UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	FORM B For New Members, Candidates, and New Employees	Tubi mana allibate for 7
Name: 200 Laboy	Daytime Telephone:	2015 JUN 18 AM II: 51
New Member of or Candidate for State: PR U.S. House of Representatives District: Candidates – Date of Election: 11 /08 / 2016	Check if Amendment	WS. HOUSE OF THE CLEAN COMES OF THE CLEAN COMES OF USE OF AFRICATIVES
New Officer or Employee Employing Office:	Period Covered: January 1, 2014 to May 15, 2015	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS	F 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? Or b. Make more than \$200 in unearned income from any reportable asset during the reporting period?	No 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 period Yes No No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes reporting period?	No F. Do you have any reportable agreements or arrangements with an outside entity?	arrangements with Yes V No
D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	No 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 a single Yes No No
ATTACH THE CORF	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER	INFORMATION - ANSWER BOTH OF THESE QUESTIONS	QUESTIONS
TRUSTS ~ Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" this report details of such a trust that benefits you, your spouse, or dependent child?	on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from d?	ive you excluded from Yes No
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	ncome, transactions, or liabilities of a spouse or dependent child because they meet all three Committee on Ethics.	se they meet all three Yes No No

SCHEDULE A - ASSETS & "UNEARNED INCOME" Name: Zoe' Laboy Page 2 of 7

Aletional	-55 GA 61	-554A 60	- Gobal H	Tings I		Examples:	JT DC,	requirements, please re	If you so choose, you income source is the dependent child (DC), in the optional column of	If you have a privately- investment Fund, pleas	Exclude: Your personal in homes and vacation hom income during the reportion interest in, or income retirement program, included the second of the sec	For an ownership interest in a that is not publicly traded, s business, the nature of it geographic location in Block A.	For rental and other real property heli provide a complete address or d "rental property," and a city and state.	all interest-bearing a \$5,000, list every fina more than \$1,000 in int	the account that excee	For all IRAs and ott 401(k) ptans) provide t	Provide complete names of stoc (do not use only ticker symbols).	identify (a) each asset held for production of income and with a texceeding \$1.000 at the end of the and (b) any other reportable assincome which generated more unearned income during the year.	Assets and/	
Trans.	-SSGA Global Tactical	-South Conservative Alle.	Sobol Hotele Alberton	incom them and Grown	ABC Hedge Fund X	Simon & Schuster	Mega Corp Stock	ror a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left.	If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.	Exclude: Your personal residence, including second fromes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental and other real property held for investment, provide a complete address or description, e.g., rental property," and a city and state.	all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest bearing accounts.	the account that exceeds the reporting thresholds. For bank and other cash accounts, total the amount in	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in	ks and mutual funds	or investment or fair market value reporting period, set or source of than \$200 in	Assets and/or Income Sources	BLOCK A
								None				· · · · · ·			>		*Column M is for assets held by your spouse or dependen child in which you have no interest.	Indicate value of asset at close 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."	_	
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	•		-				×	\$1-\$200							11			For assets for which you checked "Tax-Deferred" in Block C, other assets indicate the category of income by checking the and capital gains, even if reinvested, must be disclose accounts. Check "None" if no income was earned or generate "Column XII is for assets held by your spouse or dependent chil		1
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Use additional sheets if more space is required.

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SCHEDULE C - EARNED INCOME

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ist 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: The 2013 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,956. It is unchanged in 2014. 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. Amount	nbers and employees compensa essional services involving a fidu	insated at or above the "senior staff" rate was \$26,955. It is unchange fiduciary relationship) are totally prohibited for Members and senior staff. Amount	ff' rate was \$26,955. It is unchanged in chibited for Members and senior staff. Amount
Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples: State of Maryland	Salary	\$20,000	\$76,000
Ontario County Board of Education	Spouse Speech	\$0 N/A	91,000 N/A
Legal Practice, San Juan, PR (solo praetitioner)	ž	\$19,463	£84,48 \$
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SCHEDULE D - LIABILITIES

0	Name: Zee Laboy	
	Page 5 of 7	

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		
			PHODS	Example			
			Scotlabank of husto lice	First Bank of Wilmington, DE	Creditor		
		1	9001/80	5/98	Date Liability Incurred MO/YR		
			hine of Credit	Mortgage on Rental Property, Dover, DE	Type of Liability		
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_					Over \$50,000,000	د	
					Over \$1,000,000* (Spouse/DC Liability)	~	

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 listed in Schedule C; 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
Secretary	anton y Labor Allomys at Law, PSC (2)
Prosident of	Global Stratery Group, Inc. (2)
President	Servicios legisles de Cambre PSC (2)

SCHEDULE F - AGREEMENTS

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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
03/12	03/12 Myself and Global Startegy Group Inc.	Continued Participation in Restrement Plan (1)

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, 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.

government and any information considered confidential as a result of a privileged relationship recognized by law. Lo not repe	wieged relationship recognized by law. Lo not repeat information listed on schedule C.
Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
Rodriguez Fernandez Law office, Pox (San Jun, P.A.)	Legal Services
Wignel A. Naza Associates, PSC (SanJun, PR)	legal Survices
Pedro Rima Subater (Say Sugar, PR)	legal Services
Cintroin y Labor Attorneys at Law PSC (Sursum, PR	legal Services (2)
Sesvices landes del Caribe, PSC (San Juan, PR)	legal Services (2)
Global Stadegy Gang Inc. (San Juan, PR)	Consulting Services (2)
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