



Filing ID #10002521

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • B-106 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Mr. Mark Pocan
Status: Member
State/District: WI02

FILING INFORMATION

Filing Type: Annual Report
Filing Year: 2013
Filing Date: 06/16/2014

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
American Funds - AMCAP Fund-A		\$1,001 - \$15,000	Tax-Deferred	\$201 - \$1,000	<input type="checkbox"/>
American Funds - New Perspective Fund - A		\$1,001 - \$15,000	Tax-Deferred	\$201 - \$1,000	<input type="checkbox"/>
Budget Signs & Specialties LLC		Undetermined	Dividends	\$5,001 - \$15,000	<input type="checkbox"/>
LOCATION: Monona/Dane, WI, US DESCRIPTION: Dividends from profit of business.					
State of Wisconsin Pension		Undetermined	None		<input type="checkbox"/>
DESCRIPTION: State of Wisconsin Pension					

SCHEDULE B: TRANSACTIONS

Asset	Owner	Date	Tx. Type	Amount	Cap. Gains > \$200?
American Funds - AMCAP Fund-A		04/4/2013	S	\$1,001 - \$15,000	<input checked="" type="checkbox"/>
LOCATION: US DESCRIPTION: Sold complete holding					

Asset	Owner	Date	Tx. Type	Amount	Cap. Gains > \$200?
American Funds - New Perspective Fund - A		04/4/2013	S	\$1,001 - \$15,000	<input checked="" type="checkbox"/>
LOCATION: US DESCRIPTION: Sold entire fund.					

SCHEDULE C: EARNED INCOME

Source	Type	Amount
Budget Signs & Specialties, LLC	spouse	N/A

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	Wells Fargo Home Mortgage	January 2013	Washington DC condo	\$250,001 - \$500,000
	Anchor Bank	August 2006	Home mortgage	\$100,001 - \$250,000
	BMO Harris Bank	June 2010	Business loans	\$15,001 - \$50,000
	Brother International	November 2013	business equipment	\$15,001 - \$50,000

SCHEDULE E: POSITIONS

Position	Name of Organization
Proprietor	Budget Signs & Specialties, LLC

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
January 1999	Myself and State of Wisconsin	continued partnership in State pension plan

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

None disclosed.

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

IPO: Did you purchase any shares that were allocated as a part of an Initial Public Offering?

☐ Yes ☒ No

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 dependent child?

☐ Yes ☒ No

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?

☐ Yes ☒ No

COMMENTS

CERTIFICATION AND SIGNATURE

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Mr. Mark Pocan , 06/16/2014