Yes No X	ed trusts" need not be disclosed. Have you excluded	e on Ethics and certain other 'except' brit child?	TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed from this report details of such a trust that benefits you, your spouse, or dependent child?
Yes No X	od? If you answered "yes" to this question, please	blic Offering during the reporting peri	IPO – Did you purchase any shares that were allocated as a part of an initial Public Offering during the reporting period? If you answered "yes" to this contact the Committee on Ethics for further guidance.
SWEREACH OF THESE QUESTIONS		DENT, OR TRUST IN	IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - AN
CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	ATTACH THE CORRESPONDING	Yes No	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?
on to cherity in Yes No X	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or srticle during the reporting period?	Yes No	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?
ng more than Yes X No thing period?	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$390 in value from a single source during the reporting period?	Yes No	C. Did you or your spouse have "earged" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?
rom a single Yes No	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$390 in value from a single source during the reporting period?	Yes No	B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?
gement with an Yes X No	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current celendar year up through the date of filing?	Yes No	A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Receive more than \$200 in unsamed income from any reportable asset during the reporting period?
		THESE QUESTIONS	PRELIMINARY INFORMATION - ANSWER EACH OF
ination:	Termination Date of Termination:	Amendment	REPORT 2018 Annual (Due: May 15, 2019)
Staff Filer Type: (If Applicable) Share Principal Assistant	Officer or Employing Office: Employee	AZ 08	FILER Member of the U.S. State:
A \$200 penaity shall be assessed against any individual who files more than 30 days late.	Daytime Telephone: 202-225-4576	Daytime Teleph	Name: Hon. Debbie Lesko
(CO20 JAOMS Juse Just 30) 50	Form A For Use by Members, Officers, and Employees		UNITED STATES HOUSE OF REPRESENTATIVES 2018 FINANCIAL DISCLOSURE STATEMENT
HAND DELVERED			

EXEMPTION - Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or your dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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3	N.A.	CASE DE	₩F.	WF (Europa		For a datailed discussion of Schoduts requirements, please refer to the instruction booket	If you so choose, you may undicate that an assel or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the fair left.	If you report a privately-tracked fund that is an Excepted investment Fund, please check the "EIF" box.	Excellude: Your personal residence, including second florings and vecation homes (unless there was rental income during the reporting period), and any francial interest in, or income derived from a federal interest in program, including the Thirtt Savings Plan.	For an numerating ordered in a providing field his cone that is not publicly traded, state the name of the business. The nation of its additions, and it geographic location in Block A.	For rental and other real property held for investment provide a complete address or description, e.g. nantal property," and a city and state.	For bank and other cash excounts, total the amount in all interest boaring occounts. If the total is over \$5,000, let every flaencial institution where there as more than \$1,000 in interest-bearing eccounts.	For all IRAs and other retroment plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use only licker symbols)	exceeding \$1,000 at the end of the reporting period and (b) any other reportings gaset or source or moone that generated more than \$200 in 'unsurned income during the year.	identify (a) each asset held for investment or production of income and with a fair market value	Assets and/or income Sources	ı
F) - 401K (F2025) - TARGET RETIREMENT 2025	BANK (COCSH) - CAPITAL ONE - CASH	BANK (AZCSH) - ONE AZ CREDIT UNION - CASH	WF - RP (AMRP) - AMEX RETIREMENT PLAN	WF (2025) - THE 2025 RETIREMENT FUND	WF (DBF) - THE DIVERSIFIED BOND FUND	WF (SV) - THE STABLE VALUE FUND		<u>}</u>	Is.	detailed rits, piess	chulce ophor	port a Investr	Yecan yecan nng thi progra	the public	ond of	S1,000	As an	mplets	SI OCX	500	ğ .	ı
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Name: Hon. Debbie Lesko

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Name: Hon. Debbie Lesko

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SCHEDULE B - TRANSACTIONS

Name: Hon. Debble Lesko

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Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period of any security or real properly held by you, your spouse, or your	Į,	Type of Transaction	ansactio]5		Date				≥	mount of		Transaction	ž			1
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Capital Gains If a sales transaction resulted in a capital garn in excess of \$200, check the "capital gains" box, unless if was an asset in a tax deferred account, and disclose the capital garn income on Schedula A.	C11350		tal Sato	hange	ck Sould Co peded \$200	applicate applicate	001- .000	,001- ,000	.001- 0:000	0 001- 0 000	0 601- 0.600	0 001- 000.000	000,001- 000,000	000,001 6,000 000	-100.0001 -000.000	⊭ \$50 000,0	
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Name: Hon. Debbie Lesko

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SCHEDULE C - EARNED INCOME

Name: Hon. Debbie Lesko Page (C) 1 of 1

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and berseffis received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME: The 2017 limit on outside earned income for Members and employees compensated at or above the "serior staff rate was \$27,765. The 2018 limit is \$28,050. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.

	Source (include date of receipt for honoraria)	Туре	Amount
	Keene State	Approved Teaching Fee	\$6,000
	State of Maryland	Legislative Pension	\$18,000
Examples.	Civi War Roundtable (Oct. 2)	Spouse Speech	\$1,000
	Ordano County Board of Education	Spouse Salary	AWA
STATE OF ARIZONA	iA	SALARY	1272.67
AZ GRASSROOTS ADVOCATES, LLC	ADVOCATES, LLC	SPOUSE INCOME	N/A
AMERICAN EXPRESS	:38	SPOUSE SALARY	NA

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8.₅ Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child NONE First Bank of Wirmington, DE Liability incurred MO/YR Date <u>2</u> Mortgage on Hental Property, Dover, DE Type of Liability \$10,001-\$15,000 > \$15,801-\$60,000 002 \$50,001-\$100,000 c \$100,001-0 \$250,000 Amount of Liability \$250,001m \$500,000 \$500,001-71 \$1,000,000 \$1,000,001-G \$5,000,000 \$5,000,001-\$25,000,000 x \$25,000,001-\$50,000,000 Over \$50,000,000 Over \$1,000,000* (Spouse/DC Liability) *

SCHEDULE E - POSITIONS

Name: Hon. Debbie Lesko Page (E) 1 of 1

Position Name of Organization
CHAIRMAN SENATE REPUBLICAN LEADERSHIP FUND PAC (RESIGNED FROM THIS
TREASURER AMERICAN LEGISLATIVE EXCHANGE COUNCIL (NOTE: NO LONGER SERVING IN THIS POSITION)
COMMUNITY ADVISORY COUNCIL FAITH HOUSE DOMESTIC VIOLENCE SHELTER
REPRESENTATIVE AZ STATE SENATE (COMPENSATED - RESIGNED POSITION IN JANUARY

SCHEDULE F - AGREEMENTS

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Name: Hen. Debble Lesko Page (F) 1 of 1

1/9/2009	Date	Identify the date, parties to, and continuation or deferral of payme
Me and State of AZ	Parties to Agreement	identify the data, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in a
PARTICIPATE IN AZ STATE PENSION PLAN.	Terms of Agreement	identify the data, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

SCHEDULE G - GIFTS

the source (by name), a brief description, and the value of all gifts totaling more than \$380 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts Name: Hon. Debbie Lesko Page (G) 1 of 1

Report the source (by name), a brief description, and the vector relatives, gits of personal hospitality from an individuous need not be added towards the \$390 disclosure threst prior approval of the Committee on Ethics.	Report the source (by name), a brief description, and the value of all gifts totaling more than \$380 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$158 or less need not be added towards the \$390 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Ethics.	ar. Exclude: Gifts ha valus of \$158 or I some gifts require
Source	Description	Value
Example: Mr. Joseph Smith, Arington, VA	Silver Plates (prior determination of personal trendship received from the Committee on Ethics)	SAGD
NONE		

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

9

Name: Høn. Debble Lasko Page (H) 1 of 1

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$390 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

EXCLUDE: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

≺ -	٠ .	≺	WASHINGTON, DC - LONDON, UK - OXFORD, UK - WASHINGTON, DC	Nar. 3.4 12/13 - 12/18/18	HUDSON INSTITUTE, HENRY JACKSON SOCIETY
2	*	*	DC-Beyng Chica-DC	Aug 8-11	Covernment of China (NECCEA) Europeies:
Family Bember Included? (Y/N)	Food? (YA))	Lodging? (Y78)	City of Departure-Destination-City of Return	Carto(a)	Source

Name: Hon. Debbie Lesko

Page (i) 1 of 1

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of paying an honorarium to you. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.	of any payment made by the sponsor of an event to with the Committee on Ethics.	a charitable organization in lieu of psyi	ing an honorarium to you. A
Source	Activity	vity Date	Amount
Association of American Associations, Washington, DC	Speech	ech Feb, 2, 2017	\$2,000
Exemples. XYZ Magazine	Article	cle Aug. 13, 2017	\$500
NONE			

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, FILER NOTES (Optional)

Name: Hon. Debbie Lesko Page (N) 1 of 1

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						NOTE NUMBER
Schedule A The CHASE IRA - CASH asset from the previous report has been rolled into the asset dass (MSIRA) and is reflected in the current report with current reportable asset MSIRA (TIEUX)(and reportable transaction listed in Schedule B).	Schedule A - PTSPX - INVESTMENT (PTSPX) does not have a reportable Schedule B transaction as there were multiple smaller transactions, which put the virtue over the limit on Schedule A.	Schedule E Note: no positions are compensated except for the one indicated.	Schedule A - DDVIX - The following assets do not appear on this report compared to previous report due to valuation under \$1,000. INVESTMENT (DDVIX) and RIRA (EQIIX).	Schedule A - USSB - US Savings Bonds - Value is listed as amount due upon cashing out such bonds based on their total value including interest as of the date reported. Income listed is the interest income once the bond has been redeemed.	Schedule A - AZPEN - Please note the AZ State Pension does not provide for any information as to holdings.	NOTES