



Filing ID #10036929

FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Hon. Salud O. Carbajal
Status: Member
State/District: CA24

FILING INFORMATION

Filing Type: Amendment Report
Filing Year: 2019
Filing Date: 07/15/2020

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
SBCERS [PE]		Undetermined	pension	\$15,001 - \$50,000	<input type="checkbox"/>
DESCRIPTION: Santa Barbara County Employees' Retirement System					
Teachers Insurance Annuity Association 403(B) Deferred Compensation Plan [FN]	SP	\$50,001 - \$100,000	Tax-Deferred		<input type="checkbox"/>
DESCRIPTION: Spouse Employer: Special Olympics of Southern California sponsored Deferred Compensation 403(B) Plan TIAA Acc Lfcycle 2030 T4 (TIAA 377557K-5)					
Wells Fargo Checking [BA]	JT	\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>
DESCRIPTION: Joint Checking Account					
Wells Fargo Savings [BA]	JT	\$15,001 - \$50,000	Interest	\$1 - \$200	<input type="checkbox"/>
DESCRIPTION: Joint Savings Account					

* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE C: EARNED INCOME

Source	Type	Amount
Special Olympics Southern California	Spouse Salary	N/A
SBCERS	Pension	\$46,451.00

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
SP	Federal Loan Servicing, PA	September, 1994	Student Loan	\$15,001 - \$50,000
JT	Shellpoint Mortgage Servicing	January, 2018	Primary Residence Mortgage	\$250,001 - \$500,000
	Congressional Federal Credit Union	November 2017	Loan	\$15,001 - \$50,000

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

Source	Trip Details				Inclusions		
	Start Date	End Date	Itinerary	Days at Own Exp.	Lodging?	Food?	Family?
Aspen Institute Inc.	03/15/2019	03/16/2019	Washington DC - San Diego, CA - Santa Barbara, CA	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

IPO: Did you purchase any shares that were allocated as a part of an Initial Public Offering?

Yes No

Trusts: 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?

Yes No

Exemption: 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?

Yes No

CERTIFICATION AND SIGNATURE

I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Hon. Salud O. Carbajal , 07/15/2020