UNITED STATES HOUSE OF REPRESENTATIVES	FORM B		NOV 0 2 2011 Page 1 of
FINANCIAL DISCLOSURE STATEMENT	For New Members, Candidates, and New Employees	ites, and New Employees	LECISLATIVE RESOURCE CENTS:
Name: Jesse 1. Smit	Daytime Telephone:		17 NOV 20 AM 10: 17
New Member of or Candidate for State: Habame  U.S. House of Representatives District: 03  Candidates – Date of Election: Movember 4, 21	2018	Check if Amendment	ປິເຣ. ກົວລັບ ນີ້ກິຄິດກິເລີຍໃກ້ເຂົ້າທະເ (Office Use Only)
STATUS  New Officer or Employee Staff File  Employing Office: Shared	er Type (If Applicable): Principal Assistant	Period Covered: January 1, / to i	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	F THESE QUESTIONS		
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. Receive more than \$200 in unearmed income from any reportable asset during the reporting period?	No Ke. Did you period or in	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	gh 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 Yes reporting period?	No X outside ent year up thru	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?	the current calendar Yes No
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 Z J. Did you single soun	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	years? Yes No
ATTACH THE CORRESPONDING SCHEDULE IF YOU  THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE	ATTACH THE CORRESPONDING SCHEDULE IF YOU ARE	IF YOU ANSWER "YES" OU ARE REQUIRED TO COMPLETE	COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BO	INFORMATION - ANSI	WER <u>BOTH</u> OF THESE QUESTIONS	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 from this report details of such a trust that benefits you, your spouse, or dependent child?	e on Ethics and certain other "exceptent child?	ed trusts" need not be disclosed. H	lave you excluded Yes No No
<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.	"income, or liabilities of a spouse or nittee on Ethics.	dependent child because they mee	et all three tests for Yes No 💢

## SCHEDULE A - ASSETS & "UNEARNED INCOME"

BLOCKA  BLOCKA  BLOCKA  Assets and/or Income Sources  BLOCKB  Assets and/or Income Sources  BLOCKB  Assets and/or Income Sources  BLOCKB  Assets and/or Income Sources  Identify (a) each asset held for investment or production of income and with a fair market value of asset at close of the reporting period. I groundly should be seed of the reporting period succeeding \$1,000 at the end of the reporting period, I groundly any other reportable asset or source of income if market value, placks and other than \$200 in "unearned" included only because it generated income, the value sincome during the year.  Provide complete names of stocks and mutual funds (not use only ticker symbols).  Provide complete names of stocks and mutual funds (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.  For bank and other cash accounts, total the amount in all interest-bearing accounts, total the amount in all interest-bearing accounts, if the total is over \$5,000, list every financial institution where there is		BLOCK B  Value of Asset  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."  *Column M is for assets held by your spouse or dependent child in which you have no interest.  A B C D E F G H I J K L M	The lie of a	Sset use sold asset asset have	BLOCK B  BLOCK B  BLOCK B  Value of Asset  set at close of the rep frod other than fair m  used.  used.  used during the report  set it generated incon  sets held by your sp  ave no interest.	BLOCK B LOCK B Lose of A ther than ther than held by you interest	T St. St. Take of Take	- spou	Se o Se t v	r dep serio	plea and should be been defined and should be should be been defined as the been defin	<u> </u>	Name  BLOCK C  Type of Inc  Check all columns that appropriate tax-deferred adol(k), IRA, or 529 account the "Tax-Deferred" column interest, and capital relivested, must be disc for assets held in taxable whose "if the asset generating the reporting period.	all o and o	Type of the target of target of the target of ta	BLC Reference to the second se	Name: BLOCK C of Inco	BLOCK C BLOCK C BLOCK C Type of Income of Education that apply. From the tax-deferred income of 529 accounts), you deferred column, you deferred capital gains, mut capital gains, must be disclosed as did in taxable accounted generated apporting period.	For Dome ad a			mn X Seets	—————————————————————————————————————	οr as	you c	heid heid	by y sea of inc	Amc  Amc  od Tax-Deferre fincome by che ted, must be d samed or gene by your spouse o	× pour by	-X Se of the current as I M		T dep	BLOCK BLOCK T in Blocking the isclosed rated. T depend	BLOCK D  BLOCK D  In Block C, sking the app is closed as rated.  T dependent	BLOCK D  BLOCK D  In Block C, you cking the approprisclosed as incorated.  All I I II	BLOCK D  BLOCK D  BLOCK D  BLOCK D  Amount of Income  eferred" in Block C, you may y checking the appropriate the disclosed as income to the disclosed as income to repenrated.  X XI XII I II III III III	BLOCK D  BLOCK D  BLOCK D  In Block C, you may checking the appropriate box isclosed as income for a rated.  The dependent child in which in the child in the	BLOCK D  BLOCK D  BLOCK D  In Block C, you may check the sking the appropriate box below isclosed as income for asset rated.  T dependent child in which you in the state of the second	BLOCK D  BLOCK D  BLOCK D  If in Block C, you may check the "No cking the appropriate box below. E isclosed as income for assets he rated.  The dependent child in which you have represented to the proceeding the procedure the procedure that the procedure the procedure that the procedure the procedure the procedure that the procedure that the procedure the procedure that the procedure the procedure that the procedure that the procedure that the procedure that the procedure the procedure that the procedure the procedure that the procedu	BLOCK D  BLOCK D  BLOCK D  If in Block C, you may check the "None" olding the appropriate box below. Dividisclosed as income for assets held in rated.  T dependent child in which you have no income for assets held in rated.	BLOCK D  BLO	BLOCK D  BLOCK D  BLOCK D  In Block C, you may check the "None" column. cking the appropriate box below. Dividends, in isclosed as income for assets held in taxable rated.  The dependent child in which you have no interest.  Preceding Year  NI	BLOCK D  BLOCK D  BLOCK D  In Block C, you may check the "None" column. For sking the appropriate box below. Dividends, interest is closed as income for assets held in taxable acrated.  The dependent child in which you have no interest.  Preceding Year  IN NI I II III V V VI VII VIII IX X	BLOCK D  BLOCK D  BLOCK D  If in Block C, you may check the "None" column. For all of ching the appropriate box below. Dividends, interest, isclosed as income for assets held in taxable accountated.  Preceding Year  Preceding Year
market value orting period roe of income 'unearned' mutual funds		fy the asset led only one."	methor methor was y bec	ethor sold sold ause ause have	d othe ad. durin it gen it gen it gen it gen ir no ir	ertha gthe erate erate dby	n fair dinc your	portin come,	ig pe the√	alue, iniod /alue r dep	plea and shou ende	8 % 5 £ 5 £ 5 £ 5 £ 5 £ 5 £ 5 £ 5 £ 5 £ 5	D1(k) D1(k) itered itered inve	anera Fax-E fax-E st. sted sets if t the r	ate to befer and held the c	red" cap cap in ta isset ting p	ferre coul colu	. 4 <b>2 2 2 2</b> 2 3 3 5 5	# <b>5 % #</b> P P P	income ), your n. D pains, pains, ccount ated n																								
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. 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.				m	TI		Ξ					<u> </u>						1						=	= ₹	= ₹	= ₹	= ₹	Current Year	Current Year	Current Year	Current Year	Current Year	Current Year	Current Year	Current Year	Current Year	Current Year	Current Year	Current Year	Current Year  Preceding Yea	Current Year  Preceding Yea	Current Year  Preceding Year	Current Year  Preceding Year
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 mature of its activities, and its geographic location in Block A.	ent, e.g., less the its			• • •																	me or Farm Income)	me or Farm Income)	ne or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)	me or Farm Income)
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.	ond eral leral											r .									., Partnership Incor	., Partnership Incor	., Partnership Incor	., Partnership Incor	., Partnership Incor	,, Partnership Incor	,, Partnership Incor	,, Partnership Incor	,, Partnership Incor	,, Partnership Incor	,, Partnership Incor													
If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.	pted									1		1,000,000						ST			pecify: e.g.	pecify: e.g.	pecify: e.g.	pecify: e.g.	pecify: e.g.	oecify: e.g.	pecify: e.g.	pecify: e.g.	pecify: e.g.	pecify: e.g.	pecify: e.g.													
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.	of or	5 000		100,000	\$250,000	\$500,000	\$1,000,000	1-\$5,000,000	1-\$25,000,000	01-\$50,000,000		C Asset over \$		)S		T	GAINS	D/BLIND TRUS	ERRED		e of Income (Sp	e of Income (Sp		60	<b>90</b> ,500	00 ,500 ,000	00 ,500 ,000	00 ,500 ,000 5,000	00 ,500 ,000 5,000 50,000	000 ,500 ,000 5,000 50,000 100,000 \$1,000,000	000 ,500 ,000 5,000 50,000 100,000 \$1,000,000	000 ,500 ,000 5,000 50,000 100,000 \$1,000,000 1-\$5,000,000	000 ,500 ,000 5,000 50,000 100,000 \$1,000,000	000 ,500 ,000 5,000 50,000 100,000 \$1,000,000 1-\$5,000,000	000 ,500 ,000 5,000 50,000 100,000 \$1,000,000 1-\$5,000,000	000 ,5000 5,000 50,000 100,000 \$1,000,000 1-\$5,000,000 C Income over	000 ,5000 5,000 50,000 100,000 \$1,000,000 1-\$5,000,000 C Income over	000 ,500 ,000 5,000 50,000 100,000 \$1,000,000 00,000 C Income over	000 ,5000 5,000 50,000 100,000 \$1,000,000 00,000 C Income over	00 ,500 ,000 5,000 50,000 1100,000 \$1,000,000 00,000 C Income over 00 ,500 ,000 55,000	00 ,500 ,000 5,000 50,000 100,000 \$1,000,000 1-\$5,000,000 00,000 C Income over 00 ,500 ,000 55,000 100,000	00 ,500 ,000 5,000 50,000 1100,000 \$1,000,000 00,000 C Income over 00 ,500 ,000 55,000	00 ,500 ,000 5,000 50,000 100,000 \$1,000,000 1-\$5,000,000 00,000 C Income over 00 ,500 ,000 55,000 100,000	000 ,5000 5,000 50,000 100,000 \$1,000,000 1-\$5,000,000 C Income over 000 ,500 ,500 50,000 50,000 100,000 \$1,000,000
For a detailed discussion of Schedule A requirements please rafer to the instruction booklet.	None	\$1-\$1,000 \$1,001-\$1	\$15,001-\$	\$50,001-	\$100,001	\$250,001	\$500,001	\$1,000,00			Over \$50.		NONE	DIVIDENI	RENT	INTERES	CAPITAL	EXCEPTI		TAX-DEF	Other Typ	Other Typ	Other Type None \$1-\$200	Other Tyc None \$1-\$200 \$201-\$1,6	Other Tyr. None \$1-\$200 \$201-\$1,0	Other Tyr. None \$1-\$200 \$201-\$1,6 \$1,001-\$2 \$2,501-\$8	Other Tyx None \$1-\$200 \$201-\$1,001-\$; \$2,501-\$4 \$5,001-\$	Other Typ. None \$1-\$200 \$201-\$1,0 \$1,001-\$; \$2,501-\$4; \$5,001-\$; \$15,001-\$;	Other Type None \$1-\$200 \$201-\$1,001-\$2 \$2,501-\$4 \$5,001-\$2 \$50,001-\$1	Other Tyr. None \$1-\$200 \$201-\$1,0 \$1,001-\$2 \$2,501-\$4 \$5,001-\$1 \$50,001-\$2 \$15,001-\$2	Other Tyr, None \$1-\$200 \$201-\$1,0 \$1,001-\$; \$2,501-\$4; \$5,001-\$; \$15,001-\$; \$100,001	Other Tyr, None \$1-\$200 \$201-\$1,0 \$1,001-\$; \$2,501-\$4; \$5,001-\$; \$15,001-\$; \$100,001 \$1,000,000 Over \$5,000	Other Tys  None \$1-\$200 \$201-\$1,6 \$1,001-\$; \$2,501-\$; \$5,001-\$; \$15,001-\$; \$100,001 \$1,000,001 \$5,000,001 \$1,000,001	Other Tys  None \$1-\$200 \$201-\$1,0 \$1,001-\$; \$5,001-\$; \$5,001-\$; \$100,001 \$1,000,00 Over \$5,0 Spouse/L None	Other Tys  None \$1-\$200 \$201-\$1,6 \$1,001-\$; \$2,501-\$; \$5,001-\$; \$15,001-\$; \$100,001 \$1,000,001 \$5,000,001 \$1,000,001	Other Tyr.  None \$1-\$200 \$201-\$1,001-\$; \$2,501-\$; \$5,001-\$; \$15,001-\$; \$100,001 \$1,000,001 None \$1-\$200 \$201-\$1,6	Other Tyr,  None \$1-\$200 \$201-\$1,0 \$1,001-\$; \$2,501-\$4; \$5,001-\$; \$15,001-\$; \$100,001 \$1,000,00 Over \$5,0 Spouse/E None \$1-\$200 \$201-\$1,0 \$1,001-\$;	Other Tyr,  None \$1-\$200 \$201-\$1,0 \$1,001-\$; \$5,001-\$; \$5,001-\$; \$100,001 \$1,000,00 Over \$5,0 None \$1-\$200 \$201-\$1,0 \$1,001-\$;	Other Tyr,  None \$1-\$200 \$201-\$1,0 \$1,001-\$; \$2,501-\$4; \$5,001-\$; \$100,001 \$1,000,000 Cver \$5,0 Spouse/T None \$1-\$200 \$201-\$1,0 \$1,001-\$; \$1,001-\$; \$2,501-\$4; \$1,001-\$;	Other Tyr.  None \$1-\$200 \$201-\$1,0 \$1,001-\$; \$2,501-\$4; \$5,001-\$; \$15,001-\$; \$100,001 \$1,000,000 Over \$5,0 None \$1-\$200 \$201-\$1,0 \$1,001-\$; \$2,501-\$4; \$1,001-\$; \$1,001-\$; \$1,001-\$; \$1,001-\$; \$1,001-\$; \$1,001-\$; \$1,001-\$;	Other Tys  None \$1-\$200 \$201-\$1,6 \$1,001-\$; \$2,501-\$; \$5,001-\$; \$15,001-\$; \$100,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$2,501-\$1,001-\$; \$2,501-\$1,001-\$; \$1,001-\$; \$1,001-\$; \$1,001-\$; \$2,501-\$1,001-\$; \$2,501-\$1,001-\$;	Other Tys  None \$1-\$200 \$201-\$1,6 \$1,001-\$; \$2,501-\$; \$5,001-\$; \$15,001-\$; \$100,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$2,501-\$1,001-\$; \$2,501-\$1,001-\$; \$1,001-\$; \$1,001-\$; \$1,001-\$; \$2,501-\$1,001-\$; \$2,501-\$1,001-\$;	Other Tys  None \$1-\$200 \$201-\$1,0 \$1,001-\$; \$2,501-\$; \$5,001-\$; \$50,001-\$; \$100,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,001-\$1,	Other Tys  None \$1-\$200 \$201-\$1,0 \$1,001-\$; \$2,501-\$; \$5,001-\$; \$50,001-\$; \$100,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,000,001 \$1,001-\$1,
Wega Corp Stock	<b>₽</b>			×								_	4	×							<b>~</b> /	7	<u>ሃ</u> ×	<b>7</b> ×	<del>7</del> ×	<b>*</b>	۶ ×	* ×	<del>y</del> ×	* ×	* ×	* ×		* *			*	*	*	*	*	*	*	*
Frampies: Simon & Schuster		ā	Indefinite			Ш	Ш		L	L.	L	H	-	-	<u> </u>						Royalties	Royalties	Royalties	Royalties		Royalties												×		×	×	×	×	×
	×					×															Partnership Income	Partnership Income	Partnership Income	Partnership Income	Partnership Income		Partnership Income X												×		×	×	×	×
			<b></b>																																									
							<u> </u>	ļ	ļ <u>-</u>	<u> </u>	<u> </u>								l																									
			1							ļ		1	<u> </u>																															

Use additional sheets if more space is required.

ഗ
$\sim$
$\sim$
I
〒
皿
0
ž
⊂
_
Ì
111
-
~
- 1
- 1
*
حر
ഗ
Ĭ
~
m
_
cn
•
-
Qο
20
80
ټ. ش
10, % (J
% "UNE/
NEARN
NEARN
NEARNE
NEARN
NEARNE
NEARNE
<b>NEARNED I</b>
VEARNED IN
NEARNED IN
<b>NEARNED INCC</b>
NEARNED INCOM
NEARNED INCOM
NEARNED INCOM
NEARNED INCOM

Jesse J. Smith

잌

									}						J Z š				
																		Ą	
ľ																		Assets and/or Income Sources	
																		5	
									ļ	ĺ					S			ğ	_
									1	1					ASSET NAME			=	BLOCK A
					1				1						ξ			DC	S
ſ		ĺ	ĺ	ĺ	1	ĺ	ĺ	ĺ		ĺ	ĺ	ĺ	ĺ	1	Æ			Ĭ.	
									1									Š	
								İ	]									Ě	
																		893	
															#				
															7	None >>	Ţ		
											-				-	\$1-\$1,000 m	1		
		$\vdash$	-		<u> </u>		<u> </u>						-			\$1,001-\$15,000 O	1		
		<del> </del>		<u> </u>	<u> </u>						<u> </u>					\$15,001-\$50,000			
		<u> </u>			-			<del>                                     </del>				<u></u>				\$50,001-\$100,000 m	1	<	
		_			<b></b>			<del>                                     </del>								\$100,001-\$250,000	-1		
		-	<del> </del>	-	<u> </u>			-	-							\$250,001-\$500,000 G	1	e Q	Ď
	<u> </u>	<b></b>		-				_					-			\$500,001-\$1,000,000 =		Value of Asset	BLOCK B
<u> </u>		<u> </u>														\$1,000,001-\$5,000,000	$\dashv$	SSe	
<b>-</b>	_			ļ			-					-				· · · · · · · · · · · · · · · · · · ·		_	
	<u> </u>					<u></u>	-						-			\$5,000,001-\$25,000,000	_		
	<u> </u>	L				<u> </u>			ļ <u> </u>							\$25,000,001-\$50,000,000	4		
<u> </u>		<u> </u>			ļ	ļ					ļ		ļ			Over \$50,000,000	_		
															_	Spouse/DC Asset over \$1,000,000°	_		
															7	NONE			
																DIVIDENDS			
																RENT		J	
																INTEREST		Type of Income	
							-	<u> </u>				<u> </u>				CAPITAL GAINS		ð	BLOCK C
	<del>                                     </del>	_														EXCEPTED/BLIND TRUST	-	'n	Ä
<u> </u>	<u> </u>	-			-		-	ļ					l			· · · · · · · · · · · · · · · · · · ·	-	ş	
	ļ,	<u> </u>		ļ	ļ		L	ļ				<u> </u>	ļ			TAX-DEFERRED	_	rp	
																Other Type of Income (Specify: e.g., Partnership income or Farm income)			
$\vdash$					1										7	None –	╅		_
				-				_								\$1-\$200 =			
	-															\$201-\$1,000	ı		
$\vdash$																\$1,001-\$2,500 <			ì
$\vdash$		<b></b>															5 I		
												-				\$5,001-\$15,000 ≤			
			-													\$2,501-\$5,000 < \$5,001-\$15,000 ≤ \$15,001-\$50,000 ≦ \$15,001-\$50,000 ≦ \$15,001-\$50,000	ă		
<b></b>					<b> </b>											\$50,001-\$100,000 \(\sigma\)	≨ I		
		-														\$100,001-\$1,000,000	٦ [		
	<b></b>				ļ				<u> </u>		<u> </u>							>	
<b></b> -					<b>_</b>											\$1,000,001-\$5,000,000 ×  Over \$5,000,000 ×		T) O	
ļ				L									ļ —	<u> </u>				Ĭ	₽.
	<u> </u>	1													7		$\dashv$	Amount of Income	BLOCK D
	<u> </u>				_											None –		교	ê
ļ	<u> </u>							_						$\vdash$		\$1-\$200 =		ë	
<b>.</b>	<del> </del> -				ļ		<del>                                     </del>	<del>                                     </del>				-			$\vdash$	\$201-\$1,000 ==	J	Õ	
	<u> </u>															\$1,001-\$2,500 <	?		
	<u> </u>			-								· · · · · · · · · · · · · · · · · · ·			$\vdash$	\$2,501-\$5,000 < \$2,501-\$15,000	5		
																\$5,001-\$15,000 \leq 845,000 \leq 8	<del>}</del>		
<b>—</b>	<u> </u>														<b></b>	\$15,001-\$50,000 \( \leq \) \$50,001-\$100,000 \( \leq \) \$100,001-\$1,000,000 \( \text{R} \)	<b>.</b>		
<u> </u>	<u> </u>														$\vdash \vdash$	\$50,001-\$100,000			
	<u> </u>									L						\$100,001-\$1,000,000			
																\$1,000,001-\$5,000,000 ×			
	<u> </u>							<u> </u>							$\vdash$	Over \$5,000,000 ≥			
			<u> </u>													Spouse/DC Income over \$1,000,000*			

### SCHEDULE C - EARNED INCOME

Name: Jesse T. Shorth Page of \_\_\_\_\_

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 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. 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.

	4		Amount
<b>Source</b> (include date of receipt for notionalia)	Type	Current Year to Filing	Preceding Year
_	Honorarium	\$0	\$500
Examples: State of Menyland Cyct. 2)	Salary Spouse Speech	\$20,000 \$0	\$76,000 \$1,000
L	Spouse Salary	N/A	N/A

#### SCHEDULE D - LIABILITIES

Ş	Z	
	Name:	
	P	
	age	
	of	

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. 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

				SP, DC, JT		
			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	>	
				\$15,001~ \$50,000	GB	
				\$50,001- \$100,000	C	
			×	\$100,001- \$250,000	0	
				\$250,001- \$500,000	m	Amount of Liability
				\$500,001- \$1,000,000	73	of Lia
				\$1,000,001- \$5,000,000	6	bility
				\$5,000,001- \$25,000,000	π	
				\$25,000,001- \$50,000,000	_	
				Over \$50,000,000	ے	
				Over \$1,000,000* (Spouse/DC Liability)	~	

#### SCHEDULE E - POSITIONS

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-wear candidates and rew amplicates report positions held in the current calendar year and two previous years. 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, fratemal, or

period and the current calendar year. First-year candidates	period and the current calendar year. First-year candidates and new employees report positions from the cultimit calendar year and two previous years.
Position	Name of Organization

#### SCHEDULE F - AGREEMEN

NTS Name:	•	Page of
ms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of gov	respect to: future employment; a leave of absence during the period of government	of government service;

Identify the da continuation of employer.	Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation is employer.	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.

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

Use additional sheets if more space is required.

FILER NOTES (Optional) NOTE NUMBER NOTES Name: Page\_ of.

#### **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:

Over \$5,000 Threshold Not Exceeded

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.

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

This is to notify you that under the laws of the state of	_>
I withdrew my candidacy for the U.S. House of Representatives on	٠.

[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):	lesse 1. Dr	n173		
State: Alabama	•	District:	03	
Date: Movember 1, 2617	· · · · · · · · · · · · · · · · · · ·			

(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