



Filing ID #10000921

FINANCIAL DISCLOSURE REPORT

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

FILER INFORMATION

Name: Richard B. Fox
Status: Congressional Candidate
State/District: CA18

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2014
Filing Date: 04/30/2014

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
BayCare Medical Group		\$15,001 - \$50,000	None		
DESCRIPTION: S Corporation, Medical Practice located in Los Gatos, CA					
CACO Properties Stock		\$250,001 - \$500,000	Rent	\$5,001 - \$15,000	\$15,001 - \$50,000
DESCRIPTION: Limited Partnership					
CREF Account		\$1,001 - \$15,000	Capital Gains, Tax-Deferred	\$1 - \$200	\$1,001 - \$2,500
Northwestern Mutual Life Insurance		\$1,001 - \$15,000	None		
DESCRIPTION: Whole Life #1					
Northwestern Mutual Life Insurance		\$15,001 - \$50,000	None		
DESCRIPTION: Whole Life #2					
Northwestern Mutual Life Insurance		\$1,001 - \$15,000	None		
DESCRIPTION: Whole Life #3					
TIAA Account		\$15,001 - \$50,000	Interest, Tax-Deferred	\$1 - \$200	\$201 - \$1,000
DESCRIPTION: TIAA Traditional					

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
BayCare Medical Group	Spouse salary	\$2,000	\$10,677.5
BayCare Medical Group	Own Salary	\$	\$9,500

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	Bank of America	1996	Credit Card	\$15,001 - \$50,000
	B. C. Fox	2012-2013	Personal Note	\$15,001 - \$50,000

SCHEDULE E: POSITIONS

Position	Name of Organization
CEO	BayCare Medical Group

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Source (Name and Address)	Brief Description of Duties
J. Augusto Bastidas, M.D. (Los Gatos, CA, US)	Legal Services

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

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: Richard B. Fox , 04/30/2014