Yes No X	et all three tests for	a spouse or dependent child because they me	parned" income, or liabilities of a Committee on Ethics.	<b>EXEMPTION</b> – Have you excluded from this report any other assets, "unearned" income, 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.
Yes No X	Have you excluded	ither "excepted trusts" need not be disclosed. Have you excluded	nmittee on Ethics and certain o ependent child?	TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" refrom this report details of such a trust that benefits you, your spouse, or dependent child?
IS	E QUESTION	N - ANSWER <u>BOTH</u> OF THESE QUESTIONS	UST INFORMATION	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER B
	O COMPLETE	141	ILY THE SCHEDULES	THIS FORM INCLUDES ON
	S"	SCHEDULE IF YOU ANSWER "YES"	CORRESPONDING SC	ATTACH THE C
Yes No	าก \$5,000 from a or years?	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	Yes No X	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?
ar Yes No X	r arrangement with a n the current calenda	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	Yes No	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?
g? Yes No X	ing the reporting sugh the date of filing	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes No X	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? Ot  b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?
		QUESTIONS		PRELIMINARY INFORMATION - ANSWER EACH OF THESE
A \$200 penaity shall be assessed against any individual who files more than 30 days late.	A \$200 penaity s individual who fi	Period Covered: January 1,to	Staff Filer Type (If Applicable): Shared Principal Assistant	New Officer or Employee  Employing Office:
U.S. HOUSE OF REPRESENTATIVES  (Office Use Only)	U.S. HOUSE	Check if Amendment	7/2	New Member of or Candidate for State:  U.S. House of Representatives District:  Candidates – Date of Election: 2 Auc.
OFFICE OF THE CLERK	JE 81	hone:	Daytime Telephone:	Name: HENRY HAMBUN JR
LEGISLATIVE RESOURCE CENTER	LEGISLAI	FORM B For New Members, Candidates, and New Employees		UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT

## SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

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				ABC Hedge Fund	Exemples: Simon & Schuster	Mega Corp Stock	CT.	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.  For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	If you report a privately-traded fund that is as 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 hald for investment provide a complete address or description, e.g. rental property, and a city and state.	For bank and other cash accounts, total the amount 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.	401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	(do not use only ticker symbols).  (The second symbols is the second symbols in the second symbol is the second symbol in the second symbol is the second symbol in the second symbol in the second symbol is the second symbol in the second symbol in the second symbol is the second symbol in the second symbol in the second symbol is the second symbol in the seco	identify (a) each asset held for investment or production of income and with a fair maker value exceeding \$1,000 at the and of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in 'uneamed' income during the year.	Assets and/or Income Sources	BLOCK A
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				×	-	+		\$250,001-\$500,000					- c		west.	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 fronly because it generated income, the value should be "None."	Value of Asset	BLOCK B
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HENRY HAMBUN JX

SCHEDULE A - ASSETS & "UNEARNED INCOME"

### SCHEDULE C - EARNED INCOME

Name: HAMBUN Page\_ 잌

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 payroll. 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 for Members and senior staff.

Course (include date of receipt for honoraria)	Type	Am	Amount
<b>Source</b> (include date of receipt for nonorana)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples: Chi War Roundable (Oct. 2)	Spouse Speech	\$0,000	\$1,000
Tribano contri socia or candidan	opoood contra	<u> </u>	<i>A</i>
US ARMY	PETIPE MENT	117455	14150058
VETERANS AFFAIRS PENSION	PENSION	117,55%	142,106.90
550	PENSION	89740 a	129 37600
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#### SCHEDULE D - LIABILITIES

Name: Page

exceeded \$10,000. 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 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 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 \*Column K is for liabilities held solely by your spouse or dependent child.

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	7/2	7/12	4/2	Soven	Example			W-1
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	04/17	06/16	03//6	81/20	5/98	Date Liability Incurred MO/YR		
	No Dr	CAMPAR	VERNIA LOPE	N367 1010 M	Mortgage on Rental Property, Dover, DE	Type of Liability		
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		4	×			\$15,001- \$50,000	æ	
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						Over \$1,000,000* (Spouse/DC Liability)	×	

#### SCHEDULE E - POSITIONS

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, or 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, period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years 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

$\prod$			
Position	MA		
Name of Organization			
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SCHEDULE F - AGREEMENTS   Name:   Hrvn   Hon, Mu, Mu   Page   6   of   6				Date	Identify the date continuation or employer.	SCHEDUL	
Name: ### #### ###########################			NA	Parties to Agreement	s, parties to, and general terms of any agreement or arrangement that you h deferral of payments by a former or current employer other than the U.S. go	E F - AGREEMENTS	
				Terms of Agreement	nave with respect to: future employment; a leave of absence during the period of government service; overnment; or continuing participation in an employee welfare or benefit plan maintained by a former	Homew on	

# 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.

	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
	NIA	