N <sub>O</sub>		spendent child Yes	ne, transactions, or liabilities of a spouse or de first consulted with the Committee on Ethics.	r assets, "unearned" inco ver "yes" unless you have	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.	
× ×		ot be Yes	nics and certain other "excepted trusts" need not spouse, or a dependent child?	d by the Committee on Et a trust benefiting you, yo	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 a dependent child?	
	ESTIONS	EACH OF THESE QUESTIONS	- ANSWER	OR TRUST INFO	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	m
	onse.	hed for each "Yes" response.	appropriate schedule attached for	answered and the	Each question in this part must be answered and the appropriate schedule attack	
X		\$5,000 from <b>Yes</b>	VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Schedule VI.	Yes No No	iii. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, compliete and attach Schedule III.	
X		rangement Yas	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	Yes 🐰 No	II. Did you, your spouse, or a dependent child receive "uneamed" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule II.	
	No.	r two years? Yes	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	Yes X No	l. 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.	<del></del>
		·	SE QUESTIONS	ANSWER EACH OF THESE QUESTIONS	PRELIMINARY INFORMATION — ANSWE	1
					in all sections, please type or print clearly in blue or black ink.	1
ssed	shall be asset lividual who ys late.	A \$200 penalty shall be assessed against any Individual who files more than 30 days late.	Date of Check if Election: June 5, 2012 Amendment		Filer  X Candidate for the State: CA District: I  Status  New officer or Employing Office:	
ESENTATIVES	U.S. HOUSE OF REPRESENTATIVES (Office Use Only)	U.S. H				
ANIO: 58	2012 MAY 1 1 AN 10: 58	201	Daytime Telephone:	Daytim	Name: Doug LaMaifa	
THE CENTER C	LEGISLATIVE RESOURCE CENTS!	LEGIS	For use by candidates and new employees		Period covered: January 1, 2010 - April 30, 2011	_
	Page 1 of _		FORM B	TIVES	UNITIED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	·

## SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

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	Name	
	Page of	

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.
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Exclude: Military pay (such as National Guard or Reserve pay), tederal retirement programs, and benefits received under the Social Security Act.	ement programs, and benefits re	sceived under the Social S	Security Act.
	Timo	· Amount	unt
Source (include date of receipt for nonoraria)	- Abe	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
-	Director's Fee	\$400	\$3,200
Examples: XYZ Trade Association, Chicago, it. (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
State of California	Senate Salary	29,000	86,389

						5	8	œ	For that honor hon	a 7	Proper Forms
Richvale, CA*	C-Corp R	LaMalfa i		Rice Farn	DSL Farm		Examples:	Sp	For rental or other real property provide a complete address.  For an ownership interest in a pri final is not publicly traded, state if that is not publicly traded, state if ness, the nature of its activities, location in Block A.  Exclude: Your personal residench homes (unit homes and vacation homes (unit homes and vacation homes (unit homes and vacation homes in personal on accounts; and any financial interest and any f	ount and its valu	Asset and/or Ir  Asset and/or Ir  Identify (a) each asset held if of income with a fair market the end of the reporting i reportable asset or sources more than Scott in unearne (do not use ticker symbols). For all IfIAs and other retire plants) that are self-directer, have the power, even if not a fair the account that asceed for retirement accounts av provide only the name of
CA*	C-Corp Rice Drying Facility	LaMalfa Farms, Inc.,		Rice Farm, Richvale, CA*	DSL Farming Partnership,	KY accounts	Simon & Schuster	Mega Corp. Stock	perty held for investment, a privately-held business tate the name of the business vities, and its geographic vities, and its geographic sidence, including second (unless there was rantal period); any deposits total-conal checking or savings all interest in, or income rement program, including indicate that an asset or repouse (SP) or depended with your spouse (JT), in ar left.		ICOME Source or investment or production value exceeding \$1,000 at value exceeding the year. I stocks and mutual funds ment plans (such as 401(k) f (Ae., plans in which you varcised to select the spe- ter act asset held is value for each asset held is the reporting threebodds. which are not self-directed, the institution hadding the
						-		4	None \$1 - \$1,000	B	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."
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·						1	Indefinite		\$15,001 - \$50,000	O	The value of the v
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					Partnership Income		Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		Type of Income  Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate taxdeferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if retirvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
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	1	T	T	1	$\vdash$	t	t		\$15,001 - \$50,000 \(\leq\)	ត្ត	Amount of Income  For retirement accounts that do not allow you to choose specific investments <u>or</u> 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.
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

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	Life Insurance Policy	New York Life Universal		Life Insurance Policy	New York Life Universal	-	Sacramento, CA	shares business software co.	New Generation Software, Inc.		TriCo Bancshores (TCBK)		ri Counties Bank Accounts			Asset and/or income Source	BLOCK A
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## SCHEDULE III - LIABILITIES

Name Page \_\_\_ of \_\_\_

owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); 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 previous calendar year exceeded \$10,000. 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

						J C, S	
				none	Example: First Bank of Wilmington, DE	Creditor	
					May 1998	Date Liability Incurred mo/year	
,					Mortgage on 123 Main Street, Dover, DE	Type of Liability	
						\$10,001— \$15,000	
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## SCHEDULE IV - POSITIONS

Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization); and positions solely of an honorary party of

and positions solely of an honorary nature.	ature.
Position	Name of Organization
Senator	California State Senate
Partner	DSL Farming Partnership, Richvale, CA (Rice Farm)
Vice President, CFO	LaMalfa Farms, Inc., Richvale, CA (Rice Drying Facility)
CEO	LaMalfa Trucking, Richvale, CA (uncompensated position, business owned by family trust f/b/o mother, Karon LaMalfa)
Board Member	Core Butte Charter School, Chico, CA

Use additional sheets if more space is required.