

LEGISLATIVE RESOURCE CENTER

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0FFICE OF THE GLERK
U.S. HOUSE OF REPRESENTATIVES



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2017 FINANCIAL DISCLOSURE STATEMENT UNITED STATES HOUSE OF REPRESENTATIVES	Form A ES For Use by Members, Officers, and Employees	Page 1 of
And the state of t		(Office Use Only)
Name: John Cellery	Daytime Telephone: 201.225.257	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
FILER Member of the U.S. State: House of Representatives District	Officer or Employing Office	Starf Filer Type: (If Applicable) Shared Principel Assistant
REPORT 2017 Annual (Due: May 15, 2018)	Amendment Embration Date of Termination:	nination:
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	HESE QUESTIONS	
Did you, your spouse, or your dependent child. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or Recave more than \$200 in unearned income from any reportable asset during the reporting period?	Yes No E. 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 fling?	arrangement with an Yes No
B. Did you, your spouse, or your dependent child purchase, self, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?	Yes No G Did you, your spouse, or your dependent child receive any reportable glif(s) totaling more than \$390 in value from a single source during the reporting period?	sive from a single 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?	Ves No H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel brailing more than \$390 in value from a single source during the reporting period?	totaling more than reporting period?
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Ves No I. Did any individual or organization make a donation to chartly in lieu of paying you for a speech, appearance, or article during the reporting period?	onation to charity in Yes No
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the data of filing?	ATTACH THE CORRESPONDING SCHEDULE	SCHEDULE IF YOU ANSWER "YES"
IPO AND EXCLUSION OF SPOUSE, DEPENDE	IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE	OF THESE QUESTIONS
₱O – Did you purchase any shares that were allocated as a part of an Init the Committee on Ethics for further guidance.	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.	estion, please contact Yea 🔲 🚜
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Com this report details of such a trust that benefits you, your spouse, or depend	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 the report defails of such a trust that benefits you, your spouse, or dependent child?	we you excluded from Yee No
EXEMPTION - Have you excluded from this report any other assets, "unearred" income, transactions, or fash three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	EXEMPTION - Have you excluded from this report any other essets, "unearned" income, transactions, or liabilities of a spouse or your dependent chid because they meet all trace tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	ecause they meet all Yes No No

SCHEDULE A - ASSETS & "UNEARNED INCOM

& "UNEARNED INCOME"	
Name: John culberson	
Page 2 of 8	

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3	Ŧ	\mathbf{Z}	<u>₹</u>	I	>		Frantplace	Т	}.	If you so choose, you way indicate that an esset income source is that of your spouse (8P) abparedent child (DC) or jointly hald with anyout]. In the optioned column on the lat left	If you report a privately-traded fund that is an Excepted investment Fund, please check the "EFF toor.	Exclusive: Your personal readishing, including ascond- homes and vaculatin homes (unless there was well- ricipins during the appointing person), and any fivenitical interest in, or income derhed from a federal reservorit program, including the Third Sevings Plan.	For an ownership interest in a privately-held busin that as not publicly tracked, state the name of business; the nature of its activities, and geographic location in Block A.	For tental and other real property hald for investment, provide a complete address or description, e.g., 'rental property,' and a city and state.	For bank and other cash accounts, total the amount in all releast-baning accounts. If the total is over \$5,000, list every fewhold methodo where there is move than \$1,000 in merest-basing accounts	For all III As and other relegions plans (such as 40)(%) plans) provide the value for each asset hold in the scorum that exceeds the reporting thresholds:	Provide complete names of stocks and mubici funds (do not use only ticker symbols)	exceeding \$1,000 at the and of the reporting period mad (th) any other reportable sease or source of income that generated mote than \$200 in 'unearred income than \$200 in 'unearred income during the year.	tdensity (a) each asset held for investment or production of income and with a few merior value	>	-
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Μ	9 -	PURGUISE		1	:	l		}	S, S(part), or E						Leave this column blank if there are no transactions that exceeded \$1,000	on asset was sold, please indicate as follows. (8 (part))	ş	purchases (P), sales (S), or exchanges (E) accepting \$1,000 in the reporting	ndicate if the	Transaction	BLOCK E
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SCHEDULE B - TRANSACTIONS

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.)	Name: John culberson	
	Page 3 of 8	

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Report as	y purchase.		or exchange transactions that exceeded \$1,000		Type of Transaction	Transa	ction		,	Date				2	Mount	Amount of Transaction	Sact				4
A pegraph contractor	Could for stay	7	required parties or any around your new property from by you, your provision or your department child to investment or the production of income include transactions that required in a capital local. Provide a brief deportation of an exchange transaction.								>		c	0	m	-	۵	I	-	-	*
purchase u a portion o	transactions : or sale of you if an asset is s	person	Esclude Tensectore believen you, your spouse, or departent distinct. purchase or sale of your pensanal leadence, unless it generated tendel income. If a porison of an asset is sold, please choose "partial sale" as the type of transaction	2 2 28						(MOIDANN) or Quality,										100	DO-
Capital O	Capital Gaine: If a sales tronsaction no tre "capital garm" box, unless it was a tre capital garn mourne on Schedule A.	on Both	Capital Gains: if a sales transaction resulted in a capital gain in excess of 500ft, check the "capital gains" box, utwiss it was an asset in a tex-deferred account, and decides the capital gain norms on Schedus A.	2 2 2 2 2 2 2 2	•	Lei Saio			ick Bex if C moded \$200	application in	001- 1.900	(201- 1.000	1,001- 18,090	10 001- 50 000	60 001- 10-000	-100,000 000,000	000,006 000,006	000,001- 5.000,000	5,000,005 5,000,000	₩ \$50,000,	er \$1,000.0
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SCHEDULE C - EARNED INCOME

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	Name: John culberson	
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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 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 Netional Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME: LIMITS and PROHIBITED INCOME: 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.

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Source (include date of receipt for honoraria)	Туре	Amount
Keyne State	Approved Teaching Fee	\$8,000
Examples: Chi We Roundible (Cd. 2) Origina County Bard of Education	Spouse Speech Spouse Salary	\$1,000 NAA
state of texas retirement amounty	LEUSIMILE PEISON	29,628.00
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SCHEDULE D - LIABILITIES

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Name: John culberson	
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Report liablished 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. 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 your spouse or the child, perent, or shing 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.

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عاملا	አነላ	2014	(592	1286	5/16	Date Liability Incurred MO/YR	
HOUS TON HOME MORTUAL	REVOLUME GREDIT	REVALUE CREDIT	RENOLVING CREDIT	RENOWING CREDIT	Mongage on Renual Property, Dover, DE	Type of Liability	
	1	7		7		\$10,001- \$15,000	
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			ļ			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, disector, trustee of an organization, partners proprietor, representative, employee, or consultant of any composition, firm, partnership, or other business enterprise, norporation, labor organization, or educational or other institution other than the United States. Exclude: Positions hald in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

Position Position	Position Name of Organization

	Name:
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Identify the data, 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 perticipation in an employee welfare or benefit plan maintained by a former employer. Date Parties to Agreement Terms of Agreement

SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$390 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an inclinidual, local meats, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$156 or loss meed not be added towards the \$390 disclosure threshold. Mote: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Ethics.

Source	Description	Value
Example: Mr. Joseph Smith, Arfrigion, VA	Saver Platter (prior determination of personal triendship received from the Committee on Ethics)	\$400

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name: John culberson

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Identity the source and list travel titherary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$380 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 expensely reported under the Foreign Giffs and Decovations Act (FGDA, 5 U.S.C. § 7342); positions 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	Cata(s)	City of Departure-Dealination-City of Return	Lodging? (YN)	Food? (YFR)	Family Marcher Included? (Y7N)
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SCHEDULE I – PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Name: John culbers on Page 8 of 8

Source	Activity	Date	Amount
Association of American Associa	Speech	Feb. 2, 2017	\$2,000
Examples: XYZ Magazine	Article	Aug 13, 2017	\$500