	₹ \	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.	y other assets, "unearned" inco xemption? Do not answer "yes	1	Exemptions-	
	₹	Yes []	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?	sts" approved by the Committee ils report details of such a trust	Details regarding "Qualified Blind Trudisclosed. Have you excluded from the	Trusts-	
		TIONS	ION ANSWER EACH OF THESE QUESTIONS	OR TRUST INFORMAT	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER	XCLUSION C	m
					If yes, complete and attach Schedule V.	If yes, complete	
	priate	and the appro	Each question in this part must be answered and the appropriate	bility (more Yes V No	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 IX.		if yee, complete and attach Schedule IV.	if yes, complete	
	Yes No Y		Did you have any reportable agreement or arrangement with an outside IX. entity?	ny Yes ✓ No	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting		۱۸
			If yes, complete and attach Schedule VIII.		If yes, complete and attach Schedule III.	If yes, complete	
	□ 8 €	3	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes V 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 more than \$1,000 at the end of the period?		■.
			If yee, complete and attach Schedule VII.		If yes, complete and attach Schedule II.	If yes, complete	
	Yes No 🔇	ð	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$350 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?		
			if yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.	If yes, complete	Г
	Yes No 🗸		Did you, your apouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)?	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?		<u>.</u>
			JESTIONS	REACH OF THESE Q	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	RELIMINARY	-
	uaya	late.		lment ☐ Termination	Annual (May 15) Amendment	Type (
		more than 30 day	Termination Date:				
	against	be assessed against	Employee	District: 04	House of Representatives	gn	
(7)	ty shall	A \$200 penalty shall	Employing Office:	OR	Member of the U.S. State:		
	Only)	(Office Use	(Daytime Telephone)		(Full Name)		
	PH 1:28	2012114Y -9 PH 1:28	202-225-6416		Peter A. Defazio		
Terk	OURCE CENTE	EC CLITIVE RESOURCE CENTER					
RED	JELIVE	HAND DELIVERED	FORM A Page 1 of 6 For use by Members, officers, and employees	ESENTATIVES ESTATEMENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT	UNITED ST.	
			ł				7

SCHEDULE I - EARNED INCOME	Name Peter A. Defazio		Page 2 of 6
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 exceedin \$1,000.	urce (other than the filer's current employment se and amount of any honoraria; list only the so	yment by the U.S. Government) totaling \$200 or more the source for other spouse earned income exceeding	ng \$200 or more ncome exceeding
Source C	Туре	Amount	
City of Eugene Oregorn spous	spouse salary	n/a	
US Congress self salary	alary	\$174,000	

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m Name Peter A. Defazio Page 3 of 6

	BLOCK A	BLOCK B	BLOCK C	BLOCK D
ASSE identify (a) say a fair market \(\) any ot generated mo	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 "unearned" income during the year.	Year-End Value of Asset at close of reporting year. If you use a valuation method other	Type of income Check all columns that apply. For redrement accounts that do not allow you to choose specific investments or that	Amount of income For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or
Provide comp symbols.)	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	than fair market value, please specify the method used. If an	generate tax-deferred income (such as 401(k) plans or IRAs), you may	(Sucri as evital plans or iRAs), you may check the "None" column. For all other assets, indicate the category
For all IRAs and self-directed (i.e. self-directed, to self exercised, to self asset held in the retirement account of the institution reporting period.	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 was sold and is included only because it is generated income, the value should be "None."	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	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
For rental or o	For rental or other real property held for investment, provide a complete address.		period.	Sandianor.
For an owners publically trad activities, and	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 vacation home	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting			
self	Selco Credit Union	\$1,001 - \$15,000	None	
self	Wright Patman FCU	\$1,001 - \$15,000	INTEREST	\$1 - \$200
self	Oakmark Select Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200
self	Bank of New Zealand	\$1,001 - \$15,000	INTEREST	\$1 - \$200
self	ira Schnitzer Steel	\$1,001 - \$15,000	None	
self	ira antigenics inc	\$1 - \$1,000	None	

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	IE Name Peter A. Defazio	Defazio		Page 4 of 6
, Lr.	residence Springfield Oregon	\$250,001 - \$500,000	None		
, TL	1/2 ownership 53880 Pine Grove Lapine Oregon	\$50,001 - \$100,000	None		
Ľ T	rental 335 Anakiwa Drive Anakiwa NZ	\$250,001 - \$500,000	RENT	\$5,001 - \$15,000	
JT	1/4 share rental 36 Hempleman Drive Akaroa NZ	\$50,001 - \$100,000	RENT	\$2,501 - \$5,000	
SP	pacific cascades FCU	\$1,001 - \$15,000	INTEREST	\$1 - \$200 =	
SP .	IRA Oakmark Equity Income	\$15,001 - \$50,000	n/a *	n/a	
SP .	Sentinel Balanced	\$50,001 - \$100,000	DIVIDENDS/CAPI TAL GAINS	\$1,001 - \$2,500	·
SP .	Bank Of New Zealand	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000 🐧	
SP ,	deferred comp ING fixed	\$250,001 - \$500,000	INTEREST	\$1,001 - \$2,500	
SP ,	deferred comp Euro Pacific Growth	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	deferred comp ING Templeton Global Bond Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	S partial Total Value (a.K.) Mid Cale
SP	deferred comp ing PIMCO total return	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	deferred comp ing fidelity contrafund	\$15,001 - \$50,000	DIVIDENDS	\$2,501 - \$5,000	
SPNOW	deferred comp ING Vnguard mid cap	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	ਚ

SCHEDULE IV - TRANSACTIONS

Name Peter A. Defazio

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Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, 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 rented out. If only a portion of an asset is sold, please so Indicate (i.e., "partial sale"). See example below.

DC,	A	Type of	Capital Gain in Excess	Data	Amount of Transaction
SP	deferred comp ING Templeton Global Bond	S Particul	N/A	6/17/2011	\$1,001 - \$15,000
SP	deferred comp ING Vnguard mid cap	7	AN	6/17/2011	\$1,001 - \$15,000
self	Oakmark Select Fund	ס	N/A	monthly	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

Name Peter A. Defazio

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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 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.

SP, DC,	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
Jī	Wells Fargo	60/9/5	mortgage principal residence	\$100,001 - \$250,000
5	wells fargo	4/1/10	mortgage on 1/2 half share 53880 Lapine Or	\$15,001 - \$50,000
与	Bank Of New Zealand	3/15/01	1/4 share mortgage 335 Anakiwa Anakiwa NZ	\$15,001 - \$50,000
JT	Bank Of New Zealand	3/18/03	Mortgage rental property 335 Anakiwa Anakiwa NZ	\$50,001 - \$100,000