

2013 MAY 15 PM 5:03

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

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UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT

Form A

For use by Members, officers, and employees

Name: Eric Swalwell Daytime Telephone: _____

(Office Use Only)

| | | | | | | | |
|-------------------------|---|---|----------------------------------|-----------|---------------------|-------------------|-------------------|
| File Status Report Type | <input checked="" type="checkbox"/> Annual (May 15, 2013) | Member of the U.S. House of Representatives | State: <u>CA</u> District: _____ | Amendment | Officer or Employee | Employing Office: | Termination Date: |
|-------------------------|---|---|----------------------------------|-----------|---------------------|-------------------|-------------------|

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

| | | | | | |
|---|---|--|---|------------------------------|--|
| I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | VI. 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)? If yes, complete and attach Schedule VI. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| II. 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? If yes, complete and attach Schedule II. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | VII. 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)? If yes, complete and attach Schedule VII. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| III. 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 III. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | Each question in this part must be answered and the appropriate schedule attached for each "Yes" response. | | |

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

| | | |
|--|------------------------------|--|
| IPO—Did you purchase any shares that were allocated as a part of an Initial Public Offering? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "accepted trust" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 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? Do not answer "Yes" unless you have first consulted with the Committee on Ethics. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |

