	hics. Yes I No	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	his report any other assets, "unearned" is tests for exemption? Do not answer	i	Exemptions	ĺ
	Yes No 🗸	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?	ed Blind Trusts" approved by the Commi uded from this report details of such a tr	Details regarding "Qualific disclosed. Have you exclude the property of the pr	Trusts	
	Yes 🗌 No 🕢	tial Public Offering?	Did you purchase any shares that were allocated as a part of an Initial Public Offering?	Did you purchase any sha	IPO	
	SE QUESTIONS	NFORMATION ANSWER EACH OF THESE	, DEPENDENT, OR TRUST INFORMATION A	IPO and EXCLUSION OF SPOUSE,	O and EXCL	₹
	:		[	If yes, complete and attach Schedule V.	if yes, complete	
	and the appropriate	Each question in this part must be answered and the appropriate	y reportable liability Yes ✔ No ☐	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	Did you, your spou (more than \$10,000	<u>.</u>
		If yes, complete and attach Schedule IX.		If yes, complete and attach Schedule IV.	If yes, complete	
	outside Yes No V	Did you have any reportable agreement or arrangement with an outside IX. entity?	sell, or exchange any uring the reporting Yes \( \subseteq \) No	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?		7.
		If yes, complete and attach Schedule VIII.		If yes, complete and attach Schedule III.	If yes, complete	
	ing in the Yes ✔ No □	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	"unearned" income of eportable asset worth Yes ☑ 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 yes, complete and attach Schedule VII.		If yes, complete and attach Schedule II.	If yes, complete	
	le travel or lan \$350 Yes ☑ No ☐	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)?	to charity in lieu of paying ting period? 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?	Did any individual or you for a speech, a	1.
		If yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.	If yes, complete	İ
	legift in herwise Yes 🗌 No 🗸	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)?	salaries or fees) of \$200 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?	Did you or your spor more from any s	٦.
-		QUESTIONS	ANSWER EACH OF THESE QUESTIONS	PRELIMINARY INFORMATION A	RELIMINARY	민
	more than 30 days late.	Termination Date:	☐ Amendment ☐ Termination	Annual (May 15)	Report Type	
J.	A \$200 penalty shall be assessed against anyone who files	Officer Or Employing Office: U.S. Employee	State: CA  Pe District: 21	Member of the U.S. House of Representative	Filer Status	
_	office the Centar)		(Full Name)	(Full N		
بخ	2013 OCT 29 PM 4: 14	20	ald Nunes	Devin Gerald Nunes		
	LEGISLATIVE RESOURCE CENTER	LEG				
	Page 1 of AND DELIVERED amployees	FORM A Page 1 of A	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT	ATES HOUSE OF AR 2012 FINANCIAL DIS	JNITED ST.	
1						1

## SCHEDULE I - EARNED INCOME

, <del>-</del>

Tulare County Office of Education

Spouse Salary

Name Devin Gerald Nunes

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 exceeding \$1,000. Source Type Amount

1			_		<del></del>										
		_ J	Ę	JT	For a detailed discuinstruction booklet.	If you so choose, you may indic spouse (SP) or dependent child optional column on the far left.	Exclude: Your p (unless there w \$5,000 or less in in, or income de Savings Plan.	For an ownership in state the name of the location in Block A.	For rental or otl a description, e	For all IRAs and each asset held	Provide comple	value exceeding reportable asse "unearned" inc	ASS(		9011FD0FF 111
	WND Books, Inc	Condo, Visalia, CA	Bank of America, Savings Account	Alpha Omega Winery, LLC Rutherford, CA	For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	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.	Exclude: Your personal residence, including second homes and vacation 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.	For an ownership Interest in a privately-held 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 rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and a city and state.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	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.	Asset and/or income Source Identify (a) each asset held for investment or production of income with a fair market	BLOCK A	ב וווי בסטבוס בווס סווברווארט וויסטוור
	Indefinite	\$100,001 - \$250,000	\$1,001 - \$15,000	\$50,001 - \$100,000			neto solety by your spouse or dependent child.	yalue should be "None."  * This column is for assets	the reporting year and is included only because it	specify the method used.	method other than fair	Indicate value of asset at close of reporting year. If	Year-End	вгоск в	Name Devin Gerald Nunes
	Other: Copyright rovalties	RENT	INTEREST	None				G to be a second	as income. Check "None" if the asset generated no income	column. Dividends, interest, and capital gains, even if reinvested must be disclosed	(such as 401(k) plans or IRAs),	For retirement accounts that do not allow you to choose specific investments or that openerate fax-deferred income	Type of Income Check all columns that apply.	вгоск с	rald Nunes
	NONE	\$5,001 - \$15,000	\$1 - \$200	NONE				generated by assets held solely by your spouse or dependent child.		gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned	the appropriate box below.  Dividends, interest, and capital	"Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking	Amount of Income For assets for which you checked	BLOCK D	
										_	reporting year.		Transaction Indicate if asset	BLOCK E	Page 3 of 6

## SCHEDULE V - LIABILITIES

Name Devin Gerald Nunes

Page 4 of 6

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. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: for liabilities held solely by your spouse or dependent child. itabilities of a business in which you own an interest (unless you are personally liable); 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. "This column is Any mortgage on your personal residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances;

JT	SP, DC, JT
Chase Bank	Creditor
Dec 2010	Date Liability Incurred
Mortgage on primary residence, Tulare, CA	Type of Liability
\$100,001 - \$250,000	Amount of Liability

## SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Devin Gerald Nunes Page 5 of 6

spouse or dependent child that is totally independent of his or her relationship to you 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 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 Food? Member Included? (Y/N) (Y/N)	Days not at sponsor's expense
American Enterprise Institute	March 8-11	March 8-11 DC-Sea Island, GA-Fresno,	<b>*</b>	<b>Y</b>	Z	None
FLAD	Oct 6-10	DC-Lisbon-Fresno, CA	Υ .	z	Z	None

## **SCHEDULE VIII - POSITIONS**

Name Devin Gerald Nunes

Page 6 of 6

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
Limited Partner	Alpha Omega Winery