# William < HAAS

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UNITED STATES HOUSE OF REPRESENTATIVES FORM B FINANCIAL DISCLOSURE STATEMENT For New Members, Candidates, and New Employees	LEGISLATIVE RESOURCE CENTER (5)
Name: William C HARS Daytime Telephone:	
New Member of or Candidate for State: MC  U.S. House of Representatives District: 07  Check if Amendment  FILER  Candidates – Date of Election: 17 450517, 2018	(Office Use Only)
STATUS  New Officer or Employee  Staff Filer Type (If Applicable):  Employing Office:  Shared  Principal Assistant  to  to	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	
<ul> <li>A. Did you, your spouse, or your dependent child:</li> <li>a. Own any reportable asset that was worth more than \$1.000 at the end of the reporting period?</li> <li>b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?</li> </ul> Yes <ul> <li>Ves</li> <li>Ves</li> <li>No</li> <li>E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?</li> </ul>	ng the reporting Yes V 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?  F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period? year up through the date of filing?	arrangement with an Yes No
D. Did you, your spouse, or your dependent child have any reportable iability (more than \$10,000) at any point during the reporting period?  Yes No  J. Did you receive compensation of more than \$5,000 from single source in the current year and two prior years?	n \$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	S" COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	E QUESTIONS
TRUSTS - Details regarding 'Qualified Blind Trusts' approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. from this report details of such a trust that benefits you, your spouse, or dependent child?	not be disclosed. Have you excluded Yes No
<b>EXEMPTION</b> – Have you excluded from this report any other assets, "unearned" 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.	et all three tests for Yes No V

SP, Ethops Cap Stock  TE Examples: Samon & Schicker  ASC Hooke Fund  X	Si,000, its every financial institution where there is note than \$1,000 in interest-bearing accounts.  For nental and other real property had for investment provide a complete address or description, e.g., rental property, and a city and state.  For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic incahorn in Block A.  Exclude: Your personal residence, including second homes uning the reporting period), and any financial income during the reporting period, and any financial interest in, or importer denived from, a federal interest in, or importer denived from a federal mitiest in, or importer denived from a federal mitiest in, or importer denived from a section of schedule has an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left.  For a detailed obscussion of Schedule A requirements, please order to the instruction booklet.	The account that exceeds the reporting thresholds  For bank and other cash accounts, total the amount in	Assets and/or income Sources  Identify (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in 'unearmed' income during the year.  Provide complete names of stocks and mutual funds (do not use priy ticker symbols).  Provide Income than \$200 in 'unearmed' income during the year.
Usstoces Men market Ernergrywyska Global Egust Global Myn Volkhy Turzo Tiefen 2660 Turz rafur 2065	Nome \$1.\$1.000 \$1.001-\$15.000 \$1.001-\$15.000 VAN FUARD mufuel feews \$50.001-\$100.000 \$100.001-\$250.000 \$250.001-\$1.000.000 \$500.001-\$25.000,000 \$5.000.001-\$25.000,000 \$25.000.001-\$25.000,000 \$25.000.001-\$25.000,000 \$25.000.001-\$25.000,000 \$25.000.001-\$25.000,000 \$25.000.001-\$25.000,000 \$25.000.001-\$25.000,000 \$25.000.001-\$25.000,000	A B C S E F G H I J X L M	BLOCK B  Value of Asset  Indicate value of asset at close of the reporting period it you use a valuation method other than fair market value, please specify the method used.  If an asset was sold during the reporting period and is included only because it generated income, the value should be "None."  "Column M is for assets held by your spouse or dependent child in which you have no interest.
tax exemptanning	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BUIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income a) Farm: Income)		Type of Income  Type of Income  Check all columns that apply. For accounts that apply. For accounts that generate tax-deferred income (such as 401(s), IRA, or 529 accounts), you may check the "Tax-Deferred" column. Dividents interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check None: If the asset generated no income during the reporting period.
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×	None  \$1.\$200  \$201.\$1.000  \$1.001.\$2.500  \$2.501.\$5.000  \$5.001.\$15.000  \$15.001.\$15.000  \$100.001.\$1,000.000  \$1.000,001.\$5.003.000  \$2.500.\$5.000.000  \$3.000.\$5.000.000  \$3.000.\$5.000.000	Preceding Year	BLOCK D  Amount of Income  Amount of Income  Amount of Income  storwhich you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other dictate the category of income by checking the appropriate box below. Dividends, interest, and ains, even if reharmsted discloded as income for assets held in taxable accounts, lone: if no income was earned or generated  XII is for assets held by your spouse or dependent chald in which you have no interest.

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: William C. (+1045

Page 3

## SCHEDULE C - EARNED INCOME

Name: WElliam C-HAAS Page

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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 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.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal refirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. 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.

		Am	Amount
Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0 \$20 000	\$500 \$500
EXAITIPIES: Civil War Roundtable (Oct. 2) Omano County Board of Education	Spouse Speech Spouse Salary	SG N/A	\$1,000 N/A
Kuck wood YmcH	hawely		\$7000
FENTON, MO SWIM Chub	hourly		\$ 3000
City of Kirkwood, MG	nowerly		
Kelly Sources	Mourty		
Ritynowr School Dispuel	howelly	\$ 7500	\$1000
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#### SCHEDULE D - LIABILITIES

Name: WWW. Fig. 2. of 6. Page 5 of 6. Page 5 of 6. Page 5 of 6. Page 5 of 6. Page 5 of 6. Page 5 of 6. Page 5 of 6. Page 5 of 6. Page 5 of 6. Page 5 of 6. Page 5 of 6. Page 5 of 6. Page 6. P

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 liable); 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 exceeded \$10,000. \*Column K is for liabilities held solely by your spouse or dependent child

			SP. DCJT		
	15 Ban	Example			
	Sank	First Bank of Wilmangton, DE	Creditor		
	2013- A	5/98	Date Liability Incurred MO/YR		
	2013- Weder and	Mortgage on Rental Property, Dover. DE	Type of Liability		
			\$10,001- \$15,000	À	
			\$15,001- \$50,000	В	
	ب	1	\$50,001- \$100,000	0	
		x	\$100,001~ \$250.000	0	>
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			\$1,000,001- \$5,000,000	ຄ	ability
	- Christian Androna Park		\$5,000,001- \$25,000.000	3E,	
			\$25,000,001- \$50,000,000		
			Over \$50,000,000	ς.	
Andrews and an artist of the second		<u> </u>	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 randidates and new amphoves report positions held in the current calendar year and two previous years.

Elected School Found Manual	THOMA City Elected School Bound

### SCHEDULE F - AGREEMENTS

Name: William CHAAS Page 6 of 6

Identify the da continuation o employer.	te, parties to, and general terms of any agreement or arra r deferral of payments by a former or current employer oth	Identify the date, parties to, and general terms of any agreement or arrangement that you have 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.
Date	Parties to Agreement	Terms of Agreement
	MONE	
SCHEDUL	SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE	)F \$5,000 PAID BY ONE SOURCE
Report source customers of a government ar	s of compensation received by you or your business affil any corporation, firm, partnership, or other business ente nd any information considered confidential as a result of a	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 an 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
Example.	Doe Jones & Smith, Hometown, Homestate	Accounting Services
	MONR	
Andrew Company of the		