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NITED S	NITED STATES HOUSE OF REPRESENTATIVES	S Form A	TENGLMENT PERMITTING TO THE STATE OF THE STA
016 FINAN	016 FINANCIAL DISCLOSURE STATEMENT	For Use by Members, Officers, and Employees	2017 MAY 15 PM 4: 35
)		(Office Use Only)
ame:	lame: Jaime Kunvera Kentler	Daytime Telephone: (202)225-3536	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
FILER STATUS	Member of the U.S. House of Representatives District:	Officer or Employing Office:	Staff Filer Type: (If Applicable) Shared Principal Assistant
REPORT TYPE	2016 Annual (Due: May 15, 2017)	Amendment Termination Date of Termination:	ninabon:
		Date of Ter	ninauon:

PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

YOU ANSWER "YES	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	1 may 2	in the current calendar year up through the date of filing?
		w\	E. Did you hold any reportable positions during the reporting period or
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 X	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$375 in value from a single source during the reporting period?	Yes No X	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 \$375 in value from a single source during the reporting period?	Yes	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 EACH OF THESE QUESTIONS

Yes No X	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.
Yes No X	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 No X	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.

SCHEDULE A - ASSETS & "UNEARNED INCOME"

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		16 (redit Union	ABC Hedge Fund X	Examples: Simon & Schuster	SP Mega Corp. Stock Eth	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. For rental and other real property held 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 location in Block A. Exclude: Your personal residence, including second fromes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Pfan. If you have a privately-braded fund that is an Excepted investment Fund, please check the "EIF" box. If you so choose, you may inclicate that an asset or income others of your spouse (SP) or dependent chald (CC), or joinly held with anyone (JT), in the optional column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	ore electric man exceeds the reporting measures.	Provide complete names of stocks and mutual funds (do not use only ticker symbols). For all IRAs and other referement plans (such as 401(k) plans) provide the value for each asset held in	Internity (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 that generated more than \$200 in 'unsamed' income that generated more than \$200 in 'unsamed' income during the year.	BLOCK A Assets and/or Income Sources	
十						None	, >	1 -			
						\$1-\$1,000		have	ation at a second		
				Indefinite		\$1,001-\$15,000		you have no interest.	metho metho et wa tgene		
	1	X		畫		\$15,001-\$50,000		erest.	of assident		
+	+				×	\$50,001-\$100,000		-	er thai	_	
						\$100,001-\$250,000		-	ciosa n fair i ng tha	alu.	
+-	-		×			\$250,001-\$500,000			narke narke repo value	BLÖCK B Value of Asset	
╁	1				┢╌╢	\$500,001-\$1,000,000		1	t value	Ass.	
\top		\vdash				\$1,000,001-\$5,000,000		1 3	Indicate value or 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 had bu your source or dependent shild in which	*	
	T					\$5,000,001-\$25,000,000		1	None None sesp		
						\$25,000,001-\$50,000,000	~	1	e is bed in		
	İ					Over \$50,000,000		1	didec		
T		Ì			- "	Spouse/DC Asset over \$1,000,000*	2		ethod fonly		
-						NONE		90		-	<u> </u>
	1	X			×	DIVIDENDS		9	Check all columns that apply, generate tax-deferred income (su generate tax-deferred income (su 529 accounts), you may check column. Dividends, interest, and if reinvested, must be disclossesset held in taxable accounts		Name:
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						INTEREST		1 1	ofeme ofeme onds, onds,	₹	
T						CAPITAL GAINS			d inco	BLOCK C	aime
						EXCEPTED/BLIND TRUST			me (a	BLOCK C	چ
						TAX-DEFERRED		1 8		ğ `	
			Partnership Income	Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		aooo ga maana a moo mo caming ma repoung parou.		8	Hurera
						None		ij Ç Kol	may categ Divid must		
	-	\succeq				\$1-\$200		Column XII is for assets held in which you have no interest.	check jory (jory (jends tends t be		Sent
	<u> </u>			×		\$201-\$1,000	=	illis fo	the	İ	<u> </u> }_
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			×			\$2,501-\$5,000	-	ets he	ou ch colu by ch and as in	BLOCK D)
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						\$15,001-\$50,000	_≨	your:	For at the sal game	훓췽	
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_	<u> </u>					\$100,001-\$1,000,000	×	ora	rmed" reprie	æ	Page _.
-			Щ			\$1,000,001-\$5,000,000	×	lepen	torgania		
\bot			Щ			Over \$5,000,000	<u>×</u>	*Column XII is for assets held by your spouse or dependent child in which you have no interest.	For assets for which you checked "fax-Deferred" in Block C, you may check the "None" column. For all other assets indicate the category of income by checking the appropriate box below. Dividencia, interest, and ceptial gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if no income was earned or generated.		'
+-					rn.	Spouse/DC Asset with Income over \$1,000,000*	ĕ		OF STATE		<u> </u>
				į	S(part)	blank if there are no transactions that exceeded \$1,000.	Leave this column	period. period. If only a portion of an asset was sold, a please indicate as follows: follows: (6 (not))	Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000	BLOCK E	%

SCHEDULE D - LIABILITIES

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Name:
Jaime
Herina
Butter

Page 3 of 3

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. 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.

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			มงผ	Exemple						
		J	wells forgo	First Bank of Wilmington, DE	Creditor					
		•	91/10	5/98	Date Liability Incurred MO/YR					
:) U	Mortgage	Mortgage on Rental Property, Dover, DE	Type of Liability					
					\$10,001- \$15,000	>				
					\$15,001- \$60,000	œ				
					\$50,001- \$100,000	c				
				×	\$100,001- \$250,000	D				
			\times		\$250,001- \$500,000	m	Amount of Liability			
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					\$1,000,001- \$5,000,000	G	bility			
					\$5,000,001- \$25,000,000	Ŧ				
					\$25,000,001- \$50,000,000	_				
					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 hald in any retigious social fraternal or political entities (such as political parties and campaign programment) and positions social fraternal or political entities (such as political parties and campaign programment).

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				Position	Positions neid in any religious, social, fraternal, or political en
				Name of Organization	Positions held in any religious, social, tratemat, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.