

**UNITED STATES HOUSE OF REPRESENTATIVES**  
**CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT**

Form A  
 For use by Members, officers, and employees

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**HAND  
 DELIVERED**

Name: **TIMOTHY L. WALBERG** Daytime Telephone: \_\_\_\_\_

2013 MAY 15 PM 3:38

U.S. HOUSE OF REPRESENTATIVES (Office Use Only)

*ML*

<b>Filer Status</b>	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <b>MI</b> District: <b>07</b>	<input type="checkbox"/> Officer or Employee	Employing Office: _____	Termination Date: _____
<b>Report Type</b>	<input checked="" type="checkbox"/> Annual (May 15, 2013)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination		

**A \$200 penalty shall be assessed against anyone who files more than 30 days late.**

**PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS**

I. 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.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. 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? If yes, complete and attach Schedule II.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)? If yes, complete and attach Schedule VII.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
III. Did you, your spouse, or a dependent child receive "unearned" 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 III.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
V. 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 V.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	<b>Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.</b>	

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

IPO—Did you purchase any shares that were allocated as a part of an Initial Public Offering?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input type="checkbox"/> No <input checked="" type="checkbox"/>
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.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>



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## Continuation Sheet (if needed)

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# SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name **TIMOTHY L. WALBERG** Page **5** of **9**

BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset													BLOCK C Type of Income	BLOCK D Amount of Income												BLOCK E Transaction
	A	B	C	D	E	F	G	H	I	J	K	L	M		I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	
	None	\$1 - \$1,000	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Spouse/DC Asset over \$1,000,000*		None	\$1 - \$200	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	\$1,000,001 - \$5,000,000	Over \$5,000,000	Spouse/DC Income over \$1,000,000*	
SP, DC, JT																											P, S, E
Pimco Low Duration Admin			X													X											
Pimco Investment Grade Corp		X														X											
Rydex Series Trust US Govt	X															X											P, S
T. Rowe Price High Yield Advan			X												X												
T. Rowe Price Short Term Bond			X												X												
T. Rowe Price US Bond Index			X												X												
PL Community Credit Union					X										X												
TIAA-CREF				X											X												
Savoy Energy, LP	X														oil			X									

Abudun Asia Bond numerous transactions less than \$1000 Value 12/31/12 less than \$1000  
Pimco Low Duration Admin. closed in 2011; reopened w/ purchases less than \$1000 in 2012

# SCHEDULE IV—TRANSACTIONS

Name **TIMOTHY L. WALBERG**

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Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. **It only a portion of an asset is sold, please so indicate (i.e., "partial sale").** See example below.

**Capital Gains** — If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.

\* This column is for assets solely held by your spouse or dependent child.

SP, DC, JT SP	Asset	Type of Transaction			Check Box if Capital Gain Exceeded \$200	Date (MO/DAY/YR) or Quarterly, Monthly, or Bi-weekly, if applicable	Amount of Transaction										
		PURCHASE	SALE	EXCHANGE			A \$1,001- \$15,000	B \$15,001- \$50,000	C \$50,001- \$100,000	D \$100,001- \$250,000	E \$250,001- \$500,000	F \$500,001- \$1,000,000	G \$1,000,001- \$5,000,000	H \$5,000,001- \$25,000,000	I \$25,000,001- \$50,000,000	J Over \$50,000,000	K Over \$1,000,000* (Spouse/DC Asset)
Example:	Mega Corporation Common Stock (partial sale)		X			10-12-12		X									
	Hartford Money Mkt HLS		X			1.13.12	X										
	Global Silver miners ETF		X			4.4.12	X										
	" "	X				11.1.12	X										
	Ishares Silver Trust Index Fund		X			3.14.12	X										
	ProFunds Oil Drilling & Equip Svcs Ultra Sector	X				9.13.12	X										
	" "		X			10.3.12	X										
	ProFunds Real Estate Ultra Sector Inv	X				9.13.12	X										
	" "		X			10.1.12	X										
	Proshares <del>Ultra</del> short Russell 2000	X				4.18.12	X										
	" "		X			7.18.12	X										
	Proshares Ultrashort 500	X				5.16.12	X										
			X			7.18.12	X										
	Sprott Physical Silver Unit	X				1.18.12	X										
	Federated Intern Govt/Corp Svc	X				4.27.12	X										
	iShares iBoxx \$ Invest Grade Corp Bd	X				1.13.12	X										





# SCHEDULE VIII—POSITIONS

Name **TIMOTHY L. WALBERG**

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Report all positions, compensated or uncompensated, held during the current calendar year 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 political parties and campaign organizations); and positions solely of an honorary nature.

Position	Name of Organization

# SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
4.12.2005	STATE OF MICHIGAN	PENSION FOR SERVICE - ST. HOUSE