more than 30 days late.		Termination Date:	☐ Termination	☐ Amendment	Annual (May 15)	Report Type
be assessed against anyone who files		ă	Employee	Uves District: 4	House of Kepresentatives	Status
A \$200 penalty shall		Or Employing Office:	Officer Or	State: AZ	✓ Member of the U.S.	Filer
U.S. HOUSE OF TOP NESS (OTTOW) VES	U.S.H	(Daytime Telephone)		(Full Name)	(Fui	
10 - 10 FI 1: 20 FI 1: 20	71	202-225-4065		Edward L. Pastor	Edwaro	
O DA LOO	2 0				`	
	ployees	For use by Members, officers, and employees		ISCLOSURE STATEM	CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT	CALENDAR
Trans	e 1 or / = 1	FORM A Pag	ATIVES	F REPRESENT	UNITED STATES HOUSE OF REPRESENTATIVES	UNITED
HAND DE VERE	HA					

< 7 EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS ≓ PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS If yes, complete and attach Schedule V. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Did you, your spouse, or a dependent child receive "unearmed" income of more than \$200 in the reporting period or hold any reportable asset worth If yes, complete and attach Schedule It. 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 IV. If yes, complete and attach Schedule III. you for a speech, appearance, or article in the reporting period? Did any individual or organization make a donation to charity in lieu of paying If yes, complete and attach Schedule I. more than \$1,000 at the end of the period? ğ 8 **\$ ≼ 3** < Z O S 중 S 중 < K ≤ × **≦** VIII. current calendar year? 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)? Each question in this part must be answered and the appropriate Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$360 If yes, complete and attach Schedule IX. Did you have any reportable agreement or arrangement with an outside If yes, complete and attach Schedule VIII. Did you hold any reportable positions on or before the date of filing in the If yes, complete and attach Schedule VII. If yes, complete and attach Schedule VI. schedule attached for each "Yes" response. from one source)? **₹ ¥** ¥**05** 욯 < < [.,] 8 Š ö 중

Exemptions	Trusts-
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.	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?
Yes No 🗸	Yes ☐ No ✔

SCHEDULE I - EARNED INCOME

Name Edward L. Pastor

Page 2 of 7

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 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
US House of Representatives	Salary	\$171,766
AZ Elected Officials' Retirement System	Pension	\$27,249
AZ State Retirement System	Spouse Pension	\$35,600
Social Security Administration	Pension	\$27,263
Social Security Administration	Spouse Pension	\$20,600

SCHEDULE
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SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	IE Name Edward L. Pastor	. Pastor		Page 3 of 7
•	BLOCK A	вгоск в	вгоск с	вгоск р	BLOCK E
ASS Identify (a) ear value exceedil reportable ass "unearmed" in	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 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.	Year-End Value of Asset At close of reporting year. If you use a valuation method other than fair	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income	Amount of Income For retirement accounts that do not allow you to choose specific investments or that generate tax- deferred income (such as 401(t) plans or iRAs), you may check the	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in
Provide complete For all IRAs and ((i.e.,plans in white investments), pre reporting threshe only the name of reporting period.	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.	market value, please specify the method used. If an asset was soid and is included only because it is generated income, the value should be "None."	(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.	"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	reporting year.
For rental or o	For rental or other real property held for investment, provide a complete address.			or gellerated.	
For an ownership in state the name of the location in Block A.	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.				
Exclude: You (unless there v \$5,000 or less in, or income of Savings Plan.	Exclude: Your personal residence, including second homes and vecation 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.				
If you so choo spouse (SP) or optional colun	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.				
SP	Aviva Life & Annuity Co (cash value)	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
	Aviva Life & Annuity Co Des Moines, IA (cash value)	\$50,001 - \$100,000	DIVIDENDS	\$201 - \$1,000	
	Congressional Federal Credit Union Account (cash only)	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
SP P	Desert Schools FCU (cash only)	\$1,001 - \$15,000	INTEREST	\$1,001 - \$2,500	
SP	Desert Schools FCU CD (cash only)	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	
<u>8</u>	Desert Schools FCU IRA (cash value)	\$1,001 - \$15,000	INTEREST	\$1,001 - \$2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME SP SP Thrift Savings Plan Washington DC Residential Lot, Guadalupe, AZ Nationwide Retirement Services (457 Plan not self directed) directed) Met Life Annuity (not self directed) Met Life Annuity (not self Marisol Federal Credit Union (cash only) \$1,001 -\$15,000 \$100,001 -\$250,000 \$1,001 -\$15,000 \$500,001 -\$1,000,000 \$1,001 -\$15,000 \$15,001 -\$50,000 Name Edward L. Pastor N N N N N N INTEREST INTEREST INTEREST N N N N N N \$2,501 - \$5,000 \$1 - \$200 \$201 - \$1,000 Page 4 of 7

SCHEDULE V - LIABILITIES

Name Edward L. Pastor

Page 5 of 7

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 all or part of it is rented out); loans secured by automobiles, household furniture, 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 if the balance at the close of the preceding calendar year exceeded \$10,000. NOTE: Pending legislation may require Members to report mortgates on personal residences.

	Simisava			
\$15,001 - \$50,000	Mortgage on 649 C St #304,	Mar 1995	Wells Fargo Bank, Des Moines, IA	JT
\$15,001 - \$50,000	Mortgage on 1015 W Campbell Ave, Phx, AZ	Dec 1997	Washington Mutual Bank, Milwaukee, Wl	JT
Amount of Liability	Type of Liability	Date Liability Incurred	Creditor	SP, DC, JT

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Edward L. Pastor Page 6 of 7

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 spouse or dependent child that is totally independent of his or her relationship to you. 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 sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under 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

Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family 7 Food? Member Included? (Y/N) (Y/N)	Days not at sponsor's expense
The Aspen Institute	Feb 22-27	Feb 22-27 Phx-Puerto Rico-Phx	~	Y	4	None
The Aspen Institute	Aug 15-20	Aug 15-20 Phx-Calgary, Canada-Phx	~	~	~	None

SCHEDULE VIII - POSITIONS

Name Edward L. Pastor

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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 any 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
Member Congressional Hispanic Caucus Washington, DC
Member Congressional Hispanic Caucus Institute Washington, DC