



Filing ID #10022481

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • 135 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Hon. Valdez Val Demings
Status: Member
State/District: FL10

FILING INFORMATION

Filing Type: Annual Report
Filing Year: 2017
Filing Date: 08/13/2018

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
AIG Whole Life Insurance [WU]	SP	\$1,001 - \$15,000	None		<input type="checkbox"/>
Florida Retirement Investment Plan [PE]	SP	\$100,001 - \$250,000	None		<input type="checkbox"/>
ICMA RC Deferred Compensation 457 [OT]		\$100,001 - \$250,000	None		<input type="checkbox"/>
DESCRIPTION: Deferred Compensation					
ICMA RC Deferred Compensation 457 [OT]	SP	\$50,001 - \$100,000	None		<input type="checkbox"/>
DESCRIPTION: Deferred Compensation Plan					
Orlando Federal Credit Union [BA]	JT	\$15,001 - \$50,000	Interest	\$1 - \$200	<input type="checkbox"/>
Standard Life Insurance [WU]		\$1,001 - \$15,000	None		<input type="checkbox"/>
Suntrust [BA]		\$250,001 - \$500,000	Interest	\$1,001 - \$2,500	<input type="checkbox"/>
Urban Trust Bank [BA]		\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?

* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE C: EARNED INCOME

Source	Type	Amount
Orange County Sheriff's Office	spouse's salary	N/A
City of Orlando Law Enforcement Pension	spouses pension	N/A

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
JT	OCWEN Financial	June 2006	Home Mortgage	\$1,000,001 - \$5,000,000
	CSC LOGIC INC	May 2014	auto loan	\$15,001 - \$50,000

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
June 2011	Val Demings and the City of Orlando	law enforcement pension

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

Trip Details					Inclusions		
Source	Start Date	End Date	Itinerary	Days at Own Exp.	Lodging?	Food?	Family?
American Israeli Education Foundation	08/1/2018	08/11/2018	Orlando - Tel Aviv - Orlando	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

IPO: Did you purchase any shares that were allocated as a part of an Initial Public Offering?

☐ Yes ☒ No

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: Hon. Valdez Val Demings , 08/13/2018