UNITED STATES HOUSE OF REPRESENTATIVES FORM B FORM B	JAN 2 3 2020 Page 1 of 1/2
Name: Gordon J. Kinzle Daytime Telephone:	LEGISLATIVE RESOURCE CENTER 2020 FEB - 3 AM II: 23
New Member of or Candidate for State: LL U.S. House of Representatives District: GHA Candidates – Date of Election: 3/1773 Check if Amendment	OFFICE OF THE PLERK PARTIES
Staff Filer Type (If Applicable): Employing Office: Shared Principal Assistant to 1 / 1/2/2019 In	A \$200 penalty shall be assessed against any Individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER <u>EACH</u> 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 end of the reporting period? or in the current calendar year up through the date of filing? b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	the reporting the date of filing? Yes No.
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 Provided entity during the reporting period or in the current calendar year up through the date of filing?	angement with an Yes No No
D. Did you, your spouse, or your dependent child have any reportable Yes No J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	5,000 from a Yes No No
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	OMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	QUESTIONS
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?	/e you excluded Yes No X
EXEMPTION Have you excluded from this report any other assets, "uneamed" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Ill three tests for Yes 🗌 No 🔀

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Goldon J. Kinzler

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE A - ASSETS & "UNEARNED INCOME"
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. 1							1							. 1		Spouse/DC Income over \$1,000,000*				

SCHEDULE C - EARNED INCOME

Name: (Tardan J. Kinzker Page

Let 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 both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below. INCOME LIMITS and PROHIBITED INCOME: Be advised that the outside earned income limit and prohibitions on types of income may apply to you after you are on House payroll. The 2018 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,050. The 2019 limit is \$28,440. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff. EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act. CTOPAN T. KNOW MT. 5. Examples: Source (include date of receipt for honoraria) ABC Trace Association, Baltimore, MD (July 15)
State of Maryland
Civil War Roundtable (Oct. 2)
Ontario County Board of Education Solar Spouse Speech Spouse Salary Type notregaine **Current Year to Filing Amount** 355,0c8 Preceding Year \$76,000 \$1,000 8

Page_

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. New 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 liabilities); and liabilities owed to you by a spouse or the child, perent, or sibiling 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 *Column K is for liabilities held solely by your spouse or dependent child.

				SP. DC, JT		
		11	Example			
		Nans	First Bank of Wilmington, DE	Creditor		
			5/16	Date Liability Incurred MO/YR		
			Mortgage on Rental Property, Dover, DE	Type of Liability		
				\$10,001- \$15,000	>	
				\$15,001- \$50,000		
			-	\$50,001- \$100,000	'n	
			×	\$100,001- \$250,000	0	
				\$250,001- \$500,000	m	moun
				\$500,001- \$1,000,000	71	Amount of Liability
				\$1,000,001- \$5,000,000	6	
				\$5,000,001- \$25,000,000	x	
				\$25,000,001- \$50,000,000		
				Over \$50,000,000	٠	
				Over \$1,000,000* (Spouse/DC Liability)	*	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, 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 held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

_	_	_	_	_	_
Member	Board of Diretor	Colonel	Immediate Part Preisent	June + President	Position
ian Alberray Counc	Elmhurt atpatient / Surgery Center Elmhurt IL	Army	,	Clorda J. Kinzke M.D. S.C	Name of Organization

Name: Clarke T. Kinzke Page 8

period. New 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 liabile); 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 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 "Column K is for liabilities held solely by your spouse or dependent child.

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						SP. DC, JT		
				1	Example			
				Vone	First Bank of Wilmington, DE	Creditor		4
					5/16	Date Liability incurred MO/YR	,	
					Mortgage on Rental Property, Dover, DE	Type of Liability		
;						\$10,001- \$15,000	>	
						\$15,001- \$50,000	ø	
j						\$50,001- \$100,000	c	
;					×	\$100,001- \$250,000	•	
;						\$250,001- \$600,000	m	Amount of Liability
:		·				\$500,001- \$1,000,000	79	Ē
						\$1,000,001- \$5,000,000	6	
	 					\$5,000,001- \$25,000,000	=	
						\$25,000,001- \$50,000,000	-	
						Over \$50,000,000	•	
			ı			Over \$1,000,000*		

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an efficer, 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 held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization
Exactue Committee make	the Chicago Grological Buchy (Uncompensated)
committee member	Elmhurst Memoral Kelthand Weller Frencher comme
Committee presuper	Elmhurt Memorial Housel Modical Hatt Belows Committee
	Elmhurst Memorial Kraikel Vetrams! Charil (40)
	Moderal Haft Quality Cherikht Committee of Elimnant Happy The
	ours the

SCHEDULE F - AGREEMENTS

Page 5

identify the da continuation o employer.	identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation employer.	ve with respect to: future employment; a leave of absence during the period of government service; ernment; or continuing participation in an employee welfare or benefit plan maintained by a former
Date	Parties to Agreement	Terms of Agreement
	None	

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

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

	Source (Name and City/State)	Brief Description of Duties
Exemple:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
No	Vone	All included in schoole C

Name: Gordon J. Kinzken

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