

OCT 07 2015

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENTFORM B
For New Members, Candidates, and New Employees

Name: Omar Navarro

Daytime Telephone: _____

2015 OCT -9 AM 11:12

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(Office Use Only)

FILER
STATUSNew Member of or Candidate for
U.S. House of Representatives
State: CA
District: 44th
Candidates - Date of Election: June 7, 2016Check if
AmendmentNew Officer or Employee
Employing Office: _____Period Covered: January 1, _____
to _____A \$200 penalty shall be assessed against any
individual who files more than 30 days late.

PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

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? orb. Make more than \$200 in unearned income from any reportable
asset during the reporting period?Yes ☐ No ☒E. Did you hold any reportable positions during the reporting period
or in the current calendar year up through the date of filing?Yes ☒ 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?Yes ☒ No ☐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 ☐ 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 ☐J. Did you receive compensation of more than \$5,000 from a single
source in the current year and two prior years?Yes ☒ No ☐

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"

THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE

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?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? Do not answer "yes" unless you have first consulted with the Committee on Ethics.Yes ☐ No ☒

SCHEDULE C - EARNED INCOME

Name: Ormar Navarro

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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.

Source (include date of receipt for honoraria)	Type	Amount	
		Current Year to Filing	Preceding Year
Examples:			
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
State of Maryland	Salary	\$20,000	\$76,000
Civil War Roundtable (Oct. 2)	Spouse Speech	\$0	\$1,000
Ontario County Board of Education	Spouse Salary	N/A	N/A
Einstien Noah Restaurant Group	Spouse salary	11,000	16,000
Fusion Dance studios	Spouse salary	3,000	2,400
LA Dance Connection	Spouse salary	3,000	N/A
Dance Center Torrance	Spouse salary	700	N/A
ON Social Marketing	Salary	5000	N/A
DAVID Hudley for Assembly	Salary	N/A	8,000
DAVID Hudley for Assembly	Spouse Salary	N/A	4,000
Golden State Debt Management	Salary	5,700	N/A
Auto Nation Volo	Salary	N/A	2,000

SCHEDULE D - LIABILITIES

Name: Omar Navarro

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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. **New 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.

SP, DC, JT	Creditor	Date Liability Incurred MO/YR	Type of Liability	Amount of Liability										
				A \$10,001- \$15,000	B \$15,001- \$50,000	C \$50,001- \$100,000	D \$100,001- \$250,000	E \$250,001- \$500,000	F \$500,001- \$1,000,000	G \$1,000,001- \$5,000,000	H \$5,000,001- \$25,000,000	I \$25,000,001- \$50,000,000	J Over \$50,000,000	K Over \$1,000,000* (Spouse/DC Liability)
Example	First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE				X							
DC	Department of ED		Student Loans		X									

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, 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 held in any religious, social, fraternal, or 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 and two previous years.

Position	Name of Organization
Founder	ON Social Marketing

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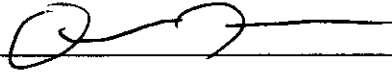
CAMPAIGN NOTICE REGARDING FINANCIAL DISCLOSURE REQUIREMENT

If you have not yet raised (either through contributions or loans from yourself or others) or spent in excess of \$5,000 for your campaign, or if you have withdrawn your candidacy, please indicate your status and sign and date below.

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U.S. HOUSE OF REPRESENTATIVES

**THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED.
PLEASE COMPLETE BOTH PAGES AND RETURN TO THE OFFICE OF THE CLERK AT THE
MAILING ADDRESS BELOW.**

Signature:  Date: 10/11
Name (Please Print or Type): Omar Navarro
State: CA District: 44th
Daytime Telephone: 310-750-5691

(THIS PAGE WILL NOT BE MADE PUBLICLY AVAILABLE)

RETURN COMPLETED STATEMENT TO:
The Clerk, U.S. House of Representatives
Legislative Resource Center
135 Cannon House Office Building
Washington, DC 20515-6601