



Filing ID #10007427

FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Hon. Christopher H. Smith
Status: Member
State/District: NJ04

FILING INFORMATION

Filing Type: Annual Report
Filing Year: 2014
Filing Date: 05/15/2015

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Capital One 360, P.O. Box 60, St. Cloud, MN 56302	JT	\$10,104	Interest	\$364	<input type="checkbox"/>
Vanguard Money Market IRA (inherited)		\$37,618	Capital Gains, Dividends	\$4	<input type="checkbox"/>

SCHEDULE B: TRANSACTIONS

Asset	Owner	Date	Tx. Type	Amount	Cap. Gains > \$200?
Vanguard Money Market Fund IRA (inherited)		11/17/2014	S (partial)	\$1,730	<input type="checkbox"/>

SCHEDULE C: EARNED INCOME

Source	Type	Amount
Gosperl of Life Ministries	Spouse Salary	N/A

SCHEDULE D: LIABILITIES

None disclosed.

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

None disclosed.

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?
University of Notre Dame Center for Ethics and Culture	04/4/2014	04/6/2014	Washington, D.C. - South Bend, IN - Washington, D.C.	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Source	Activity	Date	Amount	Charity Name
University of Notre Dame Center for Ethics and Culture - South Bend, IN	Speech	04/5/2014	\$5,000	Good Counsel Inc. P.O. Box 6068 Hoboken, NJ 07030

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. Christopher H. Smith , 05/15/2015