EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS PRELIMINARY INFORMATION be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? **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 Standards of Official Conduct. or exchange any reportable asset in a transaction exceeding 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. TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct and certain other "excepted trusts" need not V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? \$1,000 during the reporting period? III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any If yes, complete and attach Schedule II. II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the Name: Grace Flores Napolitaino if yes, complete and attach Schedule IV. Did you, your spouse, or a dependent child purchase, sell. if yes, complete and attach Schedule III. reportable asset worth more than \$1,000 at the end of the period? reporting period? CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT UNITED STATES HOUSE OF REPRESENTATIVES yes, complete and attach Schedule V. Report Type Status Filer Annual (May 15) Member of the U.S. House of Representatives ţ District: State: California ANSWER EACH OF THESE QUESTIONS Amendment Yes Yes Yes X Yes Yes × メ × Daytime Telephone: 202. 225.525 0 8 **2** 8 7 <u>N</u> Employee Officer or X IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX. of filing in the current calendar year? If yes, complete and attach Schedule VIII. reportable travel or reimbursements for travel in the reporting VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI. period (worth more than \$335 from one source): VII. Did you, your spouse, or a dependent child receive any VIII. Did you hold any reportable positions on or before the date If yes, complete and attach Schedule VII. For use by Members, officers, and employees appropriate schedule attached for each "Yes" response. Employing Office: Each question in this part must be answered and the Termination Form A Termination Date: A \$200 penalty shall be assessed against anyone who files more than 30 days late VO.S. HOUSE OF REPRESENTATIVES With Man with 2019 JUN 16 PH 4: 36 (Office Use Only) Yes Yes Yes Yes ĕ <u>Z</u> × ě 8 8 8 × × × × X

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SCHEDULE I—EARNED INCOME

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 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. See examples below.

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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Source	Type	Amount
Keene State	Approved Teaching Fee	\$6,000
	Legislative Pension	\$9,000
Examples: Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
Ford Retirement Plan	Pension	\$10,700
california Public Employees' Retirement	Pension	\$5,900

	Loan to Napolitano for Congress The Cirls - Norwalk, CA		Examples:	SP SP Mega Corp. Stock	Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by you or your spouse's child, parent, or sibling; any deposits totalling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. 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 (JT), in the optional column on the far left.		T T
*	× ×	×	Indefinite	×	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	> B B C C C C C C C C C C C C C C C C C	BLOCK B Value of Asset Indicate value of asset at close of reporting year. If 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 generated income, the value should be "None."
*	X Jewelry Sales	×	Royaties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: For Example, Partnersh	ip Income or Farm Income)	Type of Income Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA." For all other assets including all IFAs, indicate the type of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" If asset did not generate any income during calendar year.
×	× ×	×		X	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000	= = = = = = = = = = = = = = = = = = =	Amount of Income Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, including all IRAs, indicate the category of income by checking the appropriate box below. Dividends and interest, even if refnvested, should be listed as income. Check "None" if no income was earned or generated.
				S (partial)		portion of an asset is sold, please indicate as follows: (S) (partial) See below for	Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1000 in reporting year.

SCHEDULE IV— TRANSACTIONS

Name Elrace Flores Napolitano

Page 3 of 4

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												7014 Kingsbury Way, san Antonio, TX	4-Plex Pental Property	Example: Mega Coporation (SP. DC, JT Asset	that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions	Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property,
									:				×			PURCHASE		of Tr
														×	ĺ	SALE		Type ansac
			h											-		EXCHANGE		Type of Transaction
									To Province Wall Barran				06-20-08	10-12-08		Quarterly, Monthly, or Bi-weekly, if applicable	(MO/DAY/YR)	Date
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SCHEDULE V— LIABILITIES

Name GIVACE Flores Napolitano

Page 4 of 4

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 year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest; 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.

					Amount	Amount of Liability	ijγ		
SP			B	C D	m Ti	ရ		00	~ 0
∃ D 9	Creditor	Type of Liability	000	000 001 000),001-),000),001-	0000 0,001 00,000	00,001 00,000 00,001	000,00 000,00 000,00	r 000,00
			\$10 \$15,	\$50, 650 \$100	\$250 \$250	\$500 \$1,0	\$5,0 \$5,0	\$25, \$2 5,	Ove \$50,
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.			X				
	HSBC	Mortgoge on 4-Plex							
	Western Company of the Company of th	1814 Kingsbury Way,							
		san Antonio, TX							
								tre en	

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than \$335 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	\$345
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