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UNITED S	UNITED STATES HOUSE OF REPRESENTATIVES	S	Form A			Page 1 of 9	و ف
2013 FINAN	2013 FINANCIAL DISCLOSURE STATEMENT	For Use by	For Use by Members, Officers, an	d Employees	LEGISLATIVE RESOURCE CENTER	URCE CENTER	
,					2014 MAY 12 PM 5: 34	PM 5: 34	
Name: Cheryl L. Bustos	yl L. Bustos	Daytime Telephone: 202-225-5905	hone: 202-225-5905		OFFICE OF THE CLERK J.S. HOUSE OF REPRESENTATIVES (Office Use Only)	F THE CLERK REPRESENTATIVES Office Use Only)	R
FILER STATUS	Member of or Candidate for State: IL  U.S. House of Representatives District: 17		Officer or Employee	or Employing Office:			
REPORT TYPE	2013 Annual (Due: May 15, 2014)	Amendment		Termination Date:	Date:		1
PRELIMIN,	PRELIMINARY INFORMATION - ANSWER EACH OF TI	THESE QUESTIONS					
A. Did you, you a. Own any Pend of the b. Make mon asset during	<ul> <li>A. Did you, your spouse, or your dependent child:         <ul> <li>a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or</li> <li>b. Make more than \$200 in uneamed income from any reportable asset during the reporting period?</li> </ul> </li> </ul>	Yes No	F. Did you have any repo outside entity during the year up through the date	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	arrangement with an the current calendar	V	
B. Did you, you exchange any s exceeding \$1,0	B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?	¥8.	G. Did you, your spouse, reportable gift(s) totaling source during the reports	se, or your dependent child receive any ing more than \$350 in value from a single xting period?	hlid receive any slue from a single	Y   No []	
C. Did you or you honoraria, or pen reporting period?	C. Did you or your spouse have "cemed" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	* * * * * * * * * * * * * * * * * * *	H. Did you, your spouse, reportable travel or reint \$350 in value from a sing		hild receive any totaling more than reporting period?	*	
D. Did you, you liability (more the	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	** ** ** ** ** ** ** ** ** ** ** ** **	I. Did any individual or org lieu of paying you for a sp reporting period?	<ol> <li>Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period?</li> </ol>	onation to charity in or article during the	¥	
E. Did you hold the current cale	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of fling?	¥ <sub>8</sub>	ATTACH THE C	ORRESPONDING	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	OU ANSWER "Y	ES"
IPO, EXC	EXCLUSION OF SPOUSE, DEPENDENT, O	OR TRUST INFORM	INFORMATION - ANSWER	EACH OF	THESE QUESTIONS	SNC	
IPO - Did you p	IPO – Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answ the Committee on Ethics for further guidance.	Public Offering during the n	sporting period? If you as	up sid od "sey" berewen	rered "yes" to this question, please contact	Yes   No [	
TRUSTS Det this report detail	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 that benefits you, your spouse, or dependent child?	ttee on Ethics and certain o	ther "excepted trusts" ne	ed not be disclosed. Ha	ive you excluded from	Yes   No [	
EXEMPTION -	EXEMPTION - Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or detests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	ed" income, transactions, o h the Committee on Ethics.	r kabilities of a spouse or	dependent child becau	pendent child because they meet all three	Yes   No [	

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Biogen Com	Apple Com		Mississippi Value Credit Union accounts	(value determined at retirement)	IL Municipal Retirement Fund	ABC Hedge Fund X	Entemples: Sincon & Bohaster	t SP Integra Cosp. Black IBF	production of income and with a filer method value of incomes that gamented more than 1000 in the end of the reporting period, and (b) any other reportable seased or source of income that gamented more than 5200 in 'unearned' income that gamented more than 5200 in 'unearned' income during the year.  Provides complete number of stocks and mutual funds (d) not use only ticker symbols).  For all IffAls and other retirement plans (such as 601(0) plans) provides the value for each sease had in the account that secent the reporting threshold.  For bank and ether cash accounts, total the amount in all interest-bearing accounts, 11 the total is over \$5,000, let every financial institution where there is more than \$1,000 in interest bearing accounts.  For nerth and other neal property had for investment, provide a complete address or description, e.g., 'runtial property,' and a city and tiste.  For ner committie interest in a privately-had business that is not publishy brothed, since the name of the business, the nature of the activities, and its geographic location in Back. A.  Exclude: Your personal residence, including second interest in, or income defined them, a federal income during the reporting prolesis) and say francial inferent in, or income defined them, a federal inferent program, including the Thrill Servings Plan.  If you so choose, you may indicate that an asset or income source is that of your space. (SP) or dependent chall (DC), or juintly had with anyone (JT), in the optional column of the linear column and column to the linear column. A requirement, please refer to the instruction backles. A requirement, please refer to the instruction backles.	et and/or Income Source	SCHEDULE A – ASSETS & "UNEARNED INCOME"
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SCHEDOLE A - ASSETS & ONEARNED INCOME.	
Name: Cheryl Bustos	

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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Principal Lifetime 2040 Ftd   Nat	> 20 CO		Asset and/or Income Source Value of Asset
None   S1.91,000   S1,001.415,000   S1,001.415,000   S1,001.415,000   S50,001.410,000   S50,001.410,000   S50,001.410,000   S50,001.410,000   S50,001.410,000,000   S50,000.410,000,000   S50,000.410,000,000   S50,000,001.410,000,000   S50,000,001.410,000,000   S50,000,001.410,000,000   S50,000,000   S50,000,	20 CO		BLOCK Value of A
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Over \$50,000,000   Spouse/DC Asset over \$1,000,000*   MONE	<del> </del>	4	
SpouserDC Asset over \$1,000,000*   NONE		4	
NONE	E	4	
ON/DENDS   RENT   INTEREST   CAPITAL GAINS   EXCEPTED/BLIND TRUST   TAX-DEFERRED   Other Type of Income		╁	
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(Specify: e.g., Partnership Income or Farm Income)			
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Over 85,000,000	8	1	
Spouse/DC Asset with Income over \$1,000,000*	¥		
			BLOCK E

# SCHEDULE B - TRANSACTIONS

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<sub>ame:</sub> Cheryl Bustos
Page 5
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Report any puripositry period dependent cha resulted in a c Exclude times purchase or as a portion of an	Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period of any security or real property held by you, your spouse, or your dependent child for investment or the production of income. Include transactions the resulted in a capital bea. Provide a brief description of an exchange transaction, contained transaction between you, your spouse, or depandent children, or the purchase or sale of your personal residence, unless it generated rental income. If other purchase or sale of your personal residence, unless it generated rental income. If other purchase or sale of your personal residence, unless it generated rental income. If other purchase or sale of your personal residence, unless it generated rental income.		ype of T	Type of Transaction	9	Capital Gain 200	Date (MODAYR) or Quarterly, or 3-	>	<b>w</b>	o		Amount o	of Train	Transaction F a		- :- I	Ξ .
Capital Gains: the 'capital gain tre capital gain	Capital Gains: If a sales transaction resulted in a capital gain in excess of \$250, check the "capital gains" box, unless it was an asset in a tax-deferred account, and discloss the capital gain income on Schedula A.	6 % rchase	le	riial Sale	change	eck Box if C seeded \$200	spations, if	001- 5,000	5,001- 0,000	),001- X0,000	00,001- 50,000	50,001- 10,000	0,001-	000,000		000,000	000,001-
* Column K is 1	* Column K is for asserts selely held by your spouse or dependent child.	Pur	Sal	Par	Exc	Che Exc		\$1,1 \$15					\$50		\$1,0 \$1,0	\$1,0 \$1,0 \$5,0 \$5,0	\$1,0 \$1,0 \$5,0 \$5,0 \$25
SP, DC, JT	Asset																
3p &	Example Mega Corp. Stock			×		×	3/5/13		×								
1	Trex Inc. Cemmon	×					3/26/13	×									
z	Norfolk Southern Corp	×					3/26/13	×									
m	Eng Resources Inc Common	×					3/26/13		×					$\Box$			
C	Cerner Corp Common	×					3/26/13		×								
3	Invesco Small Cap Growth	×					3/26/13	×									
Z	New Perspective Fund F - 2	×					3/26/13		×								
٧	Verizon Communications Inc	×					3/26/13		×								
6	Guggenheim All-Asset Mod Str Fd	:	×				3/27/13		×					Щ			
<u>a</u>	Guggenheim Mid Cap Value Fund A	×					4/05/13		×								
z	Nicholes Fund	×					11/25/13		×								
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G	Guggenhaim Mid Cap Value Fund	×					12/6/13	×									
*	Invesco American Value Fund	×					12/16/13	×									
3	Invesce Small Cap Growth Fund	×					12/16/13	×					<b>.</b>				
6	Growth Fund of America Class	×					12/19/13	×						<u> </u>			
z	New Perspective Fund F-2	×					12/27/13	×						Щ			
9	Principal Lifetime 2040 Fd	×					5/22/13		×								
ס	Principal S&P500 index Inst Fd	×					5/22/13		×								
Z	Nuvsen Mid Cap Growth		×				5/22/13		×				I	<u> </u>			

## SCHEDULE B - TRANSACTIONS

Name: Cheryl Bustos

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							Income Fund of America F-1 (exchanged for Income Fund of America F-2)	Growth Fund of America (exchanged for Growth Fund of America F-2)	Income Fund of America C (exchanged for income Fund of America F-2)	Capital Income Builder F-1 (exchanged for Capital Income Builder F-2)	American Mutual Fund F-1 (exchanged for American Mutual Fund F-2)	American Mutual Fund C (exchanged for American Mutual Fund F-2)	American Century Equity Income Inv Fund	Jenus Overseas Fund	SP Example Mega Corp. Stock	SP, DC, JT Asset	Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, chack the "capital gains" box, unless it was an asset in a tax-deterred account, and disclose the capital gain income on Schedule A.  "Column K is far assets solely held by your spouse or dependent child.	dependent child for investment or the production of income. Include transactions that resulted in a capital loss. Provide a brief description of an exchange transaction. Exclude transactions believen you, your spouse, or dependent children, or the purchase or sale of your personal revisioned, unless it generated nevels income. If only a portion of an asset is said, please choose "perfed sale" as the type of transaction.	Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the
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I															×		Check Box if Cap Exceeded \$200	bital Gain	
							5/24/13	5/24/13	5/24/13	5/24/13	5/24/13	5/24/13	5/22/13	5/22/13	36/13		Monthly, or B- weedly, if applicable	(MODAYR) or Quarterly,	Date
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# SCHEDULE C -- EARNED INCOME

Name: Cheryl Bustos
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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 during the reporting period. For a spouse, list
The source and amount of any honorana; let 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.

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	Kane Side	Approved Teaching Fee	\$6,000
Examples:	State of Manyland	Legislativo Parailan	\$18,000 \$1,000
	Ontario Courty Board of Education	Spouse Salary	) MAX
County of	County of Rock Island, IL	Spouse Salary	N/A

#### SCHEDULE D - LIABILITIES

Name: Cheryl Bustos

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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 your dependent child. Mark the highest amount owed during the reporting period. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of reporting period exceeded \$10,000.

"Column K is for liabilities held solely by your spouse or dependent child.

<b>-</b>	<b>-</b>	Ţ		8 8							
Wells F	Citi Mortgage	Mississ	Example	П П							
Wells Fargo Home Mortgage	пдаде	Mississippi Valley Credit Union	First Bank of Wilmington, DE	Creditor							
Dec 2012	Apr 2004	Nov 2009	5/96	Date Liability Incurred MO/YR							
Mortgage on personal residence, Washington, DC	Mortgage on personal residence, E. Motine, IL	Home equity line of credit	Hortgage on Rental Property, Dover, DE	Type of Liability							
				\$10,001- \$15,000	>						
		×		\$15,001- \$50,000							
	×			\$50,001- \$100,000	n						
×			×	\$100,001- \$250,000	0						
			m	Amount of Liability							
				\$500,001- \$1,000,000	77	ğ					
				\$1,000,001- \$5,000,000	6	Beilley					
				\$5,000,001- \$25,000,000	Ŧ						
				\$25,000,001- \$50,000,000	_						
				Over \$50,000,000	٠.						
				Over \$1,000,000* (Spouse/DC Liability)	*						

#### **SCHEDULE E - POSITIONS**

Position	Name of Organization
None	

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								NOTE NUMBER
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