UNITED STATES HOUSE OF REPRESENTATIVES D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point 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 A. Did you, your spouse, or your dependent child:
a. Own any reportable asset that was worth more than \$1,000 at the PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS Name: FINANCIAL DISCLOSURE STATEMENT **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 dependent child? EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics EXEMPTION - 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 FILER STATUS b. Make more than \$200 in uneamed income from any reportable asset during the reporting period? end of the reporting period? or X Charles & Elf U.S. House of Representatives New Member of or Candidate for Employing Office: Candidates - Date of Election: New Officer or Employee THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" State: District: Yes ×es × Yes Daytime Telephone: For New Members, Candidates, and New Employees S O X J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years? F. Do 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? E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? FORM B Period Covered: January 1, Amendment Check if A \$200 penalty shall be assessed against any individual who files more than 30 days late. MOV - 2 7978 U.S. HOUSE OF REPRESENTATIVES TEGETAL SECTIONS OF THE 2016 NOY -4 AM 10: 44 (Office Use Only) Yes ĕ Yes X ĕ Yes Page 1 of 6 Ž š 중 X X

## SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: ANISLAWL Page 2

ONE WARRICA	EDWARD JONES	DAKSAB, Inc.	DocDirt LLC	M&RinDac, PC	ABC Hedge Fund X	Examples: Simon & Schuster	SP, Rega Corp Stock EF	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.  For rental and other real property held for investment, provide a complete address or description, e.g., rental property, and a city and state.  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.  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 Savings Plan, if you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF box.  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 generalized investments, please erefer to the instruction booklet.	Provide complete names of stocks and mutual funds "Code (do not use only ticker symbols).  For all IRAs and other retirement plans (such as 401(K) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	identify (a) each asset held for investment or indi- production of income and with a fair market value you  exceeding \$1,000 at the end of the reporting period, plea  and (t) any other reportable asset or source of it  income which generated more than \$200 in incl unearmed income during the year.	Assets and/or Income Sources	BLOCK A
*	<b>&gt;</b> -		*	>	×	Indefinite	×	\$1.\$1,000	*Column M is for assets held by your spouse or dependent 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."	Value of Asset	BLOCK B
(R)	2	Sara	Ship	<b>×</b>	Partnership Income	Royalties	×	NONE  DIVIDENDS  RENT  INTEREST  CAPITAL GAINS  EXCEPTED/BLIND TRUST  TAX-DEFERRED  Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	accounts. Check "None" if the asset generated no income during the reporting period.	il columns that apply. For erate tax-deferred income IRA, or 529 accounts), the "Tax-Deferred" tay, Interest, and capita reinvested, must be discrete.	Type of Income	BLOCK C
		X	×	×	×	×	×	None		Is For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all so other assets indicate the category of income by checking the appropriate box below. Dividends, interest, yand capital gains, even if reinvested, must be disclosed as income for assets held in taxable n, accounts. Check "None" if no income was earned or generated.	Amount of Income	BŁOCK D

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DULE A – ASSETS & "UNEARNED INCOME"	BLOCKA	Assets and/or Income Sources						ASSET NAME E	NOME														
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## SCHEDULE C - EARNED INCOME

Name: Januar 19 White Page\_ 읔

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. professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff 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 2015 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,225. The 2016 limit is \$27,495. In addition, certain types of income (notably honoraria, director's fees, and payments for **EXCLUDE**: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act. Examples: My Pain Doc, P.C. Source (include date of receipt for honoraria) ABC Trade Association, Baltimore, MD (July 15)
State of Maryland
Civil War Roundtable (Oct. 2)
Ontario County Board of Education Salary Type **Current Year to Filing** 152,923 18 Amount 229.932 Preceding Year \$76,000 \$1,000

#### SCHEDULE D - LIABILITIES

e reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting
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Report liabilities of over \$10,000 owed to any one creditor at any time during the period. New Members: Members are required to report all liabilities secured is exceeded \$10,000. 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 (unless you rent it out or are a Member); loans secured by automobiles, houset \*Column K is for liabilities held solely by your spouse or dependent child.

					sp, DC, лт		
				Example			
				First Bank of Wilmington, DE	Creditor		
				5/98	Date Liability Incurred MO/YR		
				Mortgage on Rental Property, Dover, DE	Type of Liability		
			, ,		\$10,001- \$15,000	>	
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					Over \$50,000,000	۲.	]
,					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 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
President, Secretary Transmer	My Party Doc, PC,
Member	Oac Dist LLC
Treasurer	DAKBAB, Inc

### **SCHEDULE F - AGREEMENTS**

Identify the date, parties to, and general te continuation or deferral of payments by a f

Date

NON P

NTS	Name: AMME / Myde	Page 6 of 6
rms of any agreement or arrangement that you have or current employer other than the U.S. gow	rms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; ormer or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.	d of government service; maintained by a former employer.
rties to Agreement	Terms of Agreement	

# 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. Example: Source (Name and City/State) No.Ne Doe Jones & Smith, Hometown, Homestate **Brief Description of Duties** Accounting Services

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NO HELP WHAT SO EVER ON CAMPANIEN! ALL DONE WHILE WHOLKING IN HOUSE CAMPS.

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#### CAMPAIGN NOTICE REGARDING FINANCIAL DISCLOSURE REQUIREMENT

If you have not yet raised (either through contributions or loans from yourself or others) or spent in excess of \$5,000 for your campaign, or if you have withdrawn your candidacy, please indicate your status and sign and date below.

The Honorable Karen L. Haas, Clerk

135 Cannon House Office Building

Legislative Resource Center

Office of the Clerk, U.S. House of Representatives

Washington, DC 20515-6601 Dear Madam Clerk: Indicate Your Status: (Select One) This is to notify you that I have not yet raised (either through contributions or loans from myself or others) or spent in excess of \$5,000 for my campaign for the U.S. House of Representatives. Over \$5,000 Threshold Not BEFORK 10.5.16. Exceeded I understand that when I do raise or spend in excess of \$5,000 for my campaign, I must file a Financial Disclosure Statement with the Clerk of the House of Representatives according to the deadlines set out on pages 2 and 3 of the Financial Disclosure Instruction booklet, a copy of which has been provided to me by the Clerk. TOTAL 100% ACROSIME FUNDS 4 10,384.94 AFTER. 10.5.16 This is to notify you that under the laws of the state of \_\_ Withdrawal I withdrew my candidacy for the U.S. House of Representatives on \_ of Candidacy [Note: If your Financial Disclosure Statement was due before the date on which you withdrew from the race, you still must file a Financial Disclosure Statement with the House.] Name (Please Print or Type): \_\_\_ District:

(THIS PAGE WILL BE MADE PUBLICLY AVAILABLE)

RETURN COMPLETED STATEMENT TO:
The Clerk, U.S. House of Representatives
Legislative Resource Center
135 Cannon House Office Building
Washington, DC 20515-6601

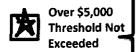
#### CAMPAIGN NOTICE REGARDING FINANCIAL DISCLOSURE REQUIREMENT

If you have not yet raised (either through contributions or loans from yourself or others) or spent in excess of \$5,000 for your campaign, or if you have withdrawn your candidacy, please indicate your status and sign and date below.

The Honorable Karen L. Haas, Clerk Office of the Clerk, U.S. House of Representatives Legislative Resource Center 135 Cannon House Office Building Washington, DC 20515-6601

Indicate Your Status: (Select One)

Dear Madam Clerk:



This is to notify you that I have not yet raised (either through contributions or loads from myself or others) or spent in excess of \$5,000 for my campaign for the U.S. House of Representatives.

I understand that when I do raise or spend in excess of \$5,000 for my campaign, I must file a Financial Disclosure Statement with the Clerk of the House of Representatives according to the deadlines set out on pages 2 and 3 of the Financial Disclosure Instruction booklet, a copy of which has been provided to me by the Clerk.

Withdrawal
of Candidacy
Or Carraidacy

[Note: If your Financial Disclosure Statement was due **before** the date on which you withdrew from the race, you still must file a Financial Disclosure Statement with the House.]

Date: 10.5.16

(THIS PAGE WILL BE MADE PUBLICLY AVAILABLE)

RETURN COMPLETED STATEMENT TO:
The Clerk, U.S. House of Representatives
Legislative Resource Center
135 Cannon House Office Building
Washington, DC 20515-6601

Last Updated 10/2014