UNITED STATES HOUSE OF REPRESENTATIVES Name: 2018 FINANCIAL DISCLOSURE STATEMENT REPORT TYPE FILER STATUS 2018 Annual (Due: May 15, 2019) House of Representatives Member of the U.S. District: State: 6 Ŋ Daytime Telephone: 202-225-4422 Amendment For Use by Members, Officers, and Employees Form A Employee Officer or **Employing Office:** Date of Termination: Termination M 2019 (Office-Use Parly) 3: 36 A \$200 penalty shall be assessed against any individual who files more than 30 days late. HAND DELIVERED 1 of 12 Shared Staff Filer Type: (If Applicable) Principal Assistant

PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

YOU ANSWER "YES"	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	Yes No	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?
Yes No X	I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period?	Yes No	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	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$390 in value from a single source during the reporting period?	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 X	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$390 in value from a single source during the reporting period?	Yes 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 X	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	Yes No	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. Receive more than \$200 in unearned income from any reportable asset during the reporting period?

IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS

EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or your dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance. 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? Yes Yes Yes Š Š Š × 凶 囚

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Douglas L. Lamborn

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ETS & "UNEARNED INCOME"

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Dougles L. Lamborn

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE B - TRANSACTIONS

Name: Dongles L. Lamborn Page 7 of 12

Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period of any security or real property held by you, your spouse, or your	Type of T	Type of Transaction	3	×	Date				Am.	ount o	Amount of Transaction	saction			-
reporting beriod or any security of tea property here by you, you spouse, or your dependent child for investment or the production of income. Include transactions that resulted in a capital loss. Provide a brief description of an exchange transaction. Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose "partial sale" as the type of transaction.				apital Gain Exceeded	(MO/DAYR) or Querterly,	>		n		m	71	o	<u> </u>	000 _	000
Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-determed account, and disclose the capital gain income on Schedule A. "Column K is for assets solely held by your spouls or development o'tild.	Furchase Sale	Partial Sale	Exchange	Check Box if C \$200	weekly, if applicable	\$1,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,001- \$250,000	\$250,001- \$500,000	\$500,001- \$1,000,000	\$1,000,001- \$5,000,000	\$5,000,001- \$25,000,000 \$25,000,001-	\$50,000,000 Over \$50,000	Over \$1,000,0 (Spouse/DC /
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SCHEDULE B - TRANSACTIONS

Name: Dougles L. Lemborn Page 8 of 12

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SCHEDULE B - TRANSACTIONS

Name: Douglas L. Lamborn Page q

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SCHEDULE C - EARNED INCOME

Name: Douglas L. Lamborn Page 10 of 12

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

Source (inclu	Source (include date of receipt for honoraria) Keene State Approved Teaching Fee Constitute Approved Teaching Fee Consti	Type Approved Teaching Fee Legislative Pension
Examples: State of Manyland Civil War Roundtable (Oct. 2) Onlario County Board of Education		Legislative Pension Spouse Speech Spouse Salary
Camborn for Congress	ress	Spouse hourly fee
		for bookkeeping
		and compliance
		·

SCHEDULE D - LIABILITIES

	Name:
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	L. Lemborn
	Page /1 of 12
	of 12

period. 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 liable); and liabilities of a business in which you own an interest (unless you are personally liable); and liabilities of a business in which you own an interest (unless you are personally liable); and liabilities of a business in which you own an interest (unless you are personal residence (unless you are personal residence). 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.

		95		SP. DC, JT		
	-	Ame	Ехатріе			
		Ameritrade	First Bank of Wilmington, DE	Creditor		
		5/11	5/16	Date Liability Incurred MO/YR		
	<i>u</i>	Myrgh Book.	Mortgage on Rental Property, Dover, DE	Type of Liability		
				\$10,001- \$15,000	>	
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				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 held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

Name of 0				Position
Organization				Name of Organization

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$390 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: 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)
	Government of China (MECEA)	Aug. 6-11	DC-Beijng, Chine-DC	٧	۲	Z
Exemples	Habital for Humanity (chanty fundraiser)	Mar. 3-4	DC-Boston-DC	۲	Y	Y
77	The German Morshall Fund	Anal 5-9	Coloralo Springs	٢	۲	7
61	the United States	•	(no travel)			
150	Assen Institute	Aug. 15-19	Denver-Vancouser E.C.	7	7	7
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