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UNITED STATES HOUSE OF REPRESENTATIVES	_	
FINANCIAL DISCLOSURE STATEMENT	For New Members, Candidates, and New Err	New Employees LEGISLATIVE RESOURCE CENTER
Name: JOE DENHAM	Daytime Telephone:_	2015 DEC 30 AM 9: 56
New Member of or Candidate for State:  U.S. House of Representatives District:  Candidates - Date of Election:	Check if Amendment	(Office Use Only)
New Officer or Employee  Employing Office:	Period Covered: January 1 to Jac. 31, 2015	i: January 1, 2014 A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	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  b. Make more than \$200 in unearned income from any reportable asset during the reporting period?	No	E. Did you hold any reportable positions during the reporting period Yes No U
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes reporting period?	Z Z Z	F. Did you have any reportable agreements or arrangements with Yes No Lancular the reporting period or in the current calendar year up through the date of filing?
D. Did you, your spouse, or your dependent child have any reportable Yes Ilability (more than \$10,000) at any point during the reporting period?	No.	J. Did you receive compensation of more than \$5,000 from a single Yes No No
ATTACH THE COR		ANSWER "YES"
THIS FORM INCLUDES ONLY	THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQU	REQUIRED TO COMPLETE
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 your details of such a trust that benefits you, your spouse, or your details of such a trust that benefits you.	e on Ethics and certain other "excepted trusts" need not be c	isclosed. Have you excluded from Yes No V
<b>EXEMPTION</b> – Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or tests for exemption? Do not answer 'yes' unless you have first consulted with the Committee on Ethics.	r liabilities of a spouse or	dependent child because they meet all three Yes No V

## SCHEDULE A - ASSETS & "UNEARNED INCOME"

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BLOCK A	BLOCK B	вгоск с	BLOCK D
Assets and/or income Sources	Value of Asset	Type of Income	Amount of Income
	indicate value of esset at close of the reporting period. If you use a valuation method other than fair market value,	ting period. #Check all columns that apply. For accounts market value, that generate tax-deferred income (such ac	occurrist for seasets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For a such as lather seasets include the category of income by checking the appropriate box below. Dividends, Interrest
e reporting period, seek or source of their \$200 in	please specify the method used. If an easet was sold during the reporting period and is included only hocease it generated income, the value	401(k), RA, 529 accounts), you may period and is the "Tax-Deferred" column. Divi m	and capital gains, even it reinvested, must be disclosed as income for assets held in t accounts. Check "None" if no income was earned or garanzied.
	should be "None."	reinvested, must be disclosed as income for assets held in taxable accounts.	incomment. Column XII is for assets held by your spouse or dependent child in which you have no interest.
Provide complete names of stocks and mutual funds (do not use only fictor symbols).	Column M is for assets need by your spouse or depender child in which you have no interset.	- 3	feed no.
For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in			
the account that exceeds the reporting thresholds.	,	⇉	Current Year Preceding Year
For bank and other cosh accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	C C C C C C C C C C C C C C C C C C C	3	10
For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state.			The)
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 location in Block A.			ne or Farm (noo
Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income aderived from, a federal retirement program, including the Thrift Sevings Plan.			
If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.		1,009,000	\$1,000,000
If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional octumn on the fair left.	0-000 00,000 250,000 500,000	Asset over \$  S  LAINS  MBLIND TRUS	0 500 000 0,000 0,000 11,000,000 11,000,000 0,000 0,000 0,000 0,000 0,000 11,000,000 11,000,000
For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.		Over \$50,0 Spouse/DC NONE DIVIDEND RENT INTEREST CAPITAL C	None \$1-\$209 \$201-\$1,00 \$1,001-\$2, \$2,501-\$5, \$5,001-\$15 \$15,001-\$15 \$100,001-\$1 \$1,000,001 Over \$5,00 \$201-\$1,00 \$1,001-\$2, \$2,501-\$5, \$5,001-\$15 \$15,001-\$1 \$15,001-\$2 \$15,001-\$1 \$15,001-\$1
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE A -- ASSETS & "UNEARNED INCOME"

Name: TOE DENHAM

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### SCHEDULE C - EARNED INCOME

Name: Lew JE NHLL Page of U  e (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer tonly the source for other spouse earned income exceeding \$1,000. See examples below.
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List the source, type, and amount of earned income from any source and filer's spouse, list the source and amount of any honoraria. Lis

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroli. The 2014 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. The 2015 limit is \$27,225. 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.

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#### SCHEDULE D - LIABILITIES

Name: (See DENHAM Page of 10

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 change 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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		Over \$1,000,000* (Spouse/DC Liability)	~		L

#### **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 calculations.

Position	Position Name of Organization

#### SCHEDULI

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 ser 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 formation of the parties to Agreement.  Terms of Agreement.	SCHEDUI	SCHEDULE F – AGREEMENTS	Name: Jue Dullau Page 10 of 16
Parties to Agreement	Identify the date continuation or	e, parties to, and general terms of any agreement or arrangement that you have deferral of payments by a former or current employer other than the U.S. gove	ne with respect to: future employment; a leave of absence during the period of government service; annent; or continuing participation in an employee welfare or benefit plan maintained by a former employer.
	Date	Parties to Agreement	Terms of Agreement
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# 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.

government a	nd any information considered confidential as a result of a	government and any information considered comingenual as a result of a privileged relationship recognized by law. Do not repeat information listed on a chedule C.
	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
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