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LEGISLATIVE RESOURCE CENTER

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U.S. HOUSE OF REPRESENTATIVES

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UNITED STATES HOUSE OF REPRESENTATE FINANCIAL DISCLOSURE STATEMENT	TIVES For Use by	Form A y Members, Officers, a	and Employees	Page 1 of 9
Name: Hon, Jason Charferz	Daytime Telep	hone:		A \$200 penalty shall be assessed against any antividual who tiles more than 30 days late.
FILER STATUS Morribor of the U S State STATUS Representatives District	1 03	Criticer Employ		Staff Filer Type (If Applicable) Shared Prencipel Assistant
REPORT 2016 Available (Due May 16, 2017)	Amendment		Termination Date of Terr	-7 -AL-17
PRELIMINARY INFORMATION - ANSWER EACH OF	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 and of the reporting period? gg. Become more than \$200 in unserned income from any reportable asset during the reporting period?	Yes X No	F Did you have any sept outside entity during the year up through the date	reporting period or in I	rrangement with an the current celendar Yes X No
B Did you, your spouse, or your dependent child purchase, sell, or eachange any securities or reportable real setale in a transaction exceeding \$1,000 during the reporting period?	Yes No X	G Did you, your spouse, reportable gift(s) totaling source during the reports	more than \$375 m val	
C Did you or your spouse have "seried" moone (e.g., selence, honorans, or personsIRA distributions) of \$200 or more during the reporting period?	You X No	H Did you, your spouse, reportable travel or reach \$375 in value from a sing	umoments for travel t	staking more than Yes No N
D. Did you, your spouse, or your dependent child have any reportable bability (more than \$10,000) at any point during the reporting period?	Yes No .	1 Did any individual or on heu of paying you for a si reporting period?		
E Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes X No	ATTACH THE CO	RRESPONDING	SCHEDULE IF YOU ANSWER "YES"
IPO AND EXCLUSION OF SPOUSE, DEPENDE	NT, OR TRUST INFO	RMATION - ANS	WER EACH O	F THESE QUESTIONS
1PO Did you purchase any shares that were allocated as a part of an contact the Committee on Ethics for further guadance	Intel Public Offering during the I	eporting period? If you ah	rwered 'yes' to this qu	essbon, please Yes No 🔀
TRUSTS Details regarding "Guidfied Bland Trusts" approved by the C from this report details of such a suel that benefits you, your apolise, or		offrer "excepted trusts" need	i not be declosed. He	eve you excluded Yee Mo Mo
EXEMPTION — Have you excluded from this report any other assets, "all three tests for exemption?" Do not answer "yes" unless you have its			rour dependent child b	recause they most Yes No K

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: HON, JUSON Chaffetz Page 2 or 9

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE B - TRANSACTIONS

Name: Hon. Jason Charfotz Page 4 or 9

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SCHEDULE C - EARNED INCOME

Name: HUM. JUSOn Chaffetz Page 5 of 9

EXCLUDE MALery INCOME LIMITS on	, and amount of earned income from any source (other than the filer's current employment is ust of any honorana, list only the source for other spouse earned accome exceeding \$1,000 pay (such se National Guard or Reserve pay), faderal earned income programs, and benefits rea by PROFEINTED INCOME: The 2016 first on outside earned income for Members and employees of income (noticly honorana, director's fees, and payments for professional services in	erved under the Social Securi	y Act othe Teleporated Toda was \$3	
-	Source (Include date of receipt for honorane)		Туре	Amount
Examples	Vaces Bath Gill of Marketol Gill Ver Reportable (Co. 28 Option County Series of Education		reveal Teachers Fee regulative Pageson Service Streets Spring Streets	\$6,000 (10,000 11,000
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SCHEDULE D - LIABILITIES

Name: Han. Jason Chaffetz Page 6 of 9

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SCHEDULE E - POSITIONS

Report of postorus, companied or uncomponented, held consultent of any corporation, firm, pertnership, or other two Postorus held in any religious, social, fratemal, or political e	during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or stees enterprise, nonprofit organization, labor organization, or educational or other metalulon other than the United States Exclude nations (such as political person and compagn organizations), and positions solely of an honorary nature
Position	Name of Organization
Pather	Strawborry C. L.L.

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		A OPER
SCHEDIN	FF	AGREFMENTS

Name: Hon. Jason Chatfetz	Page 7 of 9

identify the de continuation of employer	tie, parket to, and general ferms of any agreement or amengement that you he defended of payments by a former or current employer other than the U.S. go	ave with respect to future employment, a leave of absence during the period of government service, reminient, or continuing participation in an employee welfare or benefit plan maintained by a former						
Date	Parties to Agreement	Terms of Agreement						
may 2011	myself and Fox News, Network , LLC	Starting July 1, 2017 as a contributor to for wave welve	K LLC					
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SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all grils totaling more than \$375 received by you, your spouse, or your dependent child from any source during the year. Exclude Grils from relatives, grils of personal hospitality from an individual, local meets, and grits to a spouse or dependent child that are totally independent of his or her relationship to you. Grits with a value of \$150 or less need not be added towards the \$375 deciceure tyreshold. Note: The grit rule (House Rule 25, clause 5) prohibits acceptance of grits except as specifically provided in the rule.

	Source	Description	Value
Sample .	Mr. Joseph Bredh, Adregion, VA	Short Plater (Strictmenton of prescond Streetship received Spin the Blace Committee)	\$400
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SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name: 1+(W.]	ason	Chaffetz	Page 🖰 of	9_
PRODUCTOR: 1 T () Y 1	ILANULL	- 1 MAP DY 1	Marge 1 / DI	, - \

Identify the source and lest travel stancary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$375 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a tensity member accompanied the traveler at the operators or or your dependent or the sponsor or were period by you and reuntrareed by the operators.

EXCLUDIT. Travel-related expenses provided by federal, state, and food governments, or by a foreign government required to be expensely reported under the Foreign Grits and Decombons Act (FGDA, 6 U.S.C. § 7342), political travel that as required to be reported under the Federal Election Compagn Act, travel provided to a spouse or dependent child that as required to be reported under the Federal Election Compagn Act, travel provided to a spouse or dependent child that as required to be reported under the Federal Election Compagn Act, travel provided to a spouse or dependent child that as required.

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SCHEDULE I - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Mame: HOM. JUSON CHRIFFERZ Page 9 of 9

Source		Activity	Date	Amount
npler	Association of American Associations, Washington, DC XYZ Magazine	Speech Article	Feb, 2, 2016 Aug 13, 2016	\$2,600 \$500
	None			
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