UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	For New Members, C	FORM B For New Members, Candidates, and New Employees	HAND DELIAF	HAND DELIA FARTS &
Name: MAPU S. JANIAS	Daytime Telephone:	ne:	2016 OCT 12 PM 5: 01	PM 5: 01
New Member of or Candidate for State: Ameri  U.S. House of Representatives District:  Candidates – Date of Election:	American Samoa	Check if Amendment	U.S. HOUSE OF REPRESENTATIVES  (Office Use Only)	OF REPRESENTATIVES (Office Use Only)
New Officer or Employee  Employing Office:		Period Covered: January 1	A \$200 penalty shall be individual who files m	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	THESE QUESTI	ONS		
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?	No X or	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	ing the reporting period e date of filing?	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 Yes reporting period?	No X	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?	bble agreement or arrangement with an opring period or in the current calendar filing?	Yes No X
D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	No X	Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	an \$5,000 from a single	Yes No X
ATTACH THE CORRESPONDING SCHEDULE IF YOU AN	ESPONDING SCHI	EDULE IF YOU ANSWER "YES"	NSWER "YES"	
				:
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOT	INFORMATION .	- ANSWER BOTH 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, this report details of such a trust that benefits you, your spouse, or dependent child?	n Ethics and certain other	"excepted trusts" need not be disclosed. H	Have you excluded from	Yes No X
<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.	ıcome, or liabilities of a spo ee on Ethics.	ouse or dependent child because they meet	all three tests for	Yes No 🕱

SCHEDULE A - ASSETS & "UNEARNED INCOME" Name: MAPU S. JAMIAS Page 2 of 6

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Af1ac	Prudential	Oppermentants	Omionhod nor Bunda	OppenheimerFunds	Franklin Templeton	ABC Hedge Fund X	Examples: Simon & Schuster	Mega Corp Stock	OF.	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 have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.	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.	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 held for investment, provide a complete address or description, e.g., rental property," and a city and state.	all interest-bening accounts, if the total is own \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	hank and other mach accounts total the macunity in	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 account that exceeds the account that exceeds the account that was the account that the account the account that the account the account that the account that the account that the account that the account the acco	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	ncome which generated more than \$200 we uneamed income during the year.	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 penod, and (b) any other reportable asset or source of the contract of the c	Assets and/or income Sources	BLOCK A
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

MAPU S. JAMIAS

Page 3 of 6

## **SCHEDULE C -- EARNED INCOME**

Name: MAPU S. JAMIAS Page 4 . of 6

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act. 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.

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 professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

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<b>Source</b> (include date of receipt for nonorana)	lype	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples: State of Maryland	Salary	\$20,000	\$76,000
Ontario County Board of Education	Spouse Salary	N/A	N/A
AMERICAN SAMOA GOVERNMENT	SALARY	37,500	42,000

#### SCHEDULE D - LIABILITIES

Name: MAPU S. JAMIAS Page 5 of 6

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.

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				First Bank of Wilmington, DE	Creditor		
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			NEW VEHICLE	Mortgage on Rental Property, Dover, DE	Type of Liability		
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				L.,,	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 entires and second-year candidates report positions held in the reporting period and the current relandar year. First-year candidates and now employees report positions held in the reporting period and the current relandar year.

the current calendar year. First-year candidates and new e	the current calendar year. First-year candidates and new employees report positions held in the current calendar year and revious years.
Position	Name of Organization
Civilian Aide to Sec. Army (CASA)	Civilian Aide to Sec. Army(CASA) President American Samoa Boxing Federation (CASA)
International Executive Member	Internal Boxing Association (AIBA)
Member	American Samoa National Olympic Committee
Momher of American Samoa Veteral	Member of American Samoa Veterans of Foreign Wars (VFW) Post 3391

### **SCHEDULE F - AGREEMENTS**

Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties to Agreement	Terms of Agreement
	N/A	
•		

# 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.

government	and any information considered confidential as a result of a	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
	N/A	