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UNITED STATES HOUSE OF REPRESENTATIVES	ES Form A	DELIVERED of 1
2013 FINANCIAL DISCLOSURE STATEMENT	For Use by Members, Officers,	and Employees
Name: DINA TITUS	Davtime Telephone:	2014 JUL 14 PM 5: 25
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FILER FILER U.S. House of Representatives District:	MEUADA Officer	Officer or Employing Office: Employee
REPORT 2013 Annual (Due: May 15, 2014)	Amendment	Termination Date:
PRELIMINARY INFORMATION - ANSWER EACH OF T	THESE QUESTIONS	
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. Make more than \$200 in unearned income from any reportable asset during the reporting period? 	Yes No F. Did you have any reportable agoutside entity during the reporting year up through the date of filing?	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar Yes No No 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?	Yes No G. Did you, your spouse, or your de reportable gift(s) totaling more than source during the reporting period?	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$350 in value from a single Yes No Yes
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	Yes No H. Did you, your spo reportable travel or r \$350 in value from a	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$350 in value from a single source during the reporting period?
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Yes No I. Did any individual or lieu of paying you for a reporting period?	or organization make a donation to charity in ra speech, appearance, or article during the
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	m	CORRESPONDING SCHEDULE IF YOU ANSWER "YES"
IPO, EXCLUSION OF SPOUSE, DEPENDENT, O	DEPENDENT, OR TRUST INFORMATION - ANSWER	VER EACH OF THESE QUESTIONS
IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you an the Committee on Ethics for further guidance.	I Public Offering during the reporting period? If you	answered "yes" to this question, please contact 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 that benefits you, your spouse, or dependent child?	nittee on Ethics and certain other "excepted trusts" n	need not be disclosed. Have you excluded from Yes No
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	rned" income, transactions, or liabilities of a spouse of the Committee on Ethics.	or dependent child because they meet all three Yes No

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d/or income Source	BLOCK A	ILE A - ASSETS 8
Value of Asset	SLOCK B	ILE A - ASSETS & "UNEARNED INCOME"
Type of Income	BLOCK C	Name: 117US
Amount of Income	BLOCK D	Page 2 of //
Transaction	BLOCK E	of

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E QUITABLE	AMER	1	PROPENTIA	TIAA	TIAM		Examples		For a detailed discussion of Schedule requirements, please refer to the instruction booket.	If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or depandent child (DC), or jointly had with anyone (JT), in the optional column on the far left.	If you have a privately-traded fund that is Excepted investment Fund, please check the "l box.	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); and samy francial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	For an ownership interest in a priveleity-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental and other real property held for investment provide a complete address or description, e.g. rental property," and a city and state.	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial metitution where there is more than \$1,000 in interest bearing accounts.	For all IRAs and other retirement 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 ticker symbols).	and (b) any other reportable asset or source of noome that generated more than \$200 in 'unearmed' noome during the year.	identify (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period.		
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE B - TRANSACTIONS

Page 7 of

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SCHEDULE C - EARNED INCOME

Name: TTTUS Page S	
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Name: ///US	Page O of
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 r the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.	totaling \$200 or more during the reporting period. For a spouse, list
EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	

INCOME LIMITS and PROHIBITED INCOME: The 2013 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited. UNIV. OF MY. - LAS VEGAS Examples: Keene State
State of Maryland
State of Maryland
Covil War Roundable (Oct. 2)
Ontario County Board of Education Source (include date of receipt for honoraria) SPOUSE Type SALARY 4/2 Amount \$6,000 \$18,000 \$1,000

SCHEDULE D - LIABILITIES

ng the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you	Name: 117US P	Page 9 of //	
	g the reporting period by you, your spouse, or your dependent child. Mark the highest amounts properly including mortgages on their personal residence. Exclude: Any mortgage on your personal residence.	unt owed during the repo	orting is you

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 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 remt 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 reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

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				FORD	Example		
T DOSITIONS			THE THE PARTY OF T	FORD MOTIR CO.	First Bank of Wilmington, DE	Creditor	
			-	5/13	5/98	Date Liability incurred MO/YR	
				New CAR LOAN	Mortgage on Rental Property, Dover, DE	Type of Liability	
				7		\$15,001- \$50,000	
				71	***		
					×	\$100,001- \$250,000	
						SCHOLADI- MARA ARAO	Amount of Liability
						\$500,001- \$1,000,000	t of Li
						At the track to th	ability
						\$5,000,001- \$25,000,000	
						\$25,600,001- \$50,060,000	
						Over \$50,000,000	
						Over \$1,000,000* (Spouse/DC Liability)	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions listed in Schedule C; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

			Position
			Position Name of Organization

SCHEDULE F - AGREEMENTS

	Name:
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	Page 10 of 11
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Identify the date, 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.

Date	Parties to Agreement	Terms of Agreement
1997 1997	1999 STATE OF NEVADA PERS	LEGIS. PENSION THAT WILL PAY \$500 PER MONTH
1986 1986	UNIV. OF NEWAPA PRESS	ROYALTIES FOR BOOK PUB. IN 1986; REPRINTED AS

SCHEDULE G - GIFTS

Report the source (including name, city, and state), a brief description, and the value of all gifts totaling more than \$350 received by you, your spouse, or a 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 \$140 or less need not be added towards the \$350 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the

Source	Description	Value
Example: Mr. Joseph Smith, Arlington, VA	Silver Platter (determination of personal friendship received from the Ethics Committee)	\$400
		-

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 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: Privately-sponsored travel approved by the Ethics Committee, if post-travel disclosure was filed with the Clerk; 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.

	Source	Date(s)	City of Departure – Destination — City of Return	Lodging? (Y/N)	Food? (Y/N)	Family Member Included? (Y/N)
1	Covernment of China (MECEA)	Aug. 6-11	DC-Belging, China - DC	*	*	Z
nxarpres.	Habilat for Humanity (charity fundrates)	Mer. 3-4	DC-Busitor-DC	≺	*	Y
AMER.	AMER. ISRAEL EDUC, FOUNDATION	21-+ M	CV - TELAVIV - CV	Y	Y	Y