



Filing ID #10042189

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

**Name:** Hon. Jesus Garcia  
**Status:** Member  
**State/District:** IL04

## FILING INFORMATION

**Filing Type:** Annual Report  
**Filing Year:** 2020  
**Filing Date:** 08/3/2021

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
457(b) Plan ⇒ Chicago Blended Fixed Options [OT]		\$50,001 - \$100,000	None		<input type="checkbox"/>
DESCRIPTION: None					
Cook County Pension Fund [PE]		Undetermined	Pension benefit	\$16,809.00	<input type="checkbox"/>
CPS Supplemental Retirement Plans ⇒ Vanguard Target Ret 2025 Inv [OT]	SP	\$1,001 - \$15,000	None		<input type="checkbox"/>
DESCRIPTION: NONE					
Municipal Employees Annuity and Benefit Fund of Chicago ⇒ Chicago Municipal Employee Fund [PE]		Undetermined	Pension benefit	\$19,478.00	<input type="checkbox"/>
State of Illinois [PE]		Undetermined	Pension benefit	\$24,951.00	<input type="checkbox"/>
State of Illinois [PE]		Undetermined	Pension benefit	\$1,554.00	<input type="checkbox"/>

\* Asset class details available at the bottom of this form. 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**

None disclosed.

**SCHEDULE D: LIABILITIES**

None disclosed.

**SCHEDULE E: POSITIONS**

None disclosed.

**SCHEDULE F: AGREEMENTS**

None disclosed.

**SCHEDULE G: GIFTS**

None disclosed.

**SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS**

None disclosed.

**SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA**

None disclosed.

**SCHEDULE A AND B ASSET CLASS DETAILS**

- 457(b) Plan
- CPS Supplemental Retirement Plans (Owner: SP)
- Municipal Employees Annuity and Benefit Fund of Chicago

**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. Jesus Garcia , 08/3/2021