PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance. D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? all three tests for exemption? Do not answer 'yes' unless you have first consulted with the Committee on Ethics EXEMPTION - Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or your dependent child because they meet from this report details of such a trust that benefits you, your spouse, or dependent child? C. Did you or your spouse have "eamed" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the exchange any securities or reportable real estate in a transaction B. Did you, your spouse, or your dependent child purchase, sell, or A. Did you, your spouse, or your dependent child: 2017 FINANCIAL DISCLOSURE STATEMENT UNITED STATES HOUSE OF REPRESENTATIVES TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded Name: reporting period's exceeding \$1,000 during the reporting period? REPORT TYPE FILER STATUS a. Own any reportable asset that was worth more than \$1,000 at the Receive more than \$200 in unearned income from any reportable end of the reporting period? or asset during the reporting period Ente Paulier X X 2017 Annual (Due: May 15, 2018) House of Representatives Member of the U.S. State: District: Yes Yes Yes Yes Yes 3 X X X Daytime Telephone: Amendment Š Š Š Ş 중 For Use by Members, Officers, and Employees X X ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period? outside entity during the reporting period or in the current calendar year up through the date of filing? F. Did you have any reportable agreement or arrangement with an reportable travel or reimbursements for travel totaling more than \$390 in value from a single source during the reporting period? H. Did you, your spouse, or your dependent child receive any G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$390 in value from a single source during the reporting period? Form A 202.225.2871 Employee Officer or Employing Office: Termination Date of Termination: U.S. HOUSE OF REPRESENTATIVES A \$200 penalty shall be assessed against any individual who files more than 30 days late. LEGISLATIVE RESOURCE CENTER 18 MANTICLESUS & MINER 25 HAND DELIVERED: 1 or 11 Shared Staff Filer Type: (If Applicable) Yes Ύes Ύes Yes Yes Yes Ύes Principal Assistant Š 몽 20 용 중 ĕ 중 X ×

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SCHEDULE A - ASSETS & "UNEARNED INCOM

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BLOCK C	Name: Erik Paulsen
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SCHEDULE A -- ASSETS & "UNEARNED INCOME"

Name:

Page 4 of 11

SCHEDULE B - TRANSACTIONS

Name: Ent Palsa Page 5 of 11

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Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the	Туре	Type of Transaction	saction		đ	Date		1.]_≥	Amount of		Transaction]8			
reporting period of any security in real production of income, include transactions that dependent child for investment or the production of income, include transaction resulted in a capital loss. Provide a brief description of an exchange transaction resulted in a capital loss.		•			Exceeded		>	œ	n	0	m	П	6	x	_	۴.	~
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Capital Gains: if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose the popular and property of the popular property.	hase		al Sale	vángé		weekly, if applicable	01- ,000	,001- ,000	,001- 0,000	0,001- 0,000	0,001- 0,000	0,001- 000,000	000,001- 000,000	000,001- ,000,000	,000,001- ,000,000	er \$50,000	er \$1,000, ouse/DC /
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SCHEDULE B - TRANSACTIONS

Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period of any security or real property held by you, your spouse, or your dependent child for investment or the production of income. Include transactions that resulted in a capital loss. Provide a brief description of an exchange transaction. Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose "partial sale" as the type of transaction. Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A. SP,DC,JT * Column K is for assets solety held by your spouse or dependent child. £ Ishur (Care S) PTOHISHUR Michael ETF Mega Corp. Slock Asset Purchase Type of Transaction × Partial Sale Exchange Check Box if Capital Gain Exceeded \$200 Name: こんかつ (MOIDAYR) or Quarterly, Monthly, or Bi-weetily, if applicable Date 3/9/17 \$1,001-\$15,000 > \$15,001œ \$50,000 \$50,001-\$100,000 n \$100,001-\$250,000 0 Amount of Transaction \$250,001-\$500,000 \$500,001-71 \$1,000,000 \$1,000,001-\$5,000,000 ø Page \$5,000,001-\$25,000,000 * • \$25,000,001-\$50,000,000 앜 Over \$50,000,000 ٤, = * (Spouse/DC Asset)

SCHEDULE C - EARNED INCOME

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Name: ZNA Faulses	Page 7 of 11
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 a spouse, list	xorting period. For a 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: The 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited. Source (include date of receipt for honoraria) Type Amount Source (include date of receipt for honoraria)	ry relationship) are totally prohibited. Type	\$27,765. The 2018 limit is \$28,050. Amount
Koene Siale Siate of Maryland Civil War Roundtable (Oct. 2) Ontario County Board of Education	Approved Teaching Fee Legislative Pension Spouse Speech Spouse Salary	\$6,000 \$18,000 \$1,000 NVA
Independent School District 27-3	Sparse Sclery	7 4

SCHEDULE D - LIABILITIES

Name: Mir Pilson Page_ 4 힟

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. 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); toans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities of the 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.

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		Example			
		First Bank of Wilmington, DE	Creditor		
		on, DE			
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		Mortgage on Rental Property, Dover, DE	Type of Liability		
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			Over \$50,000,000	٠	
			Over \$1,000,000* (Spouse/DC Liability)	*	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year 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, fratemal, or political entities (such as political parties and campaign proprietions); and positions solely of an honorary nature.

Positions neid in any religious, social, traterilar, or political et	Positions religious, social, fratefrat, of political strates such as political parties and campaign organizations), and positions socially religious, social, fratefrat, of political strategy social, fratefrat, or political strategy and political strategy and political strategy and political strategy.
Position	Name of Organization

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$390 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

EXCLUDE: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

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	Source	Date(s)	City of Departure-Destination-City of Return	Lodging? (Y/N)	Food? (Y/N)	Family Member Included? (Y/N)
	Government of China (MECEA)	Aug. 6-11	DC-Beijing, China-DC	۲	*	×
Examples:	Habitat for Humanity (chanty fundralser)	Mar. 3-4	DC-Boston-DC	۲	Y	۲
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SCHEDULE F - AGREEMENTS

Name: Page_ 7 <u>으</u> -

Identify the da continuation of employer.	Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employer.	ave with respect to: future employment; a leave of absence during the period of government service; vernment; or continuing participation in an employee welfare or benefit plan maintained by a former
Date	Parties to Agreement	Terms of Agreement

SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$390 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$156 or less need not be added towards the \$390 disclosure threshold. Note: The gift rule (House Rule 25, dause 5) prohibits acceptance of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Ethics.

Section States of Land Control of Land		
Source	Description	Value
Example: Mr. Joseph Smith, Arlington, VA	Silver Platter (prior determination of personal friendship received from the Committee on Ethics)	\$400

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SCHEDULE I PAYMENTS MADE TO CHARITY IN JIEU OF HONORARIA	Name:	Page	e 11 of 11
ist the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sporsor of an event to a charitable organization in lieu of paying an honorarium to you. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.	rr of an event to a charitable organization	in lieu of paying an honor	rarium to you. A separate
Source	Activity	Date	Amount
Association of American Associ	Speech	Feb, 2, 2017	\$2,000
XYZ Magazine	Article	Aug. 13, 2017	\$500
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