

FINANCIAL S	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	FORM B For New Members, Candidates, and New Employees	TIGISLATIVE RESOURCE CENTER
Name:	Name: PETE AGUILAR	Daytime Telephone: ું ૧૪૦ - ૧૪૦ - ૧૫૧૪	Coffice of the state of the sta
FILER	New Member of or Candidate for State: CA U.S. House of Representatives District: 3 (Candidates – Date of Election:	Check if Amendment	(Office Use Only)
STATUS	New Officer or Employee Employing Office:	Period Covered: January 1, 2013 to APPHL 15, 2014	A \$200 penaity shall be assessed against any individual who files more than 30 days late.

PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

	THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	NLY THE SCHEDULE	THIS FORM INCLUDES C
Yes X No	J. Did you receive compensation of more than \$5,000 from a single Yes X No	Yes K No X	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?
Yes No	F. Do you have any reportable agreements or arrangements with an outside entity?	Yes X No	C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?
Yes X No	Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes X No	A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Make more than \$200 in unearned income from any reportable asset during the reporting period?

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

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.	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 that benefits you, your spouse, or dependent child?
Yes	Yes
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SCHEDULE A - /

- ASSETS & "UNEARNED INCOME"
Name: PÉTE AquiLAR
Page 2 of \$

NSURANCE	ARA VOWERS LIFE	CASOLE UNION SOUNDS	AT AGROWNERS CONTIN	ABC Hedge Fund X	Examples: Simon & Schuster	SP, SP Mega Corp. Stock EFF	more than \$1,000 in interest-bearing accounts. For rental and other real property held for investment, provide a complete address or description, e.g.: "rental property," and a city and state. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan, Iff you have a privately-traded fund that is an Excepted investment Fund, please check the "EIP box. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent critid (OC), or jointly held with anyone (JT), in the optional column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction bookket.	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is:	Asset and/or income Source Identity (a) each asset held for investment or production of income and with a fair market value exceeding \$1.00 at the end of the reporting penology and (b) any other reportable asset or source of income that generated more than \$200 in 'unearned' income during the year. Provide complete names of stocks and mutual funds (do not use only ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.
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	×		*	Parthership Income	Royables	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		Type of Income Check all columns that apply. For accounts that generals tax-deferred income (such as 40 (Ik), IRA, or 529 accounts), you may check the Tax-Deferred column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if the asset generated no income during the reporting period.
	×		×			×	None \$1-\$200 \$201-\$1,000 \$1,001-\$2,500 \$2,501-\$5,000 \$5,001-\$15,000 \$15,001-\$50,000 \$100,001-\$1,000,000 \$100,001-\$5,000,000 Over \$5,000,000 Spouse/DC Asset with frome over \$1,000,000*	1	BLOCK D Amount of Income For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" catumn. 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 for assets held in taxable accounts. Check "None" if no income was earned or generated. "Column XII is for assets held by your spouse or dependent child in which you have no interest.
						S(part)	\$1,000.	Leave this column blank if there are no transactions	BLOCK E Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in the reporting period. If only a portion of an asset was sold, please indicates follows: (S (part)).

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE A -- ASSETS & "UNEARNED INCOME"

Name: PETE AGUILAR

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SCHEDULE B - TRANSACTIONS

Name: PETO AGUICAR Page 5 of 5

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