A	>
G	5
J	
0	
701.	֡
	ī

<u>8</u> ⊠	Yes 🔲	ependent child	ilities of a spouse or de Committee on Ethics.	ne, transactions, or liabi first consulted with the	arned" incom ss you have f	er assets, "une wer "yes" unle	<b>EXEMPTION</b> —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? Do not answer "yes" unless you have first consulted with the Committee on Ethics.
8	Yes X	ot be	ent child?	ics and certain other "e r spouse, or a depende	nittee on Ethi ting you, you	d by the Comi	<b>TRUSTS</b> —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 a dependent child?
ι <b>σ</b>	QUESTIONS	EACH OF THESE	ANSWER EACH O	1	TINFOR	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	response.	each "Yes"	dule attached for each "Yes" response.	appropriate sched	and the	e answered	Each question in this part must be answered and the appropriate sched
8	Yes	\$5,000 from	VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Schedule VI.	VI. Did you receive compensation of more a single source in the two prior years? If yes, complete and attach Schedule VI.	No X	Yes	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?  If yes, complete and attach Schedule III.
<b>₹</b>	Yes	rangement	<ul> <li>V. Did you have any reportable agreement or arrangement with an outside entity?</li> <li>If yes, complete and attach Schedule V.</li> </ul>	V. Did you have any reportable agreemen with an outside entity?  If yes, complete and attach Schedule V.	No X	Yes 🔲	II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule II.
₹	eg	before the date or two years?	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	IV. Did you hold any reportable positions o of filing in the current calendar year or in the filing in the current calendar year or in the filing in the current calendar year.	No ON	Yes 💢	<ol> <li>Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?</li> <li>If yes, complete and attach Schedule I.</li> </ol>
				ANSWER EACH OF THESE QUESTIONS	OF THES	R EACH	In all sections, please type or print clearly in blue or black ink.  PRELIMINARY INFORMATION — ANSWE
	more than 30 days late.	more than				)ffice:	New officer or Employing Office:
assessed who files	A \$200 penalty shall be assessed against any individual who files	A <i>\$200 pe</i> against ar	Check if Amendment	m: 11/04/14	Date of Election:		$\boxtimes$
	(Office Use Only)						
(A	REPRESENTATIVE	AM /		Daytime Telephone:	Daytime		Name: Ikaika Anderson
1	OFFICE UP THE CLERK	o university of the		1			
	2013 SEP     PM  : 16	2013 SEP 1	and new employees	For use by candidates and new employees		1015	Period covered: January 1, 2013 - January 1
Page 1 of	Pag LEGISLATIVE RESOURCE CENTER	LEGISLATIVE	W B	FORM		TIVES	UNITED STATES HOUSE OF REPRESENTATIVES
ā	AUG 5 0 2015	AUG					

## SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Ikaika Anderson

Page 2 of 183

more during the preceding calendar year. 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. List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or

<b>Exclude:</b> Military pay (such as National Guard or Heserve pay), federal retirement programs, and benefits received under the Social Security Act.	rement programs, and benefits re	eceived under the Social :	Security Act.
Source (include date of receipt for honogaria)	Type	Amount	unt
Course (iliciade date of receipt for florioralist)	1,100	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
	Director's Fee	\$400	\$3,200
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary		NA
City & County of Hamolulu	Salary	# 34,970,67	\$ 52, 456
PY INC.	Commission		\$ 18,000
			-

## SCHEDULE V — AGREEMENTS

Name TRAIKA ANDERSOH

Page
300
오
<b>5</b> 03

		Date	Identify the date service; continue ofit plan maintain
		Parties To	Identify the date, parties to, and general terms of any agreement or arrangement with service; continuation or deferral of payments by a former or current employer other the effit plan maintained by a former employer.
		Terms of Agreement	Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

## SCHEDULE VI — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the *two* prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization 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 I.

_	$\overline{}$	- 1	T				T	_
				City of Common of Honolulu Honolulu, HI	Py Inc. Honolulu, Hawaii	Example: Doe Jones & Smith, Hometown, Homestate	Source (Name and Address)	•
				Salary	Realton Commission	Accounting services	Brief Description of Duties	