UNITED STATES HOUSE OF REPRESENTATIVES FOR	FORM B For New Members, Candidates, and N	FORM B andidates, and New EmployeekE	Page 1 of 5
Name: Edwin P. Duterte Day	Daytime Telephone.	11 9	8 MAY 21 PM 1: 14 Brive of the beach the holist of perpendicular the beach
New Member of or Candidate for State: California X U.S. House of Representatives District: 43 Candidates – Date of Election: June 5, 2018		Check if Amendment	(Office Use Only)
New Officer or Employee Staff Filer Ty Employing Office: Shared	Staff Filer Type (If Applicable): Shared Principal Assistant	Period Covered: January 1, 2018 to May 1, 2018 li	A \$200 penaity shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE	IESE QUESTIONS	NS	
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. Receive more than \$200 in unearmed income from any reportable asset during the reporting period?	No E. Di	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	g the reporting yes No X
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?	No X F. Di outsi	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?	arrangement with an Yes No X
D. Did you, your spouse, or your dependent child have any reportable Yes X liability (more than \$10,000) at any point during the reporting period?	No J. Di	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	\$5,000 from 8 Yès No X
ATTACH THE CORRESPONDING SCHEDULE IF YOU THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE	ONDING SCHED	OULE IF YOU ANSWER "YES" AT YOU ARE REQUIRED TO COMPLETE	COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>BO</u>	ORMATION - A		TH OF THESE QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need from this report details of such a trust that benefits you, your spouse, or dependent child?	thics and certain other "elid?	excepted trusts" need not be disclosed. Have you excluded	lave you excluded Yes No
EXEMPTION – Have you excluded from this report any other assets, "uneamed" income, or liabilities of a spouse or dependent chexemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	ne, or liabilities of a spou	use or dependent child because they meet all three tests for	at all three tests for Yes No X

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

Edwin P. Dutete

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				Rental Property - 3339 Groveland, Ave Antaings, CA 95943	ABC Hedge Fund X	Examples: Simon & Schuster	Mega Carp Stock	EF.	For bank and other cash accounts, total the amount in sil inswet-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts. For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state the name of the that is not pushfully traded, state the name of the geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); and any financial increase intring the reporting period); and any financial increase intring the reporting period); and any financial increase during the reporting period); and say financial increase intring the reporting period; and say financial increase intring the reporting period; and say financial increase intring the reporting the Thrift Servings Plannia retirement program, including the Thrift Servings Plannia retirement program in Block A.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	y (a) sech asset held for investment or dion of income and with a fair market value ling \$1,000 at the end of the reporting period, any other reportable asset or source of income generated more than \$200 in 'unearned' a during the year.	Assets and/or income Sources	BLOCK A
						Indefinite		×	Nome > \$1-\$1,000 op \$1,001-\$15,000 C \$15,001-\$50,000 op \$80,001-\$100,000 op		*Column M is for assets held by your spouse or dependent child in which you have no interest.	indicate value of sessit at dose of the reporting period. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold during the reporting period and is included only because it generated income, the value should be "None."	٧.	
				×	×				\$100,001-\$250,000 TI \$250,001-\$600,000 & C \$500,001-\$1,000,000		s held by your spous no interest.	at close of the reports other than fair mark d. during the reporting t generated income, t	Value of Asset	вгоск в
									\$5,000,001-\$25,000,000					
				×				×	DIMIDENDS RENT INTEREST CAPITAL GAINS		'None' If the asset garns during the reporting period.	Check all columns that apply. For accounts that generate tax-deferred income (such as 401(b), IRA, or 529 accounts), you may check the "Tax-Corferred" column. Dividenda, thereat, and capital gaths, even if rehrvented, must be disclosed as knooned or seases had in transfer accounts. Check	Type of Income	вгоск с
					Partnership	Royalina			ENCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		enerated no income lod.	apply. For account rad income (such a units), you may check kirm. Dividends it gains, even it faciosed as income the accounts. Check accounts.	ncome	KC
					10.5	Ť	T		None -	1-				\neg
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									\$50,001-\$100,000 ≦			yyou man yy		
	<u> </u>	L	<u> </u>	<u> </u>	<u> </u>	\perp	1		\$100,000,1 4 1,000,000 👨	1		For easets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other easets indicate the category of income by checking the appropriate box below. Dividends, interset, and capital gains, even if reinvested, must be disclosed as income for easets held in taxable eccounts. Check "None" if no income was earned or generated. "Column XII is for easets held by your spouse or dependent child in which you have no interset.	_	
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	1	1	1	<u> L</u>	1	\perp			Spouse/DC Income over \$1,000,000° ≦			# 2 2		

Use additional sheets if more space is required.

SCHEDULE C - EARNED INCOME

Name:	
Edwin P. Duterte	
Page 3 or \	

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.
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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 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. 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.	grams, and benefits received under the Sou ohibited income may apply to you after yo The 2017 limit is \$27,765. In addition, cert and senior staff.	dal Security Act. xu are on House payroli. The 2016 ain types of income (notably honorar	limit on outside earned income for ia, director's fees, and payments for
	•		Amount
Source (include date of receipt for nonoraria)	ı ype	Current Year to Filing	Preceding Year
	Honorailum	\$00,000	\$600 \$76,000
EXBITID188: CHill War Roundtable (Oct. 2) Ontario County Board of Education	Azeleg esnods	\$0 N/A	\$1,000 N/A
2/8	2/8		

SCHEDULE D - LIABILITIES

Name: Edwin P. Duterte Page 4 of 5

Report liabilities of over \$10,000 owed to any one creditor at any time 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 yours 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.

		Cellber	Example	ос, л			exceeded \$ 10,000.
		Caliber Home Logina	First Bank of Wilmington, DE	Creditor			AUD. COLUMNIA IS TO TRADITUSE FISHE SCIENT BY YOUR SPOURSE OF CEPTAINETT CHINA.
		01/2015	5/96	Date Liability Incurred MO/YR			dely by your aport
		Mortgage on Rental Property	Mongage on Rantal Property, Dover, DE	Type of Liability			age of department white.
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				\$15,001- \$50,000			
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				\$1,000,001- \$5,000,000	9	bility	
				\$5,000,001- \$25,000,000	Œ		
				\$25,000,001- \$50,000,000	-		
_				Over \$50,000,000	_		
				Over \$1,000,000* (Spouse/DC Liability)	*		

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, pertner, 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, fratemat, 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	Position Name of Organization
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SCHEDULE F -- AGRE

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al terms of any agreement or arrangement that you hay a former or current employer other than the U.S. governation to Agreement	EMENTS
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 deferral 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 employer. Date Parties to Agreement Terms of Agreement	Name: Edwin P. Duterte

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 the prior years. This includes the names of clients and customers of any corporation, firm, partnership, 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.

SOABILILIALIT S	IN any information considered controlled as a result of	CARBUMENT SERVING COMPAGNED COMPARISHER SERVING STANDARD COMPARISHER SERVI
	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Homelown, Homestate	Accounting Services
	NA	