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0 (	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT	SENTATIV TATEMENT	ES	FO use by	FORM A For use by Members, or	Page 1 of 4 fficers, and employees		Z.
	Mike Quigley					2022254061	2012 HAY 10 AM 10: 01	<b>0</b>
	(Full Name)				(D	(Daytime Telephone)		<b>二</b>
	✓ Member of the U.S. House of Representative	IL .	Off Em	Officer Or Employee	Employing Office	g Office:	A \$200 penalty shall	UI VES
	Status House of Representative District: 05	· 65		Employee			be assessed against	
	Report  Annual (May 15)  Amendment		Termination	_	Termination Date:		more than 30 days	
힏	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	ACH OF TH	IESE QU	ESTIONS	S			£
-	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	or Yes ✓ No	No VI.		ur spouse, or a del g period (i.e., aggr	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	table gift in t otherwise Yes No ♥	لــــــ
	If yes, complete and attach Schedule I.			H yes, con	if yes, complete and attach Schedule VI.	Schedule VI.		<u></u>
F	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?	Yes	No 🗸 VII.		Did you, your spouse, or a deport reimbursements for travel in \$350 from one source)?	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)?	table travel Yes No V	
<b>≡</b>	Did you, your spouse, or a dependent child receive "unearned" income of it. more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period?	₹ <b>₹</b>	No \	Did you hold any repor VIII. current calendar year?	d any reportable pundar year?	Did you hold any reportable positions on or before the date of filing in the current calendar year?	ffiling in the Yes No 🗸	<u>,                                     </u>
	r yes, comprete and action accepture in.			n yes, com		Schedule VIII.		
₹		ny Yes ∵	<b>₹</b>		Did you have any reportable a entity?	greement or arrangement with an outside	en outside Yes: No 🗸	
<u>.&lt;</u>	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	Yes V No	<b>ह</b>   	Each on	Each guestion in this part must	part must be answere	part must be answered and the appropriate	
Γ	If yes, complete and attach Schedule V.			schedule	e attached fo	schedule attached for each "Yes" response		L
اصا	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EA	TRUST INF	ORMATI	ON AN	ISWER EA	CH OF THESE QUESTIONS	STIONS	
	Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" ne disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	approved by the port details of st	Committee o	n Ethics and mefiting you,	certain other "e , your spouse, o	excepted trusts" need not be or dependent child?	Yes No ✓	
	Exemptions— Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities because they meet all three tests for exemption? Do not answer "yes" unless you have first consult	her assets, "uner ption? Do not as	amed" incom	e, transactio Inless you h	ns, or liabilities ave first consult	of a spouse or dependent child ted with the Committee on Ethics	hild thics. Yes No √	

## SCHEDULE I - EARNED INCOME

Name Mike Quigley

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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	Туре	Amount
CVB Source	Spouse Salary	N/A

Name Mike Quigley

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Cook County Pension (not self- directed)	College Illinois 529 Plan (Profile for Beneficiaries aged 22 and 22	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 publically 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.	For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.a., 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.	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	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.	Asset and/or Income Source
\$50,001 - \$100,000	\$1 - \$1,000			·		specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	method other than fair market value, please	Value of Asset At close of reporting year. If you use a valuation	BLOCK B
None	None				Part of the second seco	"None" column. Dividends, interest, and capital gains. even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting resided.	(such as 401(k) plans or		BLOCK C
NONE	NONE				C. Maria area.	assets, inucate the category or 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 earned or canacians.	the "None" column. For all other	For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k)	Amount of Income
							in reporting year.	Indicate if asset had purchases (P), sales (S), or exchanges (E)	BLOCK E

## **SCHEDULE V - LIABILITIES**

Name Mike Quigley

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Report Habilities 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. NOTE: Pending legislation may require Members to report mortgates on personal residences.

SP, DC,	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
ង	Bank of America	December 2011	Revolving Charge Account	\$15,001 - \$50,000
JŢ	Congressional Federal Credit Union	December 2011	Revolving Charge Account	\$15,001 - \$50,000
Ţ	Wells Fargo	July 2005	Mortgage on Residence	\$500,001 - \$1,000,000
ΤĽ	American Charter	August 2008	Mortgage on Residence	\$250,001 - \$500,000