	child because Yes	sactions, or liabilities of a spouse or dependent c with the Committee on Ethics.	l* income, trans rst consulted w	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.
No No	closed. Have you Yes	d certain other "excepted trusts" need not be discild?	on Ethics and dependent chil	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?
STIONS	F THESE QUES	MATION — ANSWER EACH OF THESE QUESTIONS	T INFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
ed and the response.	nust be answered for each "Yes	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	8	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.
No X	arrangement with Yes	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	₹	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.
No.	r before the date Yes	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.	₽	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.
ON Se	receive any the reporting Yes)?	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.	No.	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.
No No	receive any egating more Yes	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.	8 □	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 1. Yes
		E QUESTIONS	OF THES	PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS
hall be assessed ho files more than	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	Employing Office: Termination Termination Date:	Officer or Employee	Filer Status Member of the U.S. State: Ca change Properties P
TH 3: 57 CLERK SENTATIVES WE SHAPIVES	2012 APR 27 PH 3: 57 U.S. HOUSE OF REPRESENTATIVES (Office Use Only) IVES	Daytime Telephone: 202-225-8164	Daytime 1	Name: Anna Codes Shoo
'ERED' " 5	"AND DELIVERED" of 5	Form A For use by Members, officers, and employees	MENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT
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Page Z of S

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.	benefits received under the Social Se	curity Act.
Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
Examples: State of Maryland Civil Way Boundtable (Civil Way Boundt	Legislative Pension	\$9,000
Ontario County Board of Education	Spouse Salary	NA
County of San Mates - () Libraria	legislative Parsion	81.PM 11#
		(arass)
	Board of Specialisms	(
	,	
		2

Name LAN (Joseph

Page 3 ئ

BLOCK A

Asset and/or Income Source

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

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

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 value at the end of the reporting period. the name of the institution holding the accou ment accounts which are not self-directed, pro account that exceeds the reporting thresholds. For retire-For all IRAs and other retirement plans (such as 401(k)

For rental or other real property held for investruide a complete address.

tion in Block A. ness, the nature of its activities, and its geogra that is not publicly traded, state the name of For an ownership interest in a privately-held

from, a federal retirement program, including accounts; and any financial interest in, or incom ing \$5,000 or less in a personal checking income during the reporting period); any depo homes and vacation homes (unless there v Exclude: Your personal residence, includin

If you so choose, you may indicate that an income source is that of your spouse (SP) or child (DC), or is jointly held with your spouse (optional column on the far left.

please refer to the instruction booklet. For a detailed discussion of Schedule III requ

Mega Corp. Stock Simon & Schuster 1st Bank of Paducah, KY

For additional assets and unearned income use next bage

S,

Examples:

Value of Asset

BLOCK B

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

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

ing the reporting period.

if the asset generated no income durdisclosed as income. Check "None" gains, even if reinvested, must be

BLOCK C

Dividends, interest, and capital may check the "Tax-Deferred" column. (such as 401(k) plans or (RAs), you that generate tax-deferred income you to choose specific investments <u>or</u> retirement accounts that do not allow Check all columns that apply. For Type of Income

Amount of Income

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

reporting

BLOCK D

\$1,000 in or exchanges (P), sales (S) purchases asset had indicate if the **Fransaction** (E) exceeding BLOCK E

	act	A. L.	1		/ Accounts			Id business did business did business of the busi- raphic loca- raphic loca- raphic total- yor saving or saving or saving the Thrift or dependent (JT), in the quirements,	provide only purit and its
1			1		Г			None >	>
						₹		\$1 - \$1,000	D .
	~	1	<			Indefinite		\$1,001 – \$15,000	,
						6		\$15,001 – \$50,000	,
							×	\$50,001 - \$100,000	П
					×			\$100,001 - \$250,000	П
1								\$250,001 - \$500,000	ה
]				X				\$500,001 ~ \$1,000,000	Ε
]								\$1,000,001 - \$5,000,000	-
								\$5,000,001 - \$25,000,000	_
								\$25,000,001 - \$50,000,000	*
								Over \$50,000,000	-
	7	⋖⊺⋝	4	· r				NONE	
							×	DIVIDENDS	
					\overline{x}			RENT	
				-				INTEREST	
					Γ		×	CAPITAL GAINS	
								EXCEPTED/BLIND TRUST	
				ス				TAX-DEFERRED	
						Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	
	>	<u><</u> ∫,	~	-	T			None	_
		<u> </u>			T			\$1 – \$200	=
					Ī			\$201 – \$1,000	=
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								\$2,501 – \$5,000	<
		1			×			\$5,001 – \$15,000	<u><</u>
					Ī			\$15,001 - \$50,000	≦
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				•	T	×			- -
-					T		-	\$1,000,001 - \$5,000,000	×
					1				×
							S (partial)	an asset is sold, please indicate as follows: (S) (partial) See below for example.	only a portion of

This page may be copied if more space is required

Continuation Sheet (if needed SCHEDULE III—ASSETS AND "UNEARNED" INCOME 8 SP S Remonent Portfolio tidelity CH. Moni Morey Market Oakmark? Trit Your FPA Creasent that Asset and/or Income Source **BLOCK A** rome tund CHAP LINGS Global Class ➣ None 8 \$1 - \$1,000 × O \$1,001 - \$15,000 o \$15,001 - \$50,000 Value of Asset Э \$50,001 - \$100,000 Year-End BLOCK B XXXXX X п \$100,001 - \$250,000 G \$250,001 - \$500,000 I \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 ے \$5,000,001 - \$25,000,000 ㅈ \$25,000,001 - \$50,000,000 _ Over \$50,000,000 NONE **メ×××** DIVIDENDS RENT INTEREST of Income BLOCK C **CAPITAL GAINS** Type **EXCEPTED/BLIND TRUST** TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income) None Amount of Income \$1 - \$200Ξ × \$201 - \$1,000 7 BLOCK D \$1,001 - \$2,500 < × \$2,501 - \$5,000 VI VII VIII IX XXXX \$5,001 - \$15,000 $\overline{\mathsf{x}}$ \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 × \$1,000,001 - \$5,000,000 × Over \$5,000,000 Transaction BLOCK E пοт U

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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 owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a mortgages on personal residences. charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. NOTE: Pending legislation may require Members to report 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

				SP, DC,	
	Los Angeles, California	Wells Fargo Bank	Example: First Bank of Wilmington, DE	Creditor	
	2002	March	May 1998	Date Liability Incurred Mo/Year	
Washington, D.C.	(Regional - not centred)	Mortgage on Residence	Mortgage on 123 Main St., Dover, DE	Type of Liability	
				\$10,001- \$15,000	
	ļ			\$15,001- \$50,000	
		<u> </u>		\$50,001- \$100,000	
			×	\$100,001- \$250,000 D \$250,001-	
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			_	\$1,000,000	
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				\$25,000,001- \$25,000,001-	
				\$50,000,000 T	
	<u> </u>			\$50,000,000	

SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source Example: Mr. Joseph H. Smith, Anytown, Anystate Silver Platter (determination on personal friendship received from Committee on Ethics)
Silver Platter (determination on personal friendship received from Committee on Ethics)
Value \$375