PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

	CHEDULE IF YOU ANSWER "YES" S THAT YOU ARE REQUIRED TO COMPLETE	ATTACH THE CORRESPONDING SCHEDULE IF YOU ARE	ATTACH THE CORRESPONDING SCHEDULE IF YOU THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE
55,000 from a single Yes X No	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	Yes No X	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?
arrangements with Yes No X	F. Did you have any reportable agreements or arrangements with an outside entity during the reporting period or in the current calendar year up through the date of filing?	Yes X 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?
the reporting period Yes No X	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes X 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. Make more than \$200 in unearned income from any reportable asset during the reporting period?

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

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 dependent child?

EXEMPTION – Have you excluded from this report any other assets, "uneamed" income, transactions, 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. Ύes

Yes
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SCHEDULE A -- ASSETS & "UNEARNED INCOME" Name: JOAN MCCARTHY LASON DE Page 2 of

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JT ALLERGAN PLC	3T CHARLES	0	7	7	+	_		income during the reporting period); and any financial income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box. 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 column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	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 thomas and vacation homes (volves there was rental thomas and vacation homes).	For rental and other reat property held for investment provide a complete address or description, e.g. rental property," and a city and state.	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.	ror all in-A-s and other retrement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds. For bank and other cash accounts total the amount in	Provide complete names of slocks and mutual funds (do not use only ticker symbols).	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 tending the control of	`.≽	
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SCHEDULE A -- ASSETS & "UNEARNED INCOME"

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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1	ا ا	L	l													Spouse/DC Income over \$1,000,000*	

SCHEDULE A - ASSETS & "UNEARNED INCOME"

	COLLEGE TO A CHENTRED INCOME	Name: JOAN	MCCARTHY KASONDE Page 5 of 8
BLOCKA	BLOCK 8	BLOCK C	BLOCK D
Assets and/or Income Sources	Value of Asset	Type of Income	Amount of Income
	> BB CC CC CC CC CC CC CC CC CC CC CC CC		Current Year Preceding Year
			0* NI NI NI NI NI NI NI NI NI NI NI NI NI
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SP, DC, ASSET NAME EIF			
COMMUNITY HEALTH	×	×	X
CHARLES SCHWAR	×	*	× ×
SP CHARLES SCHWAD IRA:			
SP BANK OF AMERICA	×	×	X
SP CITIEROUP INC	×	×	X
SP MORGAN STANLEY	×	×	
CALAHO	×	×	X
SP AES TR GVT	*	X	
SP MORGAN STANLEY	X	×	×
SP SEKSPAN CORP	×	×	
1	×	×	X
SPEXPRESS SCRIPTS	X	×	×
SPIGCAXOSMITH Kline	*	X	
SPILLUHINA INC	×	×	×
SAMC KESSON INC	×	×	

	6 & "UNEARNED INCOME"
Name:	OME"
Name: JOAN MCCARTHY LASONDE	
ARTHY LASONDE	
Page 6 of 8	
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BLOCK A Assets and/or Income Sources	Value of Asset	BLOCK C Type of Income	Current Year	Preceding
	B C D E F 6 H 1 J K	*	Current Year	Preceding Year
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	None \$1,\$1,000 \$1,001-\$15,000 \$15,001-\$50,000 \$50,001-\$100,000 \$100,001-\$250,000 \$250,001-\$1,000,000 \$1,000,001-\$5,000,00 \$5,000,001-\$50,000,00 \$25,000,001-\$50,000,00	Spouse/DC Asset over NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TR TAX-DEFERRED Other Type of Income or	None \$1.\$200 \$201-\$1,000 \$1,001-\$2,500 \$2,501-\$5,000 \$15,001-\$15,000 \$50,001-\$100,000 \$100,001-\$1,000,000 \$1,000,001-\$5,000,000 Over \$5,000,000 Spouse/DC Income over	None \$1-\$200 \$201-\$1,000 \$1,001-\$2,500 \$2,501-\$5,000 \$5,001-\$15,000 \$15,001-\$50,000 \$50,001-\$100,000
SP, DC, ASSET NAME EIF JT.				
SP TEGNA INC	X	×	*	×
SP LLWBER ARHOUR INC	×	*		
\sim	×	×		X
SP OCCIDENTAL PETE	*	X	*	
_	*	×	X	×
, ,	*	×		× .
SP VENTAS INC	*	*		X
SP KINDER MORGEN	×	X		X
ושו	*	277	X	X
SP SHAMROCK 11 Club	X	PART	X	<u> </u>
LIF	*	*	*	×
SP PRINCIPAL LIFE INS	×	×	X	X

SCHEDULE C - EARNED INCOME

Name: JOAN MCCA	
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Page 8	
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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 retirement 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 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.

TRIAX AVRAM ARIZONA Examples: Source (include date of receipt for honoraria) INDUSTRIES KRAFT ABC Treda Association, Battimore, MD (July 15)
State of Maryland
Civil War Roundtable (Oct. 2)
Ontario County Board of Education DEPT. OF ECONOMIC 710 SECLIBITY SPOUSE COMP. SELF-EMPLOYMENT SPOUSE SALARY Spouse Speech Spouse Salary Type W Current Year to Filing 3,000 0 Ó \$20,000 \$0 N/A Amount W 65, 835 15,375 6,240 Preceding Year \$500 \$76,000 \$1,000 N/A