	S C	s. Yes	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.	ets, "unearned" inco	ì	Exemptions-
	No K	Yes ☐ No 🗸	on Ethics and certain other "excepted trusts" need not be benefiting you, your spouse, or dependent child?	ed by the Committee stails of such a trust b	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" ned disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Trusts-
		STIONS	TION ANSWER EACH OF THESE QUESTIONS	IST INFORMA	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWE	EXCLUSION
		" response.	appropriate schedule attached for each "Yes" response.		If yes, complete and attach Schedule V.	If yes, comp
		l and the	Each question in this part must be answered and the	Yes No	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	V. (more than \$1
			If yes, complete and attach Schedule IX.		H yes, complete and attach Schedule IV.	H yes, comp
	☐ ₹ 【	outside Yes [Did you have any reportable agreement or arrangement with an outside IX. entity?	Yes V No	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting	N. reportable ass
			If yes, complete and attach Schedule VIII.		ff yes, complete and attach Schedule III.	If yes, comp
	₹	Yes	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes No	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	III. more than \$20
					If yes, complete and attach Schedule II.	If yes, comp
	₹	/el Yes	Did you, your spouse, or a dependent child receive any reportable travel VII. or reimbursements for travel in the reporting period (worth more than \$150 from one source)?	Yes No	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?	II. paying you fo
	i		If yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.	If yes, comp
	□ 8 <	therwise Yes	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	Yes No 🗆	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	Did you or yo
			QUESTIONS	THESE	PRELIMINARY INFORMATION ANSWER EACH OF	PRELIMINA
	0 days	more than 30 days late.	Termination Date:	☐ Termination	Annual (May 15)	Report Type
	Ity shall against	A \$200 penalty shall be assessed against	Officer Or Employing Office Employee		Member of the U.S. House of Representative District AL	Filer Status
	(ANA)	(Office Use, Only	(Daytime Telephone)		(Full Name)	
No	: 22	2012 NEY -1 PH 4: 22	(202) 225 1188 2012		Madeleine Z. Bordallo	_
	10 to		ا ترنار، ا			
ERED	DELIV	HAND DELIVERED		TATIVES EMENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT	UNITED S

SCHEDULE I - EARNED INCOME

Name Madeleine Z. Bordallo

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more dur 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.

Source	Туре	Amount
Government of Guam, Lieutenant Governor	Lieutenant Governor's Pension	\$42,499.92
Government of Guam, Survivor's Benefit	Survivor's Benefit Pension	\$12,500

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Checking Account Sun Trust Bank Ocala, Fl	Certificates of Deposit (9) Congressional Federal Credit Union Washington, DC	Certificate of Deposit Sun Trust Bank Orlando, FL	Alianz-Variable Annuity	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.	Exclude: Your personal residence, including second homes 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.	For an ownership interest in a privately-held business that is not publically 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.	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 "unearmed" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols.) For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e.,plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.	Asset and/or income Source ldentify (a) each asset held for investment or production of income with a fair	BLOCK A	SCHEDULE III - ASSETS AND "UNEARNED" INCOME
\$15,001 - \$50,000	\$500,001 - \$1,000,000	\$15,001 - \$50,000	\$100,001 - \$250,000					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 and is included only because it is generated income, the value should be "None."	Year-End	вгоск в	Name Madeleine Z. Bordallo
INTEREST	INTEREST	INTEREST	None				1	For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or iRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	Type of Income Check all columns that apply.	BLOCK C	e Z. Bordallo
\$1 - \$200	\$15,001 - \$50,000	\$1 - \$200	NONE					not allow you to choose specific investments or 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.	Amount of Income	BLOCK D	
			P						Transaction Indicate if asset	BLOCK E	Page 3 of 8

SCHEDI	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Madeleine Z. Bordall	ъе Z. Bordallo		Page 4 of 8
	Money Market Account Congressional Federal Credit	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
-	Union Washington, DC			_	_
	Rental 1 Tamuning, GU	\$1,000,001 - \$5,000,000	RENT	\$50,001 - \$100,000	
	Rental 2 Ocala, FL	\$500,001 - \$1,000,000	RENT	\$15,001 - \$50,000	
	Rental 3 Las Vegas, NV	\$500,001 - \$1,000,000	RENT	\$5,001 - \$15,000	ļ

SCHEDULE IV - TRANSACTIONS

Name Madeleine Z. Bordallo

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out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below. Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities future or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rente

	SP, DC,
Alianz-Variable Annuity	Asset
ס	Type of Transaction
N/A	Capital Gain in Excess of \$200?
6-24-11	Date
\$100,001 - \$250,000	Amount of Transaction

SCHEDULE V - LIABILITIES

Name Madeleine Z. Bordallo

Page 6 of 8

or appliances; 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 in the balance at the close of the preceding calendar year exceeded \$10,000. NOTE: Pending legislation may require Members to report mortgates on personal 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 amou owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furnitur residences.

SP, DC,	Creditor	Date Liability	Type of Liability	Amount of I jability
	Bank of Guam Hagatna, Guam	Oct 1995	Mortgage on Rental 1	\$250,001 - \$500,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Madeleine Z. Bordallo Page 7 of 8

sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 received by you your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the

Source	Date(s)	Point of Departure DestinationPoint of Return	Lodgin (Y/N	Food? (Y/N)	Was a Family 97 Food? Member Included?) (Y/N) (Y/N)	Days not at sponsor's expense
U.SJapan Legislative Exchange Program	Feb 1-3	Guam-Tokyo-DC	Y	Y	Z	None
Humpty Dumpty Foundation (for mtgs at UN)	Mar 27-28	Mar 27-28 DC-New York-DC	~	≺	Z	None

SCHEDULE VIII - POSITIONS

Name Madeleine Z. Bordallo

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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 any business enterprise, any nonprofit organization, any labor organization, or an educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
(Unpaid) Board of Directors Latte of Freedom Found Hagatna, Guam 96910	Latte of Freedom Foundation Hagatna, Guam 96910
(Unpaid) Board of Directors R.J. Bordallo Foundation Hagatna, Guam 96910	Foundation am 96910
(Unpaid) Advisor Salvation Army of Guam Hagatna, Guam 96910	ny of Guam эm 96910