Yes No X	child because	sactions, or liabilities of a spouse or dependent child because with the Committee on Ethics.	ed" income, tran	her assets, "unearn es" uniess you have	EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on	EXEMPTION they meet:
Yes No X	sclosed. Have you	d certain other "excepted trusts" need not be disclosed. Have you iild?	e on Ethics and ir dependent chi	ved by the Committ you, your spouse, o	TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excep excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	TRUSTS— excluded fr
Yes No X			oublic Offering?	a part of an Initial	IPO—Did you purchase any shares that were allocated as a part of an Initial Public Offering?	IPO—Did)
UESTIONS	OF THESE Q	INFORMATION — ANSWER EACH OF THESE QUESTIONS		NT, OR TRUST	EXCLUSION OF SPOUSE, DEPENDENT,	EXCLUS
wered and the Yes" response.	must be ansi ed for each "	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	No X	ortable Yes	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.	V. Did you, liability (mo If yes, com
Yes X No	arrangement with	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	8	sell, ing Yes	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.	IV. Did you or exchang \$1,000 dur
Yes No X	or before the date	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.	N _N	arned" ny period? Yes X	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.	III. Did you, income of reportable a lf yes, com
Yes No X	d receive any n the reporting ३)?	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.	×	harity in he Yes	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.	II. Did any individulieu of paying you reporting period? If yes, complete
Yes No X	receive any regating more	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.	S _S	ries or riod? Yes X	 Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? yes, complete and attach Schedule I. 	I. Did you c fees) of \$20 If yes, com
		E QUESTIONS	OF THESE	ANSWER EACH	INFORMATION —	PRELIMINARY
30 days late.	30 days late.	Termination		Amendment	Annual (May 15, 2013)	Report Type
A \$200 penalty shall be assessed	A \$200 penal	or Employing Office:	Officer or Employee	mr 07	Member of the U.S. State: 1 House of Representatives District: 1	Filer Status
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HAND DELIVERED		Form A For use by Members, officers, and employees	ES STATEMENT	RESENTATIVES	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2012 FINANCIAL DISCLOSURE ST	UNITED

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SCHEDULE I—EARNED INCOME

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.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
STATE OF MICHIGAN	LEGISLATINE PENSION	\$58, 951

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MFS Growth	Amer. Growth & Incm	Amer. Growth	Templeton Dev MK+ Sec	Hartford Money MK+ HLS	MFS High Incm	1st Bank of Paducah, KY Accounts	!!	SP Mega Corp. Stock	Exclude: Your personal residence, including second fromes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	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.	For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and a city and state.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the appoint that exceeds the reporting thresholds	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	identity (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, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	Asset and/or Income Source	BLOCK A
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									Over \$5,000,000	×			and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	For assets for which you checked "lax- Peferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest ,	À	
									Spouse/DC Income over \$1,000,000*	¥	_	δ	= 🛱	* 6 6 6 * 		
S	S	S	တ	S	(rest, red)			S (partial)	(S) (partial) See below for exam- ple. P, S, E	portion of an asset is sold, please indicate as	If only a	•	\$1,000 in reporting year.	asset had purchases (P), sales (S), or exchanges (E) exceeding	Indicate if the	BLOCK E

Page 4 of 9

Continuation Sheet (if needed) ş ≒ S Inderated Intern Govt Corp Sprott Phys. Gold Trust Proshares Short Russell 2000 JP Moragn Core Bond A inderated Total Ruturn Gove Insi Federated Short Term Inon Fun Drichaus Active Incon Fund Sprott Phys. Silver Unit Kroshares Witrashort 500 Profunds Rual Estate Ultra Suctor Market Vector Gold Minus Elf Profunds oil Drill; Equip Sycs Witta sector Ishares Silver Trust Index Global X Silver Miners ETF mutual Shares suc mes Total Return TO Bank usa NA FDIC Shares i Boxx & Invest Grade Asset and/or Income Source Midcop BLOCK A Growth × × × × × × × × × Þ None œ \$1 - \$1,000× × O × × × × \$1,001 - \$15,000 O \$15,001 - \$50,000 Value of Asset m \$50,001 - \$100,000 Year-End BLOCK B 'n \$100,001 - \$250,000 ດ \$250,001 - \$500,000 I \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 ۲. \$5,000,001 - \$25,000,000 ᄌ \$25,000,001 - \$50,000,000 г Over \$50,000,000 ⋜ Spouse/DC Asset over \$1,000,000* NONE × × × × × × × X × × DIVIDENDS × × × RENT of Income BLOCK C Type × INTEREST ×× × × × × × × × × × × × CAPITAL GAINS × EXCEPTED/BLIND TRUST × × × TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income) X × X × × × × None × × × × * × × = × \$1 - \$200 Amount of Income \$201 - \$1,000 ≡ × 7 \$1,001 ~ \$2,500 < BLOCK D \$2,501 - \$5,000 ≤ \$5,001 - \$15,000 ¥<u>|</u> ¥<u>|</u> \$15,001 - \$50,000 \$50,001 - \$100,000 $\overline{\mathbf{x}}$ \$100,001 - \$1,000,000 × \$1,000,001 - \$5,000,000 \succeq Over \$5,000,000 × Spouse/DC Income over \$1,000,000* P, 5 q۷ 7,5 7.5 ゴ Transaction BLOCK E charita A A 4 G S S U пαл

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Name TIMOTHY L. WALBERG Page 5 of 9

Continuation Sheet (if needed)

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SCHEDULE IV— TRANSACTIONS

Name TIMOTHY L. WALBERG Page 7 of 9

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	Type of Transaction	Type ansac	ri On		Date			>	페 으 니	nt o	f Tra	Amount of Transaction	ction			
in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the					(MO/DAY/YR)	>	Φ	ဂ	•	m	חד	G	I		_	<u> </u>
purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	HASE		NGE	Box if C ceeded	or Quarterly,								0		0	
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.	PURCI	SALE	EXCH		Bi-weekly, if applicable			001- 0,000	0,001- 0,000	0,001- 0,000),001- 00,000 ———	00,001 00,000	00,001 000,00	000,000	000,00	\$1,000,00 ise/DC A
*This column is for assets solely held by your spouse or dependent child.						\$1,0 \$15,	\$50,	\$100		\$500			\$25,			
SP, DC, JT Asset								_								- 1
SP Example: Mega Corporation Common Stock (partial sale)		×			10-12-12		×									
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SCHEDULE IV— TRANSACTIONS

Name TIMOTHY L. WALBERG Page 8 of 9

							×	*	Rydex Surius Trust US Govt. X	SP Example: Mega Corporation Common Stock (partial sale) X	SP, DC, JT Asset	Capital Gains — if a sales transaction resulted in a capital gain in excess of \$\frac{1}{12}\$ \text{L}		in a cabilat loss, rrovide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the control of transactions between your parts or the control of transactions.	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 of Transaction
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SCHEDULE VIII—POSITIONS

Name TIMOTHY L. WALBERG

Page 4 of 4

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

tions); and positions solely of an honorary nature Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organiza-

			Position
			Name of Organization

SCHEDULE IX—AGREEMENTS

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. 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

		4-12-2005	Date
		4-12-2005 STATE OF MICHIGAN	Parties To
		PENSION FOR SERVICE - ST. HOUSE	Terms of Agreement