



FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Hon. Mark Pocan
Status: Member
State/District: WI02

FILING INFORMATION

Filing Type: Amendment Report
Filing Year: 2017
Filing Date: 04/26/2019

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Budget Signs & Specialties, 100% Interest [OL] LOCATION: Monona/Dane, WI, US DESCRIPTION: business	JT	\$250,001 - \$500,000	Dividends	\$15,001 - \$50,000	<input type="checkbox"/>
Settlers Bank [BA]	JT	\$50,001 - \$100,000	Interest	\$1 - \$200	<input type="checkbox"/>
State of Wisconsin Pension [PE] DESCRIPTION: The WI Retirement System is a defined benefit pension that has no underlying holdings.		Undetermined	None		<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
Budget Signs & Specialties	spouse salary	N/A

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	Wells Fargo Home Mortgage	January 2013	Washington DC condo	\$250,001 - \$500,000
	Anchor Bank	March 2014	Home mortgage	\$250,001 - \$500,000
	Direct Capital	November 2015	equipment for business	\$15,001 - \$50,000
	Settlers Bank	ongoing credit line	credit line	\$15,001 - \$50,000

SCHEDULE E: POSITIONS

Position	Name of Organization
Proprietor	Budget Signs & Specialties, LLC
Board Member	Progressive Caucus Center (Nonprofit Organization)
COMMENTS: Position is not compensated.	

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
January 1999	Myself and State of Wisconsin	continued partnership in State pension plan

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?
Progressive Congress	02/3/2017	02/5/2017	Washington DC - Baltimore, MD - Madison, WI	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. Mark Pocan , 04/26/2019