

FINANCIAL DISCLOSURE REPORT FOR CALENDAR YEAR 2019

Report Required by the Ethics
in Government Act of 1978
(5 U.S.C. app. §§ 101-111)

1. Person Reporting (last name, first, middle initial) VELEZ-RIVE, CAMILLE L.	2. Court or Organization US DISTRICT COURT PUERTO RICO	3. Date of Report 04/27/2020
4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time) US MAGISTRATE JUDGE FULL TIME	5a. Report Type (check appropriate type) ☐ Nomination ☐ Date ☐ Initial ☒ Annual ☐ Final	6. Reporting Period 01/01/2019 to 12/31/2019
	5b. ☒ Amended Report	
7. Chambers or Office Address US DISTRICT COURT FEDERICO DEGETAU FEDERAL BUILDING, 150 CHARDON STREET OFFICE 458K SAN JUAN, PUERTO RICO 00918		
IMPORTANT NOTES: The instructions accompanying this form must be followed. Complete all parts, checking the NONE box for each part where you have no reportable information.		

I. POSITIONS. (Reporting individual only; see pp. 9-13 of filing instructions)

☒ NONE (No reportable positions.)

<u>POSITION</u>	<u>NAME OF ORGANIZATION/ENTITY</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

II. AGREEMENTS. (Reporting individual only; see pp. 14-16 of filing instructions)

☒ NONE (No reportable agreements.)

<u>DATE</u>	<u>PARTIES AND TERMS</u>
1. _____	_____
2. _____	_____
3. _____	_____

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III. NON-INVESTMENT INCOME. (Reporting individual and spouse; see pp. 17-24 of filing instructions)

A. Filer's Non-Investment Income

[X] NONE (No reportable non-investment income.)

DATE	SOURCE AND TYPE	INCOME (yours, not spouse's)
1.		
2.		
3.		
4.		

B. Spouse's Non-Investment Income - If you were married during any portion of the reporting year, complete this section.
(Dollar amount not required except for honoraria.)

[X] NONE (No reportable non-investment income.)

DATE	SOURCE AND TYPE
1.	
2.	
3.	
4.	

IV. REIMBURSEMENTS -- transportation, lodging, food, entertainment.
(Includes those to spouse and dependent children; see pp. 25-27 of filing instructions.)

[X] NONE (No reportable reimbursements.)

SOURCE	DATES	LOCATION	PURPOSE	ITEMS PAID OR PROVIDED
1.				
2.				
3.				
4.				
5.				

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V. GIFTS. *(Includes those to spouse and dependent children; see pp. 28-31 of filing instructions.)*

☒ NONE *(No reportable gifts.)*

SOURCE	DESCRIPTION	VALUE
1.		
2.		
3.		
4.		
5.		

VI. LIABILITIES. *(Includes those of spouse and dependent children; see pp. 32-33 of filing instructions.)*

☒ NONE *(No reportable liabilities.)*

CREDITOR	DESCRIPTION	VALUE CODE
1.		
2.		
3.		
4.		
5.		

VII. INVESTMENTS and TRUSTS -- income, value, transactions (Includes those of spouse and dependent children; see pp. 34-60 of filing instructions.)

☐ NONE (No reportable income, assets, or transactions.)

A Description of Assets (including trust assets) Place "(X)" after each asset exempt from prior disclosure	B Income during reporting period		C Gross value at end of reporting period		D Transactions during reporting period				
	(1)	(2)	(1)	(2)	(1)	(2)	(3)	(4)	(5)
	Amount Code 1 (A-H)	Type (e g , div , rent, or int)	Value Code 2 (J-P)	Value Method Code 3 (Q-W)	Type (e g , buy, sell, redemption)	Date mm/dd/yy	Value Code 2 (J-P)	Gain Code 1 (A-H)	Identity of buyer/seller (if private transaction)
1. BPPR IRA Cash Equivalent	A	Interest	J	T					
2. NORTHWESTERN MUTUAL LIFE INSURANCE CASH VALUE	A	Dividend	K	T					
3. BPPR CASH ACCOUNTS cash equivalent	C	Interest	N	T					
4. COLLEEN HAGEN II, LLC		None	K	U					See Note in Part VIII
5. Lincoln National Universal Life Insurance		None	J	T					See Note in Part VIII
6. PENFED CASH ACCOUNT	A	Interest	K	T	Open	02/25/19	K		
7. 1 Year PENFED Money Market Certificate	B	Interest	M	T	Buy	02/25/19	L		
8.									
9.									
10.									
11.									
12.									
13.									
14.									
15.									
16.									
17.									

1 Income Gain Codes: (See Columns B1 and D4)	A =\$1,000 or less F =\$50,001 - \$100,000	B =\$1,001 - \$2,500 G =\$100,001 - \$1,000,000	C =\$2,501 - \$5,000 H1 =\$1,000,001 - \$5,000,000	D =\$5,001 - \$15,000 H2 =More than \$5,000,000	E =\$15,001 - \$50,000
2 Value Codes (See Columns C1 and D3)	J =\$15,000 or less N =\$250,001 - \$500,000 P3 =\$25,000,001 - \$50,000,000	K =\$15,001 - \$50,000 O =\$500,001 - \$1,000,000	L =\$50,001 - \$100,000 P1 =\$1,000,001 - \$5,000,000 P4 =More than \$50,000,000	M =\$100,001 - \$250,000 P2 =\$5,000,001 - \$25,000,000	
3 Value Method Codes (See Column C2)	Q =Appraisal U =Book Value	R =Cost (Real Estate Only) V =Other	S =Assessment W =Estimated	T =Cash Market	

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VIII. ADDITIONAL INFORMATION OR EXPLANATIONS. *(Indicate part of report.)*

In Part VII, line 4, Column C(2) of the financial report of 2018, "Colleen Hagen II, LLC" was listed under value code "T". The value code was changed in this report to "U" (as suggested in a letter from the Committee 12/13/19) because it is more accurate.

This 2019 amended report is filed to amend an inadvertent mistake I made in the description of the asset in Part VII, line 5 of the 2019 annual financial disclosure report I filed today. When I prepared the 2019 annual financial disclosure report, I thought that the "Lincoln National Universal Life Insurance" policy I had included in the 2017 and 2018 annual financial disclosure reports was a term life insurance policy to 30 years. This term life insurance policy was not a reportable asset as I realized when preparing the 2019 annual financial disclosure report. As such, in a good faith effort to correct the mistake I thought I had made in prior reports of including a non-reportable asset, I described the asset in Part VII, line 5 of the 2019 annual financial disclosure report as "Lincoln National Universal Life Insurance" with a "Y", I left Columns B, C and D in blank, and I provided an explanation in Part VIII. However, upon later reviewing the 2017 and 2018 annual financial disclosure reports in more detail, I became aware that the "Lincoln National Universal Life Insurance" policy I had reported in 2017 and 2018 was not the non-reportable term life insurance policy but a different asset, to wit, a cash value "Lincoln National Universal Life Insurance" policy of a dependent which is reportable and was properly reported and described in the 2017 and 2018 annual financial disclosure reports. As such, this amended 2019 annual financial disclosure report is filed to properly describe the reportable asset in Part VII, line 5. No income was received during the reporting period for the asset in Part VII, line 5.

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IX. CERTIFICATION.

I certify that all information given above (including information pertaining to my spouse and minor or dependent children, if any) is accurate, true, and complete to the best of my knowledge and belief, and that any information not reported was withheld because it met applicable statutory provisions permitting non-disclosure.

I further certify that earned income from outside employment and honoraria and the acceptance of gifts which have been reported are in compliance with the provisions of 5 U.S.C. app. § 501 et. seq., 5 U.S.C. § 7353, and Judicial Conference regulations.

Signature: s/ CAMILLE L. VELEZ-RIVE

NOTE: ANY INDIVIDUAL WHO KNOWINGLY AND WILLFULLY FALSIFIES OR FAILS TO FILE THIS REPORT MAY BE SUBJECT TO CIVIL AND CRIMINAL SANCTIONS (5 U.S.C. app. § 104)

Committee on Financial Disclosure
Administrative Office of the United States Courts
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