Yes No No	child because	sactions, or liabilities of a spouse or dependent child because	" income, trans	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilitie they meet all three tests for exemption?
Yes No	trusts" need not	s of Official Conduct and certain other "excepted pouse, or dependent child?	on standards	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct 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?
UESTIONS	FTHESE Q	MATION — ANSWER EACH OF THESE QUESTIONS	TINFORI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
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	S D	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.
Yes No	arrangement with	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.
Yes No	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	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.
Yes No	d receive any n the reporting ₃)?	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$305 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.
Yes No	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 \$305 and not otherwise exempt)? If yes, complete and attach Schedule VI.	₹	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? Yes If yes, complete and attach Schedule I.
		E QUESTIONS	OF THES	PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS
A \$200 penalty shall be assessed against anyone who files more than 30 days late.	A \$200 penah against anyon 30 days late.	ee Termination Date:	Officer or Employee	Filer Status Member of the U.S. State: CA House of Representatives District: 47 Report Type Annual (May 15) Amendment
2008 MAY 15 AM 9: 38 OFFICE OF 1/E ULEVILLES I.S. HOUSE OF ORGANISSE OF THESE	2008 MAY 15 AM 9: 38 U.S. HOUSE OF THE DIEGICAL OF THE DIEGICAL DI	202-225-2965 (Daytime Telephone)		LORETTH SANCHEZ
HAND DELIVERED	HAND I	Form A For use by Members, officers, and employees		UNITED STATES HOUSE OF REPRESENTATIVES 2008 FINANCIAL DISCLOSURE STATEMENT For 2007 Calendar Year Reporting Period

Name
LORETTA
SANCHEZ
Page 1 of 7

SCHEDULE II — PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e. speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. A green envelope for transmitting the list is included in each Member's filing package.

					Screen Actors Guild (SAG)	Motion Pictures Players Welfage Fund	The Closer TU sevies - given to TV appearance	Providence Speed and Hearing Cont	Real Time with Bill Maker - given to	Examples: XYZ Magazine Associations, Washington DC Si		
							TV appearance	rd	TV appressance	Speech Article	Activity	
							08.05-07		05-18-67	Aug. 13, 2007	Date	
					569,25	189.75			\$ 500 -	\$500	Amount	1

MORGAN STAPLEY (1RA)	CROWELL JUSE DOM (IRM)	-SHVINGS & CHECKING	OC TEACHERS CREOT UNION		Examples:	SP, SP Mega Corp. Stock	reporting interstions. For retirefrict plants that are not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active 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 additional information, see the instruction booklet. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by you or your spouse's child, parent, or sibling, any deposits totalling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. 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 (JT), in the optional column on the far left.	provide the value and income information on each asset in the account that exceeds the reporting threshold For retirement plans that are	Identify (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 asset or sources of income which generated more than \$200 in "unearned" income during the year. For rental property or land, provide a complete address. Provide full 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).	Asset and/or Income Source	BLOCK A
×	*	×	×	×	Indefinite	×	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$500,001 - \$1,000,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000		Indicate value of asset 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 during the reporting year and is included only because it generated income, the value should be "None."	Value of Asset	BLOCK B
×	×	×	×	×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: For Example, Partnership Income or Farm Income	me)	Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA." For all other assets <i>including all IRAs</i> , indicate the type of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during calendar year.	Type of Income	BLOCK C
LOST VALUE TRANSFERRE	INTO THRUE SAVINGS P.	×	×	×	×	×	\$5,001 - \$15,000 \$\\ \$15,001 - \$50,000 \$\\ \$50,001 - \$100,000 \$\\ \$100,001 - \$1,000,000 \$\\ \$1,000,001 - \$5,000,000 \$\\ \$1,000,001 - \$0,000 \$\\ \$1,000 - \$0,000 \$\		For retire not allow ments, y For all o indicate checking Dividen vested, Check "N	Amount of Income	BLOCK D
OLAN	5.					S (partial)	portion of an asset is sold, please indicate as follows: (S) (partial) See below for example. P, S, E	If only a	Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1000 in reporting year.	Transaction	BLOCK E

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name LORGITH SANCHEZ Page 3 of 7

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SCHEDULE IV— TRANSACTIONS

Name LORETTA SANCHET Page 4 of 7

										,	(IRA) LIQUIDATED &	CROWELL, WEEDON (188) MONEY MEKS TE	SP, DC, JT SP Example: Mega Coporation Common Stock (partial sale)	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 rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions	——
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												3		EXCHANGE		ion
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											SAVINGS	SANIAGS		\$1,001- \$15,000	₩	
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														\$50,000,000	<u> </u>	

SCHEDULE V— LIABILITIES

Name LORETTA SANCHEZ Page 5 ot.

cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. 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 business in which you own an interest; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit

				JT C,	2 D	
	H0 31.5	DITEC	Example:			
	STEPHEN SIMMONS BRIXEY III	DITECH CORP	First Bank of Wilmington, Delaware	Creditor		
ARRIBIA, PU, CA	LOAN NOTE ON 1624 VIA	MORTEACE ON 1634 NIA	Mortgage on 123 Main St., Dover, Del.	Type of Liability		
				\$1,001- \$15,000	0	
				\$15,001- \$50,000 \$50,001 -	0 0	
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				\$500,001- \$1,000,000	Ð	Amount of Liability
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				\$5,000,001- \$25,000,000 \$25,000,001		
	+ +		╂-	\$56,000,000 Over \$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 \$122 or less need not be added towards the \$305 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$305 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.

 	 	 _		
		Example: Mr. Joseph H. Smith, Anytown, Anystate	Source	
		Silver Platter (determination on personal friendship received from Committee on Standards)	Description	
		\$325	Value	

SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

Name tuce 1777 SANCHEZ Page 6

or were paid by you and reimbursed by the sponsor. the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor 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 Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$305 received by

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the reported under the Federal Election Campaign Act; travel provided to a

is required.	This page may be conic							ASSOC. MIAH!	HMGRICAN SHIPBUILDING	noycrott Corporation	Examples: Chicago Chamber of Commerce	Source
r more space is require								41 W 10 / 10. 9 8 / 10	11 /21 2-1	Aug. 6–11		Date(s) City
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								in S	Y	_	Food? Was a Family Member Included	Campaign Act; travel provided to a
							18	R Lays	None	at sponsor's expense		Act; travel provided to a

SCHEDULE VIII—POSITIONS

Name LORGTTA SANCHEZ

Page 7 of 7

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 non profit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities; and positions solely of an honorary nature.

Position	Name of Organization
TRUSTEE	CHAPMAN UNIVERSITY ORANGE

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an 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

_		_	 		_
				Date	
				Parties To	
				Terms of Agreement	