



Filing ID #10029757

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • 135 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Kate Bolz
Status: Congressional Candidate
State/District: NE01

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2019
Filing Date: 10/22/2019

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
Bolz Family Farms LLC [FA]	JT	\$500,001 - \$1,000,000	None		
LOCATION: Palmyra / Otoe, NE, US DESCRIPTION: Part owner, family farm.					

* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
Nebraska State Legislature	Salary	\$12,000.00	\$12,000.00
Nebraska Association of Service Providers	Salary	\$44,802.00	\$45,851.04
Nebraska Wesleyan University	Salary	\$3,300.00	N/A
Nebraska State Legislature	Per Diem	\$4,874.00	\$3,302.00
Union College	Salary	N/A	\$2,701.00

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	FedLoan Servicing	December 2005	Student Loan	\$15,001 - \$50,000

SCHEDULE E: POSITIONS

Position	Name of Organization
Executive Director	Nebraska Association of Service Providers
Adjunct Professor	Nebraska Wesleyan University
State Senator	Nebraska Legislature
Co-Owner	Bolz Family Farms LLC
Board Member	Foundation for Lincoln Public Schools
Adjunct Professor	Union College

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

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: Kate Bolz , 10/22/2019