



Filing ID #10006952

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

**Name:** Hon. David N. Cicilline  
**Status:** Member  
**State/District:** RI01

## FILING INFORMATION

**Filing Type:** Annual Report  
**Filing Year:** 2014  
**Filing Date:** 05/15/2015

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
1297 Caraboa Ln, Port Charlotte, FL LOCATION: Port Charlotte, FL, US		\$1,001 - \$15,000	None		<input type="checkbox"/>
387 Atwells Ave, Providence, RI LOCATION: Providence, RI, US		\$250,001 - \$500,000	Rent	\$1,001 - \$2,500	<input type="checkbox"/>
46 South Ridge Rd, Chilmark, MA LOCATION: Chilmark, MA, US		\$500,001 - \$1,000,000	None		<input type="checkbox"/>
Citizens Bank Accounts		\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>

## SCHEDULE B: TRANSACTIONS

None disclosed.

## SCHEDULE C: EARNED INCOME

None disclosed.

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	CCO Mortgage, Glen Allen, VA	July 2013	Mortgage on Primary Residence	\$100,001 - \$250,000
	Wells Fargo	July 2013	Mortgage on Washington DC Residence	\$250,001 - \$500,000
	Citizens Bank, Providence RI	July 2013	Line of Credit	\$15,001 - \$50,000

SCHEDULE E: POSITIONS

Position	Name of Organization
Board Member	The After School Alliance

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

None disclosed.

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. David N. Cicilline , 05/15/2015