



Filing ID #10017188

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • 135 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Hon. Mark E. Amodei
Status: Member
State/District: NV02

FILING INFORMATION

Filing Type: Annual Report
Filing Year: 2016
Filing Date: 05/16/2017

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
681 S Richmond Ave, LOCATION: Carson City, NV, US		\$100,001 - \$250,000	None		<input type="checkbox"/>
Bank of America		\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>
Greater Nevada Credit Union		\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>
National Financial Services - Wells (IRA)		\$50,001 - \$100,000	Tax-Deferred		<input type="checkbox"/>
National Financial Services - CNL (IRA)		\$50,001 - \$100,000	Tax-Deferred		<input type="checkbox"/>

SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE C: EARNED INCOME

None disclosed.

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	Everhome Mortgage	December 2008	Mortgage on primary residence	\$100,001 - \$250,000
	Everhome Mortgage	November 2014	Mortgage on investment property	\$100,001 - \$250,000

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

None disclosed.

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

IPO: Did you purchase any shares that were allocated as a part of an Initial Public Offering?

☐ Yes ☒ No

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 benefiting you, your spouse, or dependent child?

☐ Yes ☒ No

Exemption: 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?

☐ Yes ☒ No

CERTIFICATION AND SIGNATURE

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Hon. Mark E. Amodei , 05/16/2017