



Filing ID #10013634

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • 135 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Shirlene Delacruz Santiago Ostrov
Status: Congressional Candidate
State/District: HI01

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2016
Filing Date: 08/4/2016

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
checking account		\$1,001 - \$15,000	None		
Checking account		\$1,001 - \$15,000	None		
florida prepaid		\$15,001 - \$50,000	None		
LOCATION: FL					
savings account		\$1,001 - \$15,000	None		
savings account		\$1,001 - \$15,000	None		

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
Ares Mobility Solutions	salary	\$59,500.00	\$93,500.00

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
JT	American Express	revolving	revolving credit	\$15,001 - \$50,000
JT	American Express	revolving	reveolvoing credti	\$15,001 - \$50,000
JT	Mastercard	revolving	revolving credit	\$15,001 - \$50,000
SP	PFCU	recurring	credit line	\$15,001 - \$50,000

SCHEDULE E: POSITIONS

Position	Name of Organization
officer	Ares mobility solutions
officer	Halau Nohona Hawaii
officer	Crime Stoppers Honolulu

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

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: Shirlene Delacruz Santiago Ostrov , 08/4/2016