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SCHEDULE I -- EARNED INCOME

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.

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.	ts received under the Social Se	eurity Act.
Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
Examples: State of Maryland	Legislative Pension	\$9,000
-	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
State of Florida, House of Regresentatives, Tallahassee Florida	Salary	\$ 35,035.78
	- Annual	
	Transport of the state of the s	

Name David Rivera Page 3 of		
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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.

Conduct. A green envelope for nansmitting the list is included in each weither a lining pairings.	o maig paorago.		
Source	Activity	Date	Amount
Association of American Associations, Washington, DC	Speech	Feb. 2, 2009	\$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2009	\$500
ZOZE			
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each asset in the account that exceeds the reporting threshold. For retirement plans 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 spouses, or by you or your spouse's child, parent, or sibling; any deposits totalling \$5,000 or less in personal savings accounts; and 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.	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 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), and the value and income information on
None > \$1 - \$1,000 □	BLOCK B Value of Asset 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."
\$1,001 - \$15,000	BLOCK B Value of Asset 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."
\$15,001 — \$50,000	Value of value of value of year. If year than other than pecify the let was sold dis included income,
\$50,001 - \$100,000 m	Nature line line incorr
\$100,001 - \$250,000 To	BLOCK B Value of Asset a slue of asset a sear. If you use her than fair mathod usity the method uwas sold during the included only ncome, the value
\$250,001 – \$500,000 [©]	CKI ass
\$500,001 - \$1,000,000 x	B use ring only value
\$1,000,001 - \$5,000,000	The use at the use the
\$5,000,001 - \$25,000,000	BLOCK B Value of Asset value of asset at close of a valuation is a valuation is included only because income, the value should be value in the value of the val
\$25,000,001 - \$50,000,000	se valid
Over \$50,000,000	be in the
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DIVIDENDS	Type of i Check all columns retirement plans or not allow you to investments, you mall other assets in indicate the type of ing the appropri Dividends and interested, should be Check "None" if as ate any income duri
RENT	Type of Type of ck all column ement plans of allow you to stiments, you mother assets in cate the type of the appropriated and into ted, should be sck "None" if as any income du
INTEREST AND ADDRESS OF THE ADDRESS	BLOC Type of I column It column It plans ou v you to nts, you m assets in the type of appropr s and into hould be fone" if as
CAPITAL GAINS	BLOC BLOC
EXCEPTED/BLIND TRUST	Income s that appropriate appropriate appropriate appropriate appropriate appropriate box steet, ever listed as in grading as set did no ing calend
··	Income s that apply accounts the choose span write "Na chuding all income by a tate box the listed as indicated as indicat
Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	ne apply, may have apply, may have apply all 1 a
(opcony, i or shamping) i action only income of i anni incomey	BLOCK C Type of Income 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.
None -	For net met indicate ches or g
\$1 - \$200 =	Amous For retirement pl not allow you to ments, you may for all other ass indicate the ca checking the a Dividends and vested, should Check "None" if or generated.
\$201 - \$1,000	who other than the terming stands
\$1,001 – \$2,500	ment you no ner as the
\$2,501 - \$5,000 <	BLC plan plan plan di in recate appre
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\$15,001 - \$50,000 ≦	BLOCK D sunt of Inc. t plans or acce to choose sp any write "NA" assets, includ assets, includ aster, includ to category of appropriate ad interest, e ild be listed if no income
\$50,001 - \$100,000 ≦	BLOCK D Amount of Income ment plans or accounts you to choose specific ou may write "NA" for her assets, including a the category of inco the appropriate box is and interest, even should be listed as i tone" if no income was ated.
\$100,001 - \$1,000,000 \(\sigma\)	BLOCK D Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, including all IRAs, indicate the category of income box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.
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Over \$5,000,000 ≚	סדייע איזיס

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example. See below for as follows: please indicate asset is sold,

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name David Rivera Page 5 of 9

Contin	Continuation Sheet (II heeded)																		١.									L	ŀ		
<u> </u>	BLOCK A Asset and/or Income Source				≲	=	e e e 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등	BLOCK B Year-End	BLOCK B Year-End Value of Asset	ĕ							o _	BLOCK C Type of Income	Type			>	3	our E	₹ %	BLOCK D	<u> </u>	BLOCK D Amount of Income	(p		
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SCHEDULE IV- TRANSACTIONS

Name David Rivera

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											U.S. Savings Bonds	<u>_</u>	Time Warrer Inc. stock	Terremark stock	Mastec stock	SP Example: Mega Coporation Common Stock (partial sale)	SP, DC, JT Asset	resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (<i>i.e.</i> , "partial sale"). See example below. Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that
												1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				10 Sec. 1025		PURCHASE	Type of Transaction
											X	X	X	X	X	×		SALE	Type ansac
																		EXCHANGE	tion
											×	×	×	×	×			Check Box if Capital Gain Exceeded \$200)
										:	12-21-10	11-10-10	10-16-10	12-21-10	12-21-10	10-12-09		(MO/DAY/YR) or Quarterly, Monthly, or Bi-weekly, if applicable	Date
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SCHEDULE V- LIABILITIES

Name David Rivera

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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 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 cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

١					۶	Amount of Liability	of Lia	Ş Ş Ş		
SP			0	C	D	ग्र	O (12	00 -	
ĦŖ.	Creditor	Type of Liability	\$10,001- \$15,000	\$15,001- \$50,000 \$50,001-	\$100,000 \$100,001-	\$250,000 \$250,001- \$500,000	\$500,001- \$1,000,000	\$1,000,001 \$5,000,000	\$5,000,001 \$25,000,00 \$25,000,00	\$50,000,00 Over \$50,000,00
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	100 mg/s	12.75 12.75	×	96.			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
	Il pana Meding and/or Contingent Liability/Loan	Contingent Liability/Loan		1256 P	×		1,74,74	25 (1) 26 (2) 26 (2) 26 (3) 26 (3)	Ú,	1986
	- Repaid in Full in 2010	-Incurred in installments		[interior Personal		1	7/3/1 6/3/3		81/2/4
	GMAC Mortgage, Water 100, Iowa	Murtsese on Italianame, FL		Tenange William	×		100, 100, 100			
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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 \$134 or less need not be added towards the \$335 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$335 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

 	 			سوسه	
		ス ア	Example: Mr. Joseph H. Smith, Anytown, Anystate	Source	
		Z A	Silver Platter (determination on personal friendship received from Committee on Standards)	Description	
		て一ア	\$345	Value	

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SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

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 Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$335 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

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

Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Number of days not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	z	z	Z	None
Roycroft Corporation	Aug. 6–11	DC—Los Angeles—Cleveland	Υ	Υ	Υ	2 Days
V)み	NA	NA	∇ Ω	NA	2/ P	NA
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SCHEDULE VIII—POSITIONS

Name David Rivera

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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,

zations); and positions solely of an honorary nature. Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organi-

Position	Name of Organization
State Legislator	Florida House of Representatives, Tallahasser, Florida
	1 :

SCHEDULE IX—AGREEMENTS

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

Date	Parties To	Terms of Agreement
20-11	11-D2 State of Florida Retirement System	Retirement Plan