

FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Hon. Renee L. Ellmers

Status: Member State/District: NC02

FILING INFORMATION

Filing Type: Annual Report

Filing Year: 2014

Filing Date: 05/15/2015

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Brent R. Ellmers, M.D. PA	SP	\$50,001 - \$100,000	Medical practice	Not Applicable	
LOCATION: Dunn, NC, US DESCRIPTION: Spouses medical practice					
Guardian Whole Life Insurance	JT	\$50,001 - \$100,000	None		П
Iconix Brand Group, Inc. (ICON)	JT	\$1,001 - \$15,000	None		
SSGAcollege Today portfolio Location: NV Description: Direct payment to NC State University	JT	\$1,001 - \$15,000	Interest	\$1,001 - \$2,500	П
Vanguard Target Retirement Fund 2025FD	SP	\$15,001 - \$50,000	Tax-Deferred	None	

SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE C: EARNED INCOME

Source	Туре	Amount
Wayne Memorial Hospital	Spouses salary	N/A
Brent Ellmers, MD, PA	Spouses Salary	N/A

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Туре	Amount of Liability
JT	PNC Bank	October 2000	Mortgage	\$250,001 - \$500,000
JT	PNC Bank	October 2003	Home Equity Line of Credit	\$50,001 - \$100,000
JT	New Century Bank	August 2008	Loan on Lot 1520 Carolina BLVD Topsail Beach, NC	\$250,001 - \$500,000
JT	Chase Card Services	Dec 1013	CreditCard	\$10,000 - \$15,000
JT	Capitol One Bank, Charlotte	Dec 2013	Credit Card	\$10,000 - \$15,000
JT	Barclay Card, Philadelphia PA	Dec 1013	Credit Card	\$10,000 - \$15,000
SP	PNC Bank	May 2013	Business Line of Credit	\$15,001 - \$50,000

SCHEDULE **E**: **P**OSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

		Trip Details			Inclusions		
Source	Start Date	End Date	Itinerary	Days at Own Exp.	Lodging?	Food?	Family?
American Enterprise Institute	03/7/2014	03/9/2014	Dunn, NC - Sea Island, GA - Dunn, NC	0	<u></u>	<u> </u>	
Official CODEL sponsored by	05/9/2014	05/14/2014	Washington, DC - Kabul, Afghanistan -	0	\checkmark	\checkmark	

		Trip Details			Inclusions		
Source	Start Date	End Date	Itinerary	Days at Own Exp.	Lodging?	Food?	Family?
Congresswoman Robey			Washington, DC		·		
Ripon Society	11/7/2014	11/11/2014	Raleigh, NC - Rome, Italy - Raleigh,NC	0	<u> </u>	<u> </u>	<u>~</u>

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

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

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

○ 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?

C 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?

C 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. Renee L. Ellmers, 05/15/2015