COMMITTEES:

INVESTIGATIONS, OVERSIGHT.

AND REGULATIONS

CONTRACTING AND WORKFORCE

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Congress of the United States

House of Representatives

Washington, **BC** 20515-0922

July 13, 2011

The Honorable Karen L. Haas Clerk of the House United States House of Representatives U.S. Capitol, Room H154 Washington, DC 20515

Dear Ms. Haas:



I am writing to you with regard to a letter dated June 13, 2011, I received from the House Committee on Ethics Chairman Jo Bonner and Ranking Member Linda T. Sanchez with regard to my 2010 Financial Disclosure Statement which requested the need for additional information.

In the "CY 2010 FORM A CHECKLIST: MEMBERS OFFICERS & EMPLOYEES" which was attached to the June 13th letter the Ethics Committee checked SCHEDULE III. ASSETS & "UNEARNED" INCOME - Box 7. Fund/IRA/401K/trust underlying assets not reported and Box 9. OTHER AND SCHEDULE IV. TRANSACTIONS – Box 8. Other.

A member of our congressional staff contacted the Ethics Committee and spoke with a member of the staff trying to get a better idea on what additional information the committee requires.

Below are the additional questions the Ethics Committee staff discussed with our Congressional staff:

- 1) 529 College Investment Fund DC 1 Need the complete name of the fund. 529 College Investment Fund DC 2- Need the complete name of this fund and there needs to be a determination are their assets (stocks, bonds, etc that are over \$1000 and or produce \$200 of dividends or interest).
 - > The 529 college fund is the Florida 529 college fund. It is a division of the Florida Pre-paid.
- 2) First Command Financial Services Life Insurance What type of Insurance is this (Whole Life, Universal Life, Variable Life) Further there needs to be a determination are their assets (stocks, bonds, etc that are over \$1000 and or produce \$200 of dividends or interest)
 - > The First Command Life Insurance is Whole Life. There are no stocks and bonds in a whole life policy, it is always a fixed account in other words it is a savings account not a separate account within the life insurance.

- 3) Raymond James IRA Further there needs to be a determination are their assets (stocks, bonds, etc that are over \$1000 and or produce \$200 of dividends or interest)
 - The Raymond James 401K is just mutual funds within a retirement fund.
- 4) Sun Trust 401K Further there needs to be a determination are their assets (stocks, bonds, etc that are over \$1000 and or produce \$200 of dividends or interest).
 - > The Sun Trust was converted and therefore did not produce dividends or interest.

I trust this additional information will address the concerns of the Ethics Committee.

Should you have any additional question, please feel free to contact me or a member of your staff can contact my Chief of Staff, Jonathan Blyth, at 202-225-3026.

Steadfast and Loyal,

Allen B. West

Member of Congress

AW/AZ Attachment

				schedule attached for each "Yes" response.		If yes, complete and attach Schedule V.	
	oriate	approp	and the	Each question in this part must be answered and the appropriate	Yes No	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 IX.		If yes, complete and attach Schedule IV.	
	₹ ₹	Yes	outside	Did you have any reportable agreement or arrangement with an outside IX. entity?	Yes No		.₹
	:		:	If yes, complete and attach Schedule VIII.	-	If yes, complete and attach Schedule III.	
	 8 ⟨	8	-	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes No		=
	!		; ; 	If yes, complete and attach Schedule VII.		If yes, complete and attach Schedule II.	
	8	Yes	He travel or Van \$335	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$335 from one source)?	Yes No	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?	F
	!	:		If yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.	
	8 € ,	Yes		Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$335 and not otherwise exempt?	Yes 🛮 No 🗀	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	-
				UESTIONS	OF THESE Q	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	اح
	days	more than 30 days late.	more ti late.	Termination Date:	Termination	Report Type Annual (May 15) Amendment	
	A \$200 penalty shall be assessed against anvone who files	A \$200 penalty shall be assessed against anyone who files	A \$200 be ass	Officer Or Employing Office: Employee	m O	Filer Member of the U.S. State: FL Status House of Representatives District: 22	
	Only)	(Office Use Only)	(Offi	(Daytime Telephone)		(Full Name)	
47	2011 JUL 14 AN 9: 47 JU	11 70r	2011	202-225-3026		Allen Bernard West	
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				For use by Members, officers, and employees	MENT	CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT	င
MANU UELIVERED	UELIN	NU L	TA	FORM A Page 1 of 6	TATIVES	UNITED STATES HOUSE OF REPRESENTATIVES	رے

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

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

ĕ **S**

Yes

No

Trusts-

Exemptions— 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.

SCHEDULE I - EARNED INCOME

Name Allen Bernard West

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$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.

Source	Туре	Amount
Calibre, Inc. Salary	ary	\$85,048
US Department of Defense Mili	Military Pension	\$50,268
Raymond James Financial Spc	Spouse Salary	N/A

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Name Allen Bernard West

BLOCK A close of reporting alue of Asset Year-End **BLOCK B** Check all columns tha apply. For retirement Type of Incom BLOCK C BLOCK D BLOCK E

Asset and/or Income Source	Year-End
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.	Value of Asset
and (b) any other reportable asset or sources of income which	at close of reporting
generated more than \$200 in "unearned" income during the year.	year. If you use a
	valuation method
Provide complete names of stocks and mutual funds (do not use ticker	other than fair market
symbols.)	value, please specify
	the method used. If an

exercised, to select the specific investments), provide the value for each reporting period. of the institution holding the account and its value at the end of the asset held in the account that exceeds the reporting thresholds. For 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 retirement accounts which are not self-directed, provide only the name

> the value should be it is generated income

address. For rental or other real property held for investment, provide a complete

For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A.

vacation homes (unless there was rental income during the reporting Exclude: Your personal residence, including second homes and rite tatalina EE 1110 ar lass in a nam

529 College Investment Fund -

None

None

DC

DC

529 College Investment Fund -

SP

Ford Motor Company

\$50,000 \$15,001 -

None

\$250,000 \$100,001 -

None

Services Life Insurance

First Command Financial

(with Aim Summit)

Services - 401K/MAP Plan First Command Financial

\$15,001 -

None

\$50,000

\$15,000 \$1,001 -

NTEREST

\$50,000 \$15,001 -

None

Savings and Checking Account First Command Financial -

<u>ا</u>

SP

included only because generated no income even if reinvested, mu interest, and capital ga column. Dividends, check the "None" plans or IRAs), you ma Check "None" if the as be disclosed as incom specific investments o accounts that do not income (such as 401(k that generate tax-defer allow you to choose

asset was sold and is

during the reporting

Page 3 of 6

			 - 			ne it
NONE	NONE	NONE	\$1 - \$200	NONE	NONE	Amount of income For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.
			! -		S	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.

တ	NONE	None	None	SP Sun Trust 401K N
ד	NONE	None	\$15,001 - \$50,000	SP Raymond James IRA \$
:	\$201 - \$1,000	DIVIDENDS	\$50,001 - \$100,000	SP PSE&G \$
 	\$1 - \$200	INTEREST	\$1,001 - \$15,000	Fort Sill Federal Credit Union - \$ Savings and Checking Account \$
Page 4 of 6		rnard West	Name Allen Bernard West	SCHEDULE III - ASSETS AND "UNEARNED" INCOME

SCHEDULE IV - TRANSACTIONS

Name Allen Bernard West

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out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below. 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 Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange

				:	
SP, DC,	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
DC	529 College Investiment Fund - DC1	S	No	12-01-10	\$15,001 - \$50,000
SP	Raymond James IRA	ס	NA	02-14-11	\$15,001 - \$50,000
SP	Sun Trust - 401K	S	N _o	02-14-11	\$15,001 - \$50,000
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SCHEDULE V - LIABILITIES

Name Allen Bernard West

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cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit 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

JT, C, Q,	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
JL	Bank of America	April 2004	Mortgage on 1641 NW 107th Lane, Plantation, Florida	\$100,001 - \$250,000
7	Carmax	March 2007	March 2007 Car Payment	\$10,001 - \$15,000
TL	Wells Fargo	February 2011	Car Payment	\$15,001 - \$50,000