	EOBM B	Page 1 of 6
FINANCIAL DISCLOSURE STATEMENT For New	For New Members, Candidates, and New Employees	2015 OCT 27 AM II: 10
Name: EDWARD A EMERY Daytime	Telephone:	A.S. BUJGE OF WELL CLOCK HANDER
New Member of or Candidate for State: FLORIDA U.S. House of Representatives District: 3RD Candidates – Date of Election:	Check if Amendment	(Office Use Only)
STATUS New Officer or Employee Employing Office:	Period Covered: January 1, 2015 October 15, 2015	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	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?	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	ng the reporting period 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?	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?	or arrangements with Yes No X
D. Did you, your spouse, or your dependent child have any reportable Yes X No liability (more than \$10,000) at any point during the reporting period?	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	n \$5,000 from a single Yes No X
ATTACH THE CORRESPONDING SCHEDULE IF YOU ARE R		NSWER "YES"
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOT	MATION - ANSWER <u>BOTH</u> OF THES	H 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?	certain other "excepted trusts" need not be disclosed. H	ave you excluded from Yes No X
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.	actions, or liabilities of a spouse or dependent child becan on Ethics.	ise they meet all three Yes $igsqcup No \ensuremath{\left[X ight]}$

SCHEDULE A – ASSETS & "UNEARNED INCOME"

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58. П For bank and other cash accounts, total the amount all interest-bearing accounts. If the total is ow \$5,000, list every linancial institution where there #401(k) plans) provide the value for course when the account that exceeds the reporting thresholds. Identify (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of For an ownership interest in a privately-held busir that is not publicly traded, state the name of For rental and other real property held for investmer provide a complete address or description, e.g. "rental property," and a city and state. For all IRAs and other retirement plans (such a 401(k) plans) provide the value for each asset held JT GARIBALDI/QUINTERC business, the nature of its geographic location in Block A. (da not use only ticker symbols) omes and vacation homes (unless there was rent come during the reporting period); and any financia terest in, or income derived from, a federational recognition in the True forms. the optional column on the far left. spendent child (DC), or jointly you so choose, you may indicate that an asset come source is that of your spouse (SP) you have a privately-traded fund that is an Except vestment Fund, please check the "EIF" box. tirement program, including the Thrift Savings Plan rclude: Your personal residence, including seco ovide complete names of stocks and mutual fund Assets and/or Income Sources AMERITRADE POWER AIR CORP SUNTRUST BANK not publicly traded, Examples: detailed RETIREMENT please refer to the instruction booklet Smon & Schuster ABC Hedge Fund Mega Corp Stock ន 91018 held with anyone (JT activities. 잌 Schedule пате \$200 홀호 Ŧ × Indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value None *Column M is for assets held by your spouse or depende child in which you have no interest. please specify the method used. hould be 'None." an asset was sold during the × \$1-\$1,000 \$1,001-\$15,000 c × HUEL × \$15,001-\$50-000 ø as sold during the reporting because it generated incor × \$50,001-\$100,000 m Value of Asset \$100,001-\$250,000 71 BLOCK B HILL \$250,001-\$500,000 G I \$500,001-\$1,000,000 \$1,000,001-\$5,000,000 _ \$5,000,001-\$25,000,000 me, the \$25,000,001-\$50,000,000 × Over \$50,000,000 Ž Spouse/DC Asset over \$1,000,000* Σ If Check all columns that apply. For accounts
the that generate tax-deferred income (such as
401(k), IRA, 529 accounts), you may check
the Tax-Deferred column. Dividends, 401(k), Ito. the Tax-Deferred car NONE come during the reporting period × DIVIDENDS × RENT Type of Income \bowtie INTEREST BLOCK C CAPITAL GAINS EXCEPTED/BLIND TRUST gains, TAX-DEFERRED as incor Partnersh PENS Royalles Other Type of Income (Specify: e.g., Partnership Income or Farm Income ×Q For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column, other assets indicate the category of income by checking the appropriate box below. Dividends, it and capital gains, even if neinvested, must be disclosed as income for assets held in accounts. Check "None" if no income was earned or generated. None 'Column XII is for assets held by your spouse or dependent child in which you have no interest \$1-\$200 = × \$201-\$1,000 # \succeq \$1,001-\$2,500 ₹ Current Year \$2,501-\$5,000 ≤ \$5,001-\$15,000 ≨ \$15,001-\$50,000 ≦ \$50,001-\$100,000 \$100,001-\$1,000,000 × \$1,000,001-\$5,000,000 × Amount of Income Over \$5,000,000 × BLOCK D × Spouse/DC Income over \$1,000,000* \bowtie None \$1-\$200 -× \$201-\$1,000 # \$1,001-\$2,500 ₹ Preceding Year < \$2,501-\$5,000 হ্ব ≤ \$5,001-\$15,000 \$15,001-\$50,000 ≦ \$50,001-\$100,000 ≨ \$100,001-\$1,000,000 ᆽ \$1,000,001-\$5,000,000 taxable Over \$5,000,000 × ę Spause/DC Income over \$1,000,000 ≚

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SCHEDULE A -- ASSETS & "UNEARNED INCOME"

Name: EDWARD A EMERY

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													CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income) None \$1-\$200 == \$1-\$200 == \$1.001-\$1.000 == \$1,001-\$2.500 <= \$2,501-\$1,000 <= \$2,501-\$15,000 <= \$5,001-\$15,000 <= \$50,001-\$15,000 <= \$15,001-\$50,000 <= \$100,001-\$1,000,000 <= \$100,001-\$1,000,000 <= \$1,000,001-\$1,000,000 <= \$1,000,001-\$1,000,000 <= \$1,000,001-\$1,000,000 <= \$1,000,001-\$1,000,000 <= \$1,000,001-\$1,000,000 <= \$1,001-\$2,500 <= \$2,501-\$1,000 <= \$1,001-\$2,500 <= \$5,001-\$15,000 <= \$5,001-\$15,000 <= \$15,001-\$15,000 <= \$15,001-\$15,000 <= \$15,001-\$15,000 <= \$15,001-\$15,000 <= \$15,001-\$100,000 <= \$1100,001-\$1,000,000 <= \$1100,001-\$1,000,000 <= \$1100,001-\$1,000,000 <=	Current Year Preceding Year			EDWARD A EMERY Page 4 of

SCHEDULE C - EARNED INCOME

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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 as Members and employers professional service	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.	ncome may apply to you after yo limit is \$27,225. In addition, centar staff.	u are on House payroll. The 2014 in types of income (notably honorar	I limit on outside earned income for ia, director's fees, and payments for
,		•	Am	Amount
U	Source (include date of receipt for nonoraria)	Туре	Current Year to Filing	Preceding Year
	ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples:	State of Maryland Civil War Roundtable (Oct. 2)	Salary Spouse Speech	\$20,000 \$0	\$/5,000 \$1,000
	Ontario County Board of Education	Spouse Salary	NA	N/A
FLORIDA RET	FIORIDA RETIREMENT SYSTEM	SPOUSE PENSION	\$10,436	\$10,164
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SCHEDULE D - LIABILITIES

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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.

Creditor Date Liability Type of Liability NOTAR NO	1	۲	-	ŢŢ	JT.		яр, DC, JT		
Or Date Liability Type of Liability Ty							٦٠ ^٠		
Or Date Liability Type of Liability Ty			110	UNIRI	ELLS	Example			
Type of Liability Type of Liability Nortgage on Rental Property, Dover, DE \$10,001- \$15,000 \$100,001- \$100,000 \$250,001- \$1,000,000 \$250,001- \$500,000 \$1,000,000 \$1,000,000 \$250,000,000 \$250,000,000 \$250,000,000 \$250,000,000 \$250,000,000 \$250,000,000 \$250,000,000 \$250,000,000 \$250,000,000 \$250,000,000 \$250,000,000 \$250,000,000 \$250,000,000 \$250,000,000 \$250,000,000		TANCO LING	EVBCO INC	UST MORIGAGE INC	FARCO BANK	First Bank of Wilmington, DE	Creditor		
No.						5/98	Date Liability Incurred MO/YR		
\$10,001- \$15,000 \$15,001- \$50,000 \$50,001- \$100,000 \$250,0001- \$500,000 \$250,001- \$500,000 \$1,000,000 \$1,000,000 \$1,000,000 \$5,000,001- \$5,000,000 \$25,000,000 \$25,000,000 \$0 \$25,000,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0		STONE MIN, GA	4795 BRASAC DRIVE	2660 LAUREL WOODS LANE S	1383 JENNIFER CT LITHONIA GA	Mortgage on Rental Property, Dover, DE	Type of Liability		
\$50,000 B \$50,001- \$100,000 \$100,001- \$500,000 \$250,001- \$500,000 \$1,000,000 \$1,000,000 \$1,000,000 \$5,000,001- \$5,000,000 \$25,000,000 \$25,000,000 \$0 \$25,000,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0				[4]			\$10,001- \$15,000	>	
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					x	×	\$15,001- \$50,000 \$50,001- \$100,000 \$100,001- \$250,001- \$500,000 \$500,001- \$1,000,001- \$5,000,000 \$5,000,000	C D & F G	Amount of Liability
					X	×	\$15,001- \$50,000 \$50,001- \$100,000 \$100,001- \$250,000 \$250,001- \$500,000 \$1,000,001- \$5,000,000 \$5,000,000 \$25,000,000	C D & F G H I	Amount of 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 held in any religious, sociat, fraternat, 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 calculations and many ambiguous control parties and the current calculations are conditions.

the current calendar year. First-year candidates and new	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