from this report details of such a trust that benefits you, your spouse, or dependent child?  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 exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS  TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other 'excepted trusts' need not be disclosed. Have you excluded	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?  No Value	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?  F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period?	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 in the current calendar year up through the date of filing?  b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	New Officer or Employee Staff Filer Type (If Applicable): Period Covered: January 1. A \$200 penalty sh  Employing Office: Shared Principal Assistant to individual who file	New Member of or Candidate for State: UI  U.S. House of Representatives District: 10  Check if  Candidates – Date of Election: Nov. 6, 2018	Name: Kimberly Bizer Daytime Telephone.	UNITED STATES HOUSE OF REPRESENTATIVES  FORM B  FINANCIAL DISCLOSURE STATEMENT  For New Members, Candidates, and New Employees  LEGISLATI
Yes 2	THESE QUESTIONS	R "YES"	more than \$5,000 from a Yes No	ement or arrangement with an Yes No No	ons during the reporting rup through the date of filing? Yes No		A \$200 penalty shall be assessed against any individual who files more than 30 days late.	(Office Use Only)	18 SEP 21 PH 1: 12	yees LEGISLATIVE RESOURCE CENTER

SCHEDULE A - ASSETS & "UNEARNED INCOME" Name: Kimberly BIZON

(SELF-EHPLOYED)	KINGERLY BIZON	YOU INHIND COM	DESIGNING WITH	ABC HOOSE FUND	Simon & Schrader	P. Heren Curs Stock	or bank and other cash accounts, total the amount in the listersal-bearing accounts. If the total is over 5,000, list every financial institution where there is over than \$1,000 in interest bearing accounts or ential and other real properly held for investment or what a complete address or description, e.g., which properly, and a city and state, or an ownership interest in a privately-held business at is, not publicly traded, state the name of the usiness. The nature of its activities, and its eographic location in Block A.  Include: Your personal residence, including second ontes and vacation homes (unless there was rental excepted from, a federal home during the reporting pendot); and any financial increast in, or income derived from, a federal home faulting the reporting the Thrift Savings Plantyou report a privately-traded hard that is an excepted investment Fund, please check the "Elfox, you so choose, you may indicate that an esset or you so choose, you may indicate that an esset or you so choose, you may indicate that an esset or you so choose, you may indicate that an esset or you so choose, you may indicate that an esset or you so choose, you may indicate that an esset or you so choose, you may indicate that an esset or you so choose, you may indicate that an esset or you so choose, you may indicate that anyone (JT), if the optional column on the far left.	rovide complete names of stocks and mutual funds to not use cury ticker symbols).  or all IRAs and other retirement plans (such as 01/k) plans) provide the value for each asset held in a excount that exceeds the reporting thresholds.	sentify (a) each asset held for investment or roduction of income and with a fair market valual accepting \$1,000 at the end of the reporting period, nd (b) any other reportable asset or source of income thich generated more than \$200 in 'unearned' some during the year.	Assets and/or income Sources	BLOCK A
		VILLE	UNDEFERMENCE.	***	ACCUPATION OF THE PROPERTY OF	*	None         3           \$1.91.900         00           \$1.01.\$15.000         77           \$15.001.\$10.000         77           \$50.001.\$100.000         79           \$100.001.\$250.000         79           \$250.001.\$5,000.000         20           \$250.001.\$5,000.000         20           \$1.000.001.\$5,000.000         20           \$250.000.001.\$5,000.000         20           \$250.000.001.\$5,000.000         20           \$250.000.001.\$5,000.000         20           \$50.000.001.\$5,000.000         20           \$50.000.001.\$5,000.000         20           \$50.000.001.\$5,000.000         20           \$50.000.001.\$5,000.000         20           \$50.000.001.\$5,000.000         20           \$50.000.001.\$5,000.000         20           \$50.000.001.\$5,000.000         20           \$50.000.001.\$5,000.000         20           \$50.000.001.\$5,000.000         20           \$50.000.001.\$5,000.000         20           \$50.000.001.\$5,000.000         20           \$50.000.001.\$5,000.000         20           \$50.000.000         20           \$50.000.000         20           \$50.0000.0000         20      <	*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 said during the reporting period and is included only because it generated income, the value should be hone.	Value of Asset	BLOCK B
The second secon	the second secon	to called the latter the forestern to the called the ca	Total Administrative Control of the	Parimensi ka Income	Royalles	*	NONE DIVIDENCS RENT INTEREST CAPITAL GAINS EXCEPTED-BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnersiap Income or Farm Income)	None" if the asset gunerated no income during the reporting period.	Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, or 528 accounts), you may check the "Tax-Chefered" column. Dividenda, Infarest, and capital gains, even if reinvested, must be disclosed as income for assets held in transle accounts. Over.	Type of Income	BLOCK C
			*	×	X	*	None		For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets indicate the category of income by checking the appropriate box below. Dividends, Interest, and capital galins, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if no income was earned of generated.  "Column XII is for assets held by your spouse or dependent child in which you have no interest.	Amount of Income	BLOCK D
			×	*	X		\$1,001-\$2,500		wy check the "None" column. For all other ste box below. Dividends, interest, and we for assets held in taxable accounts. In which you have no interest.	***	

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Use additional sheets if more space is required.

## SCHEDULE C - EARNED INCOME

List the source, type, and emount 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.	SCHEDULE C - EARNED INCOME
/ment by the U.S. government) totaling \$200 or more during the nace exceeding \$1,000. See examples below.	Name: Kluberly Bizon
e reporting period. For both the filer	Page 3_ of

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

INCONE LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. In addition, co professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.	ncome may apply to you after yo limit is \$28,050. In addition, cert r staff.	you are on House payroll. The 2017 limit on outside earned income for ertain types of income (notably honoraria, director's fees, and payments for	The 2017 limit on outside earned income for y honoraria, director's fees, and payments for
		Am	Amount
Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honoradum	50	\$500
Examples: Civil Was Roundtable (Oxt. 2)  Onland County Board of Education	Spruse Speech Spruse Speech	\$0 \$0 \$0,000	V/A 0.0011 0.000
Designing with you mind. com	Szlany.	N/A	20,080
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#### SCHEDULE D - LIABILITIES

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exceeded \$10,000. 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 Hembers: 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 are personally liable); and (unless you are personally liable); and habilities 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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					Example							
					First Bank of Wilmington, DE	Creditor						
					\$298	Date Liability Incurred MO/YR	!					
					Mangage on Rental Property, Dover, DE	e lity Type of Liability 'R						
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#### 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 and the current related as years and the current related as years.

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		Position	per and and the Christic Cerefical year. The year Candidates
		Name of Organization	per our and une current calendar year. First-year carrolled and new emproyees report positions need in the current calendar year and two previous years.

### SCHEDULE F - AGREEMENTS

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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

# 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.

Scholinger	t and any information considered conficential as a jestit of a	government and any anomalism as a testit of a privilegal relationship recognition by law. Do not repeat internation metal on octavitie c.
	Source (Name and City/State)	Brief Description of Dutles
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services

FILER NOTES (Optional)

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FILER NOTES (Optional)

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