#### PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS Name: UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT EXEMPTION – Have you excluded from this report any other assets, "unearned" income, 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. 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? D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the A. Did you, your spouse, or your dependent child: reporting period? BULVE a. Own any reportable asset that was worth more than \$1,000 at the Receive more than \$200 in uneamed income from any reportable end of the reporting period? or asset during the reporting period? Jeff Bursick X Employing Office: New Officer or Employee U.S. House of Representatives New Member of or Candidate for Candidates - Date of Election: THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" March State: District: Shared Staff Filer Type (if Applicable): 3,2019 3 × × 8 ¥ × × 0 X 1 Daytime Telephone:\_ For New Members, Candidates, and New Employeest GISLATIVE RESOURCE CENTER Principal Assistant 중 LAST LES 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? E. Did you hold any reportable positions during the reporting period or in the current catendar year up through the date of filing? J. Did you receive compensation of more than \$5,000 from single source in the current year and two prior years? FORM B ៩ Period Covered: January 1, Check if Amendment STMAN ILLEGIBLE Sage 1 or 5 1019 NOV 26 PM 2: 36 A \$200 penalty shall be assessed against any individual who files more than 30 days late. CHIVE OF REPRESENTATIVES (Office Use Only) 8 8 **₹ 8** ğ X X 20 중 ᇂ 풓 중 X K X

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SCHEDULE A -- ASSETS & "UNEARNED INCOME"

Name: Jeff Burdick

# SCHEDULE C - EARNED INCOME

an the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer	Name: Jeff Burdick	
reporting period.	Page 3 of 5	
For both the filer	5	

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 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 exemples 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 cutside sumed income limit and prohibitions on types of income may apply to you after you are on House payroli. The 2018 limit on outside serined income for Members and employees compensated at or above the "senior staff" rate was \$28,050. The 2019 limit is \$26,440. 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.	nd prohibitions on types of incomwas \$28,050. The 2019 limit is \$50.00 Members and senior staff.	e may apply to you efter you are or 26,440. In addition, certain types of	n House payroli. The 2018 limit on income (notably honoraria, director's
Course (include data of receipt for horseads)	Time	J. J	Amount
Source (ilidude date di receipt foi fiorioraria)	гуре	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honoredum	\$0	\$500
EXAMPles: Civil War Roundable (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	SO SO	\$1,000 NA
State of California (Caltrans)	Salary	\$35,000	
Hudson Int') (spouse's employer)	Sporse Salary	\$160,000	\$189,000
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### SCHEDULE D - LIABILITIES

Name: Jeff Burdick

Page 4 of 5

Report liabilities of over \$10,000 awed 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 illabilities 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, perent, 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.

			DC. JT		
	J. D.	Example			
	J.D. Wentworth	First Bank of Wilmington, DE	Creditor		
	7/17	5/16	Date Liability Incurred MO/YR	_	
	Home Mortgage	Mortgage on Rental Property, Dover, DE	Type of Liability		
			\$10,001- \$15,000	>	
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			Over \$50,000,000	-	]
			Over \$1,000,000* (Spouse/DC Liability)	*	

#### SCHEDULE E - POSITIONS

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 calendar year. First-year candidates and new employees report positions held in the current calendar year. First-year candidates and new employees report positions held in the current calendar year. Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partners, 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

Position	Position Name of Organization
NONE	

## SCHEDULE F - AGREEMENTS

arrangement that you have with respect to: future employment; a leave of absence during the period of government service;	
with respect to: future employmen	Name:
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overnment service;	Page 5 of 5

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 service continuation or defenral 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 former

Date	Parties to Agreement	Terms of Agreement
	NONE	

# 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, pertnership, 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.

	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
	NoNG	