To: Ethics Committee Staff

2012 DEC 31 AM 10: 41

From: Congressman-Elect Bill Foster (IL-11)

Bill Faster

COMMITTEE ON ETHICS

Re: Amended Filing in response to your letter dated December 3, 2012 (copy enclosed)

Please find enclosed:

- 1) An amended copy of page 1 of the financial disclosure form that includes my name and telephone number. This information was included on the cover page of my original submission but inadvertently not copied onto page 1.
- 2) An amended copy of page 3 of the financial disclosure form that clarifies that the promissary note from the sale of my interest in ETC Inc. is in fact payable by ETC Inc.

If you have any questions, please do not hesitate to contact me.

Bill Foster

December 20, 2012

2013 JAN -2 PM 5: 18

OFFICE OF THE CLERK

№	% 	lependent child	liabilities of a spouse or dependent child the Committee on Ethics.		arned income is you have fin	er assets, "une wer "yes" unle	m this report any oth temption? Do not ans	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with	EXEMPTION because they
No No	Yes	not be	endent child?	s and certain other "ex spouse, or a dependen	ittee on Ethica ing you, your a	d by the Comn n a trust benefi	Blind Trusts" approve report details of suci	TRUSTS—Details regarding "Qualified Bilnd 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 a dependent child?	TRUSTS-De disclosed. Ha
S	QUESTION	OF THESE	ANSWER EACH OF THESE QUESTIONS	1	TINFORM	OR TRUS	DEPENDENT,	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLUSIO
	response.	each "Yes"	hedule attached for each "Yes" response	ppropriate sched	and the a	e answered	this part must b	Each question in this part must be answered and the appropriate sc	
No 	Yes	1 \$5,000 from	e compensation of more than \$5,000 from the two prior years? and attach Schedule VI.	VI. Did you receive com a single source in the tw if yes, complete and at	₹	Yes	nid have any report- reporting period?	III. 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 III.	III. Did you, you able llability (mx If yes, complet
8 □	6	urangement	ry reportable agreement or arrangement sty? attach Schedule V.	V. Did you have any rep with an outside entity? If yes, complete and at	§ 🗍	ž S	ild receive "unearned" eriod or hold any the end of the period?	II. 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 more than \$1,000 at the end of the period? If yes, complete and attach Schedule II.	il. Did you, you income of more reportable asset if yes, complet
₹	ğ D	before the date for IMQ years?	ortable positions on or lender year or in the pri- tach Schedule IV.	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	\$ 	₹	ome (e.g., salaries or s reporting period?	 Did you or your spouse have "earned" income (e.g., salaries or ises) of \$200 or more from any source in the reporting period? Yes, complete and attach Schedule I. 	I. Did you or yo less) of \$200 ou If yes, complet
				ANSWER EACH OF THESE QUESTIONS	OF THES	ER EACH	1	PRELIMINARY INFORMATION	PRELIMIN
							in blue or black ink.	in all sections, please type or print clearly in blue or black ink	in all sections,
assessed who files	A \$200 penalty shall be assessed against any Individual who files more than 30 days late.	A \$200 per against an more than	Check If Amendment	Dete of Nav 6, 2012	Date of Election:	Office:	State: State: Latives District: Latives Employing Office:	Candidate for the House of Representatives New officer or employee	Filer
	(Office Use Only)								
				Daytime Telephone:	Daytime		(Bill) Foster	George William (Name: G
Page 1 of	117		B und new employees	FORM B For use by candidates and new employees		ATIVES 31, 201	REPRESENT	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1,2011 - Decomber 31,	UNITED S FINANCIA Period cove

. .

Name George William (Bill) Foster

Page 3 of 5

Aes	BLOCK A Asset and/or Income Source	BLOCK B	BLOCK C	BLOCK D Amount of Income	BLOCK E
Identify (a) set fair market ve (b) any other \$200 in "unea provide a cor funds (do not plans (such a you have the investments) the account that are not sits value at the not publicly the activities, and information, second to parent or sible accounts; and Government of you so choof your spous	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 assets 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), provide the value and income information on 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 spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$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	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 and is included only because it is generated income, the value should be "None."	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 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 the calendar year.	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 by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.	Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
	Promissary note for payments over time arising from sale of interest in Electronic Theatre Controls, Inc. (ETC) Middleton WI.	\$5,000,001 - \$25,000,000	None	NONE	
JT	HSBC Bank Savings Account	\$100,001 - \$250,000	INTEREST	\$201 - \$1,000	
T	Harris Bank Batavia (savings, checking, and money market accounts)	\$100,001 - \$250,000	INTEREST	\$201 - \$1,000	
1.r	Congressional Federal Credit Union (savings and checking)	\$50,001 - \$100,000	INTEREST	\$1 - \$200	
	Northwestern Mutual Insured Bank Deposit IRA	\$50,001 - \$100,000	INTEREST	\$1 - \$200	