



Filing ID #10041145

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

**Name:** Hon. Mark Desaulnier  
**Status:** Member  
**State/District:** CA11

## FILING INFORMATION

**Filing Type:** Annual Report  
**Filing Year:** 2020  
**Filing Date:** 07/21/2021

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Contra Costa County Employee Retirement Association [PE]		\$100,001 - \$250,000	Tax-Deferred		<input type="checkbox"/>
Travis Credit Union [BA]		\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>
US Bank [BA]		\$15,001 - \$50,000	Interest	\$1 - \$200	<input type="checkbox"/>

\* 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
Contra Costa Employee Retirement Association	pension	\$24,453.00

## SCHEDULE D: LIABILITIES

<b>Owner Creditor</b>	<b>Date Incurred</b>	<b>Type</b>	<b>Amount of Liability</b>
Wells Fargo	2016	Home mortgage, Washington DC (not rented)	\$100,001 - \$250,000
Wells Fargo	2016	Home mortgage	\$250,001 - \$500,000

## SCHEDULE E: POSITIONS

None disclosed.

## SCHEDULE F: AGREEMENTS

<b>Date</b>	<b>Parties To</b>	<b>Terms of Agreement</b>
January 2000	Contra Costa County Health Plan and myself	retirement health plan
January 2000	Contra Costa County Employee Retirement Assoc. and myself	pension plan participant

## 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.

## 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. Mark Desaulnier , 07/21/2021