



Filing ID #10008628

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

**Name:** Shelli Yoder  
**Status:** Congressional Candidate  
**State/District:** IN09

## FILING INFORMATION

**Filing Type:** Candidate Report  
**Filing Year:** 2015  
**Filing Date:** 09/16/2015

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
American Funds ⇒ Growth Fund of America  DESCRIPTION: IRA/Rollover		\$1,001 - \$15,000	None		
American Funds ⇒ Growth Fund of America  DESCRIPTION: Roth IRA/Rollover	SP	\$15,001 - \$50,000	None		
American Funds ⇒ New World Fund  DESCRIPTION: IRA/Rollover	SP	\$1,001 - \$15,000	None		
American Funds ⇒ New World Fund  DESCRIPTION: IRA/Rollover		\$1,001 - \$15,000	None		
American Funds ⇒ Washington Mutual Investors Fund  DESCRIPTION: Rollover/IRA		\$1,001 - \$15,000	None		
American Funds ⇒ Washington Mutual Investors Fund	SP	\$15,001 - \$50,000	None		

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
DESCRIPTION: IRA/Rollover					
Fidelity ⇒ Fidelity Freedom K 2035		\$1,001 - \$15,000	None		
DESCRIPTION: IU ER Plan (57524)					
Fidelity ⇒ Fidelity Freedom K 2035		\$1,001 - \$15,000	None		
DESCRIPTION: IU TDA Plan (51913)					
Fidelity ⇒ Fidelity Freedom K 2035		\$1,001 - \$15,000	None		
DESCRIPTION: IU 457(B) Plan (71301)					
Fidelity ⇒ Fidelity Freedom K 2040	SP	\$50,001 - \$100,000	None		
DESCRIPTION: IU ER Plan (57524)					
TIAA-CREF (TIAA Traditional)		\$1,001 - \$15,000	None		
DESCRIPTION: Held by Vanderbilt University Medical Group Retirement Plan					

\* Asset class details available at the bottom of this form.

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
Indiana University	salary	\$48,000	\$65,000
Monroe County Government	salary as County Council member	\$7,000	\$12,500
Indiana University	spouse salary	N/A	N/A
Albany Medical Center	spouse salary	N/A	N/A
Chappars Law Office	spouse salary	N/A	N/A

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	SYNCB/Lowes	May 2013	Home improvement	\$10,000 - \$15,000
	Navient	October 2002	Education loan	\$15,001 - \$50,000

Owner	Creditor	Date Incurred	Type	Amount of Liability
JT	SunTrust Bank/GreenSky	July 2014	Home improvement	\$15,001 - \$50,000
SP	ACS/Access Group	August 2001	Education loan	\$10,000 - \$15,000
SP	Navient	December 2002	Education loan	\$15,001 - \$50,000

## SCHEDULE E: POSITIONS

None disclosed.

## SCHEDULE F: AGREEMENTS

None disclosed.

## SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

None disclosed.

## SCHEDULE A ASSET CLASS DETAILS

- o American Funds
- o American Funds (Owner: SP)
- o Fidelity
- o Fidelity (Owner: SP)

## EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

**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 benefiting you, your spouse, or dependent child?

☐ Yes ☒ No

**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?

☐ Yes ☒ No

## CERTIFICATION AND SIGNATURE

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

**Digitally Signed:** Shelli Yoder , 09/16/2015