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UNITED STATES HOUSE OF REPRESENTATIVE FINANCIAL DISCLOSURE STATEMENT	23	RM B	Page 1 of
Name: Russell Fulcher	Daytime Telephone:_		DV 27 PH 1: 27
U.S. House of Representatives District: Candidates – Date of Election: M & J.	5, 2018 [Check If CFF Amendment S. HOUS	CE CT THE SENIATIONS OF
	taff Filer Type (If Applicable): hered Principal Assistant bo	fod Covered: January 1, 2017 July 31, 8017	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
B. Receive more than \$200 in unserined income from any reportable asset during the reporting period? 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? D. Did you, your spouse, or your dependent child have any reportable.	Yes No F. Did you outside as year up it	u hold any reportable positions during in the current aslendar year up through the current aslendar year up through the any reportable agreement or nitry during the reporting period or intrough the date of filing?	r arrangement with an n the current calendar Yes No
Eablity (more than \$10,000) at any point during the reporting period? ATTACH THE CO		urce in the current year and two price	r years?
THIS FORM INCLUDES ONL	· · · · · · · · · · · · · · · · · · ·		-
EXCLUSION OF SPOUSE, DEPENDENT, OR TRU	JST INFORMATION - ANS	WER <u>BOTH</u> OF THES	E QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Comm from this report details of such a trust that benefits you, your spouse, or dep		xted trusts" need not be disclosed.	Have you excluded Yes No X
EXEMPTION - Have you excluded from this report any other assets, "uneae exemption? Do not answer "yes" unless you have first consulted with the C		r dependent child because they me	et all three tests for Yes No No

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Russell Fulcher Page 1 of 1

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Assets and/or Income Sources					due (ı				of In													unt c										
identify (a) each asset held for investment or production of income and with a listr market value sunseding \$1,000 at the end of the reporting period, and (b) any other reportable asset or course of income which; generated more then \$200 in "unearmed" income during the year. Provide complete names of stocks and mutual funds (do not use only licture symbols).	Indica use a apecil if an includ be "N "Colui child i	to value value y the s asset ed one." mn M n whice	He of p Hon m Helling Webs y bec is for in you	nessel delica d	et clos s other sd. during it gene te held no in	e of the then the trated by yo	ne rep repor repor	orting arlost ting te, Ite	perio velue period period period period period period period	and shou	2 2 2 E	neck a et gen 11(k), i a "Ta lerest invest ress ress ress ress ress ress ress r	ell colo remie RA, o pr-De r, er ted, i ste he re rep	turns to tax-o x 529 ferred and as must i stel inst porting	that a leferre accou " cok apital he dis scushi at gue perio	opply. Ind including opply Indiana I	For: ome payme De sed se ounts	accounts (auch us ny check ridende, even IF Income s. Check income	For interest	neseta its ind ital ga ck "No harran X	for wi cash i less, t rea' if: II in fo	nich yo he ca wen il no inc r zam	ou ch singon f rein come	ector y of i week was i	Tec ncom ed, se your	Oute toy ust b for g	med check e db eneri eneri	in Elic ting 1 releas stad. dapa	ock C he ap rd es	, you prop the	may risks suite i	chec bax i for a trich	k the selow seets you h	"Noni De Held	a" coi viden 5 in ti no inti	urren. de, im kraibik krast.	For a	nii cyty et, ap count
For all IRAs and other retrement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.		_	Ţ-	-		_	_	1.	1 1			1		1			1		L			<u></u>		t Ye					····			D-			Ye			
For bank and other cash accounts, total the emount in 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.	A	9 C	ū	£	F	G H	1	ı	K	L	1								•	•	۳	V	_	_	/RE7	(X	×	ха	•	R	•	~		_		×	X	XI X
For rental and other real property held for investment, provide a complete address or description, e.g., rental property," and a city and state.																		î	-																			
For an ownership interest in a privately-held business that is not publicly traded, satis the name of the business, the nature of its activities, and its peographic location in Stock A.																		me or Farm Inc																				
Exclude: Your personal residence, including second homes 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 Sevings Plan.																		Parteenthip troo										,					i					
If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.									2	44 100 400						15		Spacify: a.g.										# \$1,000,000										C1 and Act
if you so choose, you may indicate that an esset 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.		9009	990-040	100,000	\$190,061-\$250,000	1250,001-4500,000 1540,001-81,000,000	000,000,005-500,000,13	\$5,000,000-525.000,000,52	525,800,081-650,080,080	000,000	SACH	22		_	GAINS	EKKEPTEOÐLIND TRUST	9	e of Income (900)	963	8	255,001-5100,000	51.000.001.05.000.001.8	998	SpoureDC Income over \$1,000,000*			8	8 8		960,03	100,800	9180,061-81,060,080	\$1,000,001-44,000,000	l i
For a detailed discussion of Schedule A requirements, please refer to the instruction booldet.	None	\$1,007-\$15,060	315,001,480,000	\$56,001-\$100,63\$	\$190,081	1250,000	81,000,0	95,000,00	0'008'625	Over \$58,000,500	9	DWDENDS	NEW THE	WTEREST	CAPITAL GAINS	DKEPTE	1AX-DEFERRED	Other Type of Inc	į	883	\$1,001.12,50e	\$2,681-\$6,006	#5,001-\$15,000	\$15,001	000,0015-100,000	\$1000	Over \$6,000,000	geone	Acres 6	92 1	1591-51,000	\$1,001-12,500	16.00 A	\$16,001.4	\$59,001-\$100,808	1180,001	\$1,000,0	Over \$5,000,000
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SCHEDULE C - EARNED INCOME

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Name: Russell Fulcher	Page of

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 payroli. 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 fluturery relationship) are totally prohibited for Members and senior staff.

		Amount								
Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year							
ABC Trade Association, Batteriors, MD (July 15) State of Maryland Examples: Cultiving Control (July 15)	Honoreium Selary	\$0 \$20,000	\$500 \$76,000							
Examples: Safe of Mentend Civil Wer Roundhalle (Oct. 2) Onlinis County bloard of Education	Spouse Speech Spouse Selary	\$0 N/A	\$1,000 N/A							
Mark Bottles Real Estate Services	Real Esta te Commissions	\$50,739	#225,544							
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Use additional sheets if more space is required.

SCHEDULE D - LIABILITIES

Name: Russell	Fulcher	Page of

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 liabile); and liabilities owed to you by a spouse or the child, parent, or sibing of your your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period axceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

								Α	moun	t of ill	ability				
\$Р. ОС. Л		Creditor	Date Liability Incurred	Type of Liability	A	B	c	D	E	F	G	н	1	7 000	oo" Inbility) R
			MO/YR		\$10,001• \$15,000	\$15,001-	\$100,001-	\$100,001-	\$250,001- \$500,000	\$500,001-	\$1,000,001± \$5,000,000	\$5,000,001- \$25,000,000	\$25,000,001- \$50,000,000	Over \$50,000,000	Over \$1,000,000* (Spouse/DC Liability)
	Example	First Bank of Wilmington, DE	5/96	Morigage as Rental Property, Dover, DE				Х							
	Wells	Fargo Bank	7/2015	Mortages on rental in				×							
L				Mortgage on rental in McCall, IP.											
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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, partnersh 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, 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 current calendar year and two previous years.												
Position	Name of Organization											

Use additional sheets If more space is required.