SEP 25 2015

UNITED S	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	For New Members, (FORM B For New Members, Candidates, and New Employees	Page 1 of \pm
Name:	hvistica M. Hartman	Daytime Telephone:	.	CLS. HOUSE OF REPRESENTATIVES
FLER	New Member of or Candidate for State: PA U.S. House of Representatives District: 16 Candidates – Date of Election: 11 5 16		Check if Amendment	(Office Use Only)
STATUS	New Officer or Employee Employing Office:		Period Covered: January 1, to	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMIN	PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	F THESE QUESTI	ONS	
A. Did you, you a. Own any i end of the b. Make mor asset duri	Did you, your spouse, or your dependent child: 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 CFE	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	ng the reporting period Yes No No
C. Did you or you honoraria, or pen 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 Yes reporting period?	\$ 	F. Did you have any reportable agreements or arrangements an outside entity during the reporting period or in the current calendar year up through the date of filing?	able agreements or arrangements with reporting period or in the current e date of filing?
D. Did you, you liability (more the	Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	\$	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	in \$5,000 from a single Yes No
,	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	ATTACH THE CORRESPONDING SCHEDULE IF YOU AN INCLUDES ONLY THE SCHEDULES THAT YOU ARE RE	DULE IF YOU ANSWER "YES" HAT YOU ARE REQUIRED TO	S" D COMPLETE
EXCLUSI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	INFORMATION -	ANSWER BOTH OF THESE	E QUESTIONS
TRUSTS - Det this report deta	TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not this report details of such a trust that benefits you, your spouse, or your dependent child?	on Ethics and certain other "nt child?		be disclosed. Have you excluded from Yes . No 🔄
EXEMPTION - tests for exemp	EXEMPTION - Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or depertests for exemption? Do not answer 'yes' unless you have first consulted with the Committee on Ethics.	income, transactions, or liabi Committee on Ethics.	ities of a spouse or dependent child becau	ndent child because they meet all three Yes No

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Mistra M. Harmen

Page 2 of 7

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	parce	Det + o	Mosn	Fracht	Į	Examples:		Assets and/or Income identify (a) each asset held if production of income and with a accessing \$1,000 at the end of the hocome which generated more unemersed income during the year. Provide complete names of stocks (do not use only ticker symbols). For all lifeAs and other retirement from the account that exceeds the report is account, and interest-bearing counts. If \$5,000, list every financial instead installations that succeeds the report for a stock and other real property. If all the service than \$1,000 in interest-bearing the report of the service than \$1,000 in interest-bearing that is not publicly traded, state that is not publicly traded, state that is not publicly traded, state ausiness, the nature of its as accurately interest in a private that is not publicly traded, state ausiness, the nature of its as accurately interest in the nature of its as accurately interest in the returned of the activate that is not publicly traded, state ausiness, the nature of its as accurately interest in, or income delived period interest in, or income delived withernern program, including the Ti fyou have a privately-traded fund to research that of your may indicate in the optional column on the fair left for a delated desired effects of the line report of the line of the line and column on the fair left of the line and column on the fair left of the line and column on the fair left of the line and column on the fair left of the line and column on the fair left of the line and column on the fair left of the line and column on the fair left is all the state of the column on the fair left of the line and column on the fair left in the line and column on the fair left in the line and column on the fair left in the line and column on the fair left in the line and column on the fair left in the line and column on the fair left in the line and column on the fair left in the line and column on the fair left left.	
. , , ,	Congress Apartmas	we to filer	11 hyrad 4014	n 401 A	ABC Hedge Fund X	Simon & Schuster	Mega Corp Stock	Assets and/or Income Sources bearing (a) each asset heid for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in unearmed income which generated more than \$200 in unearmed income and names of stocks and mutual funds (do not use only ticker symbols). For all RPAs 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 least since than \$1,000 in interest-bearing accounts, total the sour in all interest-bearing accounts. If the load to work the account that exceeds the reporting thresholds. For rental and other real property held of investment, provide a complete address or description, e.g., tental property, and a city and state. For an ownership interest in a privately-held for investment, provide a complete address or description, e.g., tental property, and a city and state. For an ownership interest in a privately-held for investment, provide a complete address or description, e.g., tental property, and a city and state. For an ownership interest in a privately-held for investment, provide a complete address the name of the business, the nature of its activities, and its prographic location in Block A. The property of the reporting period, part, a federal stratest in, or income derived from, a federal stratest in, or income derived from, a federal stratest in, or income leaves of the surjust period, part an Eucepted investment program, including the Thrift Savings Plan, if you an choose, you may indicate that an excepted investment Fund, please check the EIP box. To a cleased discussion of Schedule A requirements, please refer to the instruction booldet.	BLOCK A
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Christina M. Hartman

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SCHEDULE C - EARNED INCOME

Name: Christia M. Harman Page 4 of 7

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 2014 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. The 2015 limit is \$27,225. 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.

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SCHEDULE C - EARNED INCOME

Name: (Mrishin M. Harman Page 5 or 7

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.

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Examples: Source (include date of receipt for honoraria) Type	Type Honoratum Splany Spouse Speech Spouse Consuling Spouse Consuling Spouse Consuling Spouse Consuling Consuling Consuling Consuling Consuling Consuling	Current Year to Filling Storm Storm Storm Storm Storm An / A An	Amount Preceding Year \$500 \$76,000 \$1,000 NA NA
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SCHEDULE D - LIABILITIES

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	Name:
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	Page 6 of 7

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 change 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.

	•	SP Gre	Ехан	8 g
	Corporation Madison, WI	xt Lakes Higher Education	Example First Bank of Willmington, DE	Creditor
		8/11	5/98	Date Liability Incurred MO/YR
		Shedent / own	Mortgage on Rental Property, Dover, DE	Type of Liability
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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 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	Position Name of Organization
Board Presusures	Cuber and Rights Initiative

SCHEDULE F - AG

nd 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;	PREEMENTS Name: Christina M. Havingen
ent; a leave of absence during the period of g	
of government service;	Page 7 of 7

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

Date	Parties to Agreement	Terms of Agreement
	n/a	
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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.

Section and only information of principle control that the control of principles of control of principles of the control of principles of the control of the	a principal distance in proceedings of the control
Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
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