HAND DELIVERED

hey meet Yes No	or liabilities of a spouse or your dependent child because the on Ethics.	earned" income, transactions, consulted with the Committee	EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or your dependent child because they meet all three tests for exemption? Do not answer 'yes' unless you have first consulted with the Committee on Ethics.
xduded Yes No	nother "excepted trusts" need not be disclosed. Have you excluded	nmittee on Ethics and certain ependent child?	TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. from this report details of such a trust that benefits you, your spouse, or dependent child?
lease Yes No	e reporting period? If you answered "yes" to this question, please	itial Public Offering during the	IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" contact the Committee on Ethics for further guidance.
CH OF THESE QUESTIONS	- ANSWER EA	NT, OR TRUST INF	IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
DING SCHEDULE IF YOU ANSWER "YES"	E CORRESPON	Yes No	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?
charity in Yes No	 Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period? 	Yes 1 No	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?
eany yes No No eriod?	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$375 in value from a single source during the reporting period?	Yea No	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?
eany single Yes No	G. Did you, your spouse, or your dependent child receive any reportable grit(s) totaling more than \$375 in value from a single source during the reporting period?	Yes No	B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?
nt with an Yes V No	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?	Yes Wo	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? of the reportable by Receive more than \$200 in uneamed income from any reportable asset during the reporting period?
		THESE QUESTIONS	PRELIMINARY INFORMATION - ANSWER EACH OF
	Termination Date of Termination:	Amendment	REPORT 2016 Annual (Due: May 15, 2017)
Staff Filer Type: (If Applicable) Shared Principal Assistant	Officer or Employing Office: Employee	AZ 6	FILER STATUS Member of the U.S. State: House of Representatives District:
A \$200 penalty shall be assessed against any individual who files more than 30 days late.	Daytime Telephone: えりみ えおろ えりり A \$200 p	Daytime Tele	Name: Schweikert, David
U.S. HOUSE OF REP KESEN WITHES "	U.S. HO		
LEGISLATIVE RESOURCE CHARGET or 10 17 AUG 15 PM 3: 50	Form A For Use by Members, Officers, and Employees		UNITED STATES HOUSE OF REPRESENTATIVES

			Sheridan Haldings	•	Sherivan Eputties	ABC Hadge Fund X	Eramples:	SP Nega Corp. Shork ESF	For bank and other cach accounts, total the amount in all internet-basing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in internet-bearing accounts. For ear ownership interest in a privately-held builhess that is not soldly und state. For an ownership interest in a privately-held builhess that is not soldly traded, state the name of the business, the nature of its activities, and its geographic location in 18 flock. Exclude: Your prevenal traidence, including second hornes and vecreto nomes (unless there was retail informe during the reporting period); and any infarcial inferent in, or income cachied from, a federal income during the reporting period); and any infarcial inferent in, or income cachied that the TEIF box. If you have a privately-maded fund that is an Excasted investment Fund, please thest the TEIF box. If you have a privately-maded fund that is an Excasted investment Fund, please thest the TEIF box. If you so those, you may indicate that an seaso of income source is that or your apputes (SF) or dependent oral (OC), or jointly hald with anyone (JT), if you detailed secusion or the far left. For a detailed decussion of Scheckle A requirements, please refer to the instruction boodes.	ror are even and correct restraint pures (even of AOT(k) plans) provide the value for each asset held in the economy that exceeds the reporting thresholds.	<u> </u>	Identify (8) elect asset held for investment or indice production of income and with a fair market value value accessing 51,000 at the end of the reporting period, used and (8) any other reportable steel or souther of income that generated more than \$200 in "unearmed" income during the year. "Colu	BLOCK A Assets and/or income Sources
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	SCHEDULE A - ASSETS & "UNEARNED INCOME"	
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SCHEDULE C - EARNED INCOME

Mama: Schweikert David Page 5 of 18

List the source, type, and emount of earned income from any source (other than the filer's ourrent employment by the U.S. government) btaling \$200 of the source and amount of any honorarie; list only the source for other spouse serned income exceeding \$1,000. See examples below. EXCLUDE: Affittary pay (such as National Guard or Reserve pay), federal retherment programs, and benefits received under the Social Security Act. SHCOME LIMITS and PROHIBITED INCOME: The 2016 limit on outside earned income for Members and employees compensated at or above the types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited.	ment) totaling \$200 or more during the low. cotal Security Act. sated at or above the "senior staff" rate totally prohibited.	r more during the reporting period. For a spouse, list benior staff rate was \$27,225. In addition, certain
Source (include date of receipt for honoraria)	Type	Amount
Goon Seas. Examples: The Foundation (Cu. 2)	Approved Feathing Fee Lapidethe Peneton System Speech	\$16,000 \$16,000
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Page 6 of 10	
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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. Manufers: 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 to ut 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 flable); and itsulffies owed to you by a spouse or the child, perent, or abiling 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 acceeded \$10,000.

*Column K is for liabilities held addely by your spouse or dependent child.

		SC SE		
Salle	Esemple			
Sallie Mac	First Burst of Wilmington, DE	Craditor		
2003	5/54	Data Liability incurred MO/YR		
STudent Loan	Mortgage on Rental Property, Doner, DE	Type of Liability		`
		\$10,001- \$16,000	>	
<		\$15,001- \$50,000	8	
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		\$25,000,001- \$50,000,000	_	
-		Over \$50,000,000	. 5-] -
		Over \$1,000,000* (Spouse/DC Liability)	*	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year se an officer, director, trustee of an organization, perther, proprietor, representative, employee, or consultant of any compensated, firm, perthership, or other business enterprise, nonprofit organization, all bor organization, or educations of the institution other than the United States. Exclude: Positions

heid in any religious, social, fraternal, or political entitles (suc	ted in any religious, sects, fraternal, or political entities (such as political packets and comparign organizations); and positions solely of an indicomy returns.
Position	Name of Organization
Managing Membel	Sheridan Fourties LLC + Sheridan Equities Holdings LLC
Administrator - Spouse	Scottsdale kye Survery

SCHEDULE F - AGREEMENTS

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identify the continuation	Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of all continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee	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 Agraement	Terms of Agreement
11/2010	11/2010 Sheridan Kausties Holdings LLC	Sheriden Faulties Holding HC has an
		agresment with Swarts + Brough For a
		Parties of Resident Equity on the Partnership
		Farmally manyer Participated in 124 Sheridan
		Far - NOW CONTROLLED BY SWORTZ + Brown
		Upon the competion I sale

SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$375 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an individual, local meets, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$150 or less need not be added towards the \$375 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Nr. Joseph Serits, Arlington, VA	Silver Plater (determination of personal Mandal-to received from the Elvica Committee)	\$400
		-

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

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Identify the source and list travel bluerary, dates, and nature of expenses provided for travel and travel-releated expenses betaling more than \$375 received by you, your apouse, or your dependent child during the reporting period. Indicate whether a family mamber accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the aponeor.

EXCLUDE: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is includy independent of his or her relationship to the files.

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SCHEDULE I – PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

JUNEAU CLITT TOTAL	Name: Yr Jan Vort Car.		
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List the source, sctivity (i.e., speech, appearance, or article), date, and amount of any payment made by the aponsor of an event to a charitable organization in fau of paying an honorarium to you. A separate confidential fist of charities receiving such payments must be filled directly with the Committee on Ethics.	sor of an event to a charitable crijer	an gelydd ar gelydd ar) honorarium to, you. A
Source	Activity	Date	Amount
Association of American Associations, Washington, DC XXZ Managerina	Speech	Feb, 2, 2015 Aug. 13, 2015	\$2,000
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