

POSTMARK ILLEGIBLE

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

FORM B

Period covered: January 1, 2013 - December 31, 2013

For use by candidates and new employees

LEGISLATIVE RESOURCE CENTER

2014 FEB -5 PM 1:22

Name: John M.W. Moorlach Daytime Telephone: _____

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(Office Use Only)

Filer Status	<input checked="" type="checkbox"/> Candidate for the House of Representatives	State: <u>California</u>	Date of Election: <u>6-3-14</u>	Check if Amendment <input type="checkbox"/>	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
	<input type="checkbox"/> New officer or employee	District: <u>45</u>	Employing Office: _____		

In all sections, please type or print clearly in blue or black ink.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

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.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	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.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	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.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Name John M Moorlach Page 2 of 7

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John M. W. Mordas 3 of 7

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SCHEDULE II - ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John M. W. Moorhead

Page 4 of 7

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		None	\$1 – \$1,000	\$1,001 – \$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 Asset over \$1,000,000*									I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	Spouse/DC Income over \$1,000,000*	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	Spouse/DC Income over \$1,000,000*																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
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SCHEDULE II - ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John M. W. Moorlach

Page 5 of 7

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SCHEDULE III - LIABILITIES

Name **John M. A. Moorlach**

Page **6** of **7**

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
JT	Wells Fargo Bank	March 1992	Mortgage on Principal Residence				✓							
JT	Wells Fargo Bank	Nov 2012	Equity line		✓									
	Note: For two months of recent unemployment graduate, rental income in 2012 for temporary housing at a													

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
	See Schedule Attached

Position	Boards, Commissions and Committees	District
Supervisor	Aliso Viejo Community Facilities District	88-1
Supervisor	Baker Ranch Community Facilities District	87-6
Director	California Association of Counties	
Supervisor	Coto de Caza Community Facilities District	87-8
Supervisor	County of Orange Development Agency	
Supervisor	County of Orange Industrial Development Authority	
Supervisor	Dimensions Business Park Community Facilities District	87-1
Supervisor	Foothill Ranch Community Facilities District	87-4
Supervisor	Golden Lantern Reassessment District	94-1
Director	In-Home Supportive Services Authority	
Supervisor	Irvine Coast Assessment District	88-1
Supervisor	Ladera Ranch Community Facilities District	99-1
Supervisor	Ladera Ranch Community Facilities District	2000-1
Supervisor	Ladera Ranch Community Facilities District	2001-1
Supervisor	Ladera Ranch Community Facilities District	2002-1
Supervisor	Ladera Ranch Community Facilities District	2003-1
Supervisor	Ladera Ranch Community Facilities District	2004-1
Director	Local Agency Formation Commission (LAFCO)	
Supervisor	Lomas Laguna Community Facilities District	88-2
Supervisor	Los Alisos Community Facilities District	87-7
Supervisor	Mission Viejo Community Facilities District	87-3
Chairman	Newport Bay Watershed Executive Committee	
Supervisor	Newport Ridge Assessment District	92-1
Chairman	Orange County Commission to End Homelessness	
Director	Orange County Criminal Justice Coordinating Council	
Supervisor	Orange County Financing Authority	
Supervisor	Orange County Flood Control District	
Supervisor	Orange County Housing Authority	
Supervisor	Orange County In-Home Supportive Services Public Authority	
Director	Orange County Local Transportation Authority	
Supervisor	Orange County Public Financing Authority	
Director	Orange County Service Authority for Freeway Emergencies	
Supervisor	Orange County Special Financing Authority	
Director	Orange County Transit District	
Supervisor	Portola Hills Community Facilities District	87-2
Supervisor	Rancho Santa Margarita Community Facilities District	86-1
Supervisor	Rancho Santa Margarita Community Facilities District	86-2
Supervisor	Rancho Santa Margarita Community Facilities District	87-5A
Supervisor	Rancho Santa Margarita Community Facilities District	87-5B
Supervisor	Rancho Santa Margarita Community Facilities District	87-5C
Supervisor	Rancho Santa Margarita Community Facilities District	87-5D
Supervisor	Rancho Santa Margarita Community Facilities District	87-5E
Director	Santa Ana River Flood Protection Agency	
Supervisor	Santa Teresita Community Facilities District	87-9
Director	South Orange County Public Financing Authority	
Chairman	Urban County Caucus	