2003 2325 2965 2009 MAY I L PM L: LS 2009 MAY I L PM L: LS 2009 MAY I L PM L: LS J.S. HOUSE OF REPRESENTATIVES Office: A \$200 penalty shall be assessed against anyone who files more than mination Termination Date: ONS A \$200 penalty shall be assessed against anyone who files more than of the reporting period (i.e., aggregating more to otherwise exempt)? In to otherwise exempt)? In the reporting period (i.e., aggregating more to otherwise exempt)? In the and attach Schedule VIII. In this part must be answered and the riate and attach Schedule IX. ANSWER EACH OF THESE QUESTIONS Stuct and certain other "excepted trusts" need not the penalty response. ANSWER EACH OF THESE QUESTIONS Stuct and certain other "excepted trusts" need not the penalty of dependent child because the on Standards of Official Conduct. The provided trusts of the penalty of the	ring Office: TIONS TIONS TIONS TIONS Your spour spour and not office and your spour any percent and plete and p	Daytime To Daytime To Officer or Employee No N	Name: Lore error Sanctive Care Sanctive Care C
HAND DELIVERED	Form A For use by Members, officers, and employees	MENT	U. IITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT
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1624 NIA BERIBA	CON CRESSIONAL CIREDIT HOOK	- savings & checking	7	15TS CHOOLS CREDIT UNION		Examples:	SP Mega Corp. Stock	reporting mesholo. 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 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	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>i.e.</i> , plans in which you have the power, even if not exercised, to select the specific investments).	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 cental property of	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 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$0,000 - \$0,000 - \$0,000 \$25,000,001 - \$50,000,000		If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	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.	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	ne)	ing 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.	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 including all IRAs, indicate the type of income by chock.	Type of Income	BLOCK C
×	×	*		×	×	X	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000		Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.	For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, <i>including all IRAs</i> , indicate the category of income by checking the appropriate hox helps	Amount of Income	BLOCK D
							S (partial)	portion of an asset is sold, please indicate as follows: (S) (partial) See below for example. P, S, E	If only a	exchanges (E) exceeding \$1000 in reporting year.	asset had purchases (P), sales (S), or	Fransaction	BLOCK E

SCHEDULE V— LIABILITIES

Name LORETTA SANCHEZ Page 2 of 5

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.

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7 S E	ΰ	
Example: First Bank of W DITECH CORP STEPIHEN S,		,
Creditor Example: First Bank of Wilmington, Delaware DITECH CORP STEPIHEN S, BRIXES III		
Mortgage on 123 Main St., Dover, Del. Mortgage on 123 Main St., Dover, Del.		
\$10,001- \$15,000	Œ	
\$15,001- \$50,000	0	
\$50,001- \$100,000 \$100,001-	D	
× \$100,001- \$250,000 \$250,001-		Amount of Liability
\$500,000 \$500,001	=	nt of L
\$1,000,000 \$1,000,001-	H D	iability
\$5,000,000 \$5,000,001-	_	Y
\$25,000,000 \$25,000,000 \$50,000,000	۱- ۵	
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SCHEDULE VI— GIFTS

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.

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. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	\$345
		-

SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed 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 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

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 a

spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	City of Departure—Destination— City of Return	Lodging?	Food? (Y/N	Was a Family Member Included? (Y/N)	Number of days <u>not</u> at sponsor's expense
	Mar. 2	DC—Chicago—DC	z	Z	2	None
Roycroft Corporation	Aug. 6–11	DC—Los Angeles—Cleveland	Υ	Y	Υ	2 Days
TEMPLE UNIVERSITY	Oct 14 -15	AS-CARIABO-BAR ATMAS	Б	د	Z	Q
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SCHEDULE VIII—POSITIONS

THE LORETTA SANCHEZ

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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
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