SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name
VOE
GARCIA
Page Z of 6

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.

Page. W of 6

Asset and/or Income Source **BLOCK A**

more than \$200 in "unearned" income during the year. the end of the reporting period, and (b) Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at reportable asset or sources of income which generated any other

(do not use ticker symbols). Provide complete names of stocks and mutual funds

method used.

cific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. plans) that are self-directed (i.e., plans in which you account and its value at the end of the reporting period. provide only the name of the institution holding the For retirement accounts which are not self-directed, have the power, even if not exercised, to select the spe-For all IRAs and other retirement plans (such as 401(k)

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

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В

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.

income during the reporting period); any deposits totaling \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. Exclude: Your personal residence, including second nomes and vacation homes (unless there was rental

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. If you so choose, you may indicate that an asset or None

\$1 - \$1,000

please refer to the instruction booklet For a detailed discussion of Schedule II requirements.

DC, Examples:

SP Mega Corp. Stock Simon & Schuster

st Bank of Paducah, KY accounts

ME CRI

Edge

SYEPN BARUT

Services

dro C+IPMAKEN

BLOCK B

of reporting year. If you use a valuation method other than fair market value, please specify the Indicate value of asset at close Value of Asset

only because it generated reporting year and is included If an asset was sold during the "None. income, the value should be

BLOCK C

Type of Income

deferred income (such as 401(k) ments or that generate taxallow you to choose specific invest-Check all columns that apply. For retirement accounts that do not "Tax-Deferred" column. Dividends, plans or IRAs), you may check the

if reinvested, must be disclosed as Income. Check "None" if the the reporting period asset generated no income during interest, and capital gains, even

BLOCK D

Amount of Income

the category of income by checking the appropriate box below. **Dividends, interest**, be disclosed as income. Check "None" if no and capital gains, even if reinvested, must "None" column. For all other assets, indicate For assets for which you checked "Taxincome was earned or generated. Deferred" in Block C, you may check the

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For additional assets and unearned income, use next page

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

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SCHEDULE III — LIABILITIES

Name VOE SARCIO

Page 5 of 6

ling 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. ture, 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 sibowed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furni-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

SP, DC,	<u>-</u> 1 §				
Creditor	Si Galiari	Example: First Bank of Wilmington, DE			
Date Liability	Incurred mo/year	May 1998			
Type of Liability	Type of Elability	Mortgage on 123 Main Street, Dover, DE			
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SCHEDULE IV — POSITIONS

any nonprofit organization, any labor organization, or any educational or other institution other than the United States. cer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, 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 offi-

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 a political party or campaign organization);

でまる。 ,	Cardidate
Sanchez Medina Gonzalez Quesada	Cousa taut
MRChou Cousulting	Persident/Owner
Name of Organization	Position

SCHEDULE V — AGREEMENTS

Name VOE GARCIO

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	,		Date	Identify the date service; continue efft plan maintain
			Partles To	Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future emplo service; continuation or deferral of payments by a former or current employer other than the U.S. Government effit plan maintained by a former employer.
			Terms of Agreement	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.

SCHEDULE VI -- COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule I.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hornetown, Homestate	Accounting services
Souches Medina Gonzalez Quesala Lla	CONSW/timar

GPO: 2012

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