$5,000 \$25,000	\$50,00 \$100,0 \$250,0 \$500,0 \$1,000 \$5,000 \$25,000	\$50,00 \$100,0 \$250,0 \$500,0 \$1,000 \$5,000 \$25,000	\$15,000 \$50,000 \$100,000 \$100,000 \$1,000 \$1,000 \$55,000 \$256,000 \$	\$15,000 \$100,0	★       \$15,00         \$50,00       \$100,0         \$250,0       \$250,0         \$5,000       \$1,000         \$5,000       \$25,00	\$15,000 \$100,00 \$100,00 \$100,00 \$1,000 \$1,000 \$1,000 \$15,000 \$25,000 \$25,000 \$25,000 \$25,000
	BLOCK C  Type of Income	- You	NO TRUST	Over \$50,000,000 ICNE DIVIDENDS RENT NTERIEST CAPITAL GAINS EXCEPTED/9LIN	204200	X N	X × 1	X	X X X X I								
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DWENTHAL	BLOCK D  Amount of Income	Preceding		\$1,000,001 - \$5,000 Over \$6,000,000 None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500		7	X	XXX	XXXX	XXXX	X	XXXXXX	XXXXXX		XXXXXXX		
1 8		₫	<ul> <li></li> <li>≤</li> <li>2</li> <li>0</li> <li>≤</li> <li>0,000</li> <li>€</li> </ul>	\$2,501 <b>-</b> \$5,000 \$6,001 <b>-</b> \$15,000		╀	╁╌╌╁		╂	<del>}                                    </del>	<del>                                     </del>	╂═╂┈╂═╂┈╂═╁┈┼	<del>┞═╏═╏┈╏═╏┈╏</del>	<del>┞┈┞┈┠┈╏┈╏┈╏┈╏┈╏</del>	<del>┞┈╃┈┞┈┠┈╏┈╏┈╏┈╏</del>	<del>┞╼╉╼╅╍┾╍┠╼╉┈╂┈╉┈╂</del>	<del>┝╸╏╼┩┈┥┈┼╼┨╼╏┈╏</del> ╼ <del>╏┈╏</del>

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### SCHEDULE III — LIABILITIES

ame Alan Lowenthal

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

Date   Date   Liability   Type of Liability			 		 _		
Date   Liability   Type of Liability   Type of Liability   Type of Liability   Type of Liability   A   B   S10,001						되 <u></u> 다 당 왕	
Mortgage on 123 Main Street, Dover, DE   S10,001	•		•		Example: First Bank of Wilmington, DE	Creditor	
\$10,001— \$15,000 A \$15,001— \$50,001— \$100,000 C \$100,000 C \$100,001— \$250,000 m \$500,000 m \$500,000 m \$500,000 m \$1,000,001— \$1,000,000 m \$5,000,000 m \$5,000 m \$5,000 m \$5,000 m \$5,000 m \$5,000 m \$5,0					May 1998	Date Liability Incurred mo/year	
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\$5,000,000 \$5,000,000 \$25,000,000 \$25,000,000 \$50,000,000						\$1,000,000	
\$25,000,000 \$25,000,000 \$50,000,000 Over						\$5,000,001	
Over					_	\$25,000,001—_	
						Over	

### SCHEDULE IV — POSITIONS

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, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise,

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

and positions solely or all notionary nature.	ary nature.	
Position	Name of Organization	
 State Senetor	CALIFORNIA SHATE Senate	
	•	
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•		