DEC 08 2017

et all three tests for Yes No X	a spouse or dependent child because they med	arned" income, or liabilities of committee on Ethics.	<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.
Have you excluded Yes No X	ther "excepted trusts" need not be disclosed. I	mittee on Ethics and certain opendent child?	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?
OF THESE QUESTIONS		JST INFORMATION	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH
COMPLETE	THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	Y THE SCHEDULES	THIS FORM INCLUDES ON
}**	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	RRESPONDING SC	ATTACH THE CO
n \$5,000 from a Yes No	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	Yes 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?
ble agreement or arrangement with an orting period or in the current calendar Yes No Killing?	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 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?
g the reporting ugh the date of filing? 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?	Yes No	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 unearned income from any reportable asset during the reporting period?
	TIONS	OF THESE QUES	PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS
A \$200 penalty shall be assessed against any individual who files more than 30 days late.	Period Covered: January 1,	Staff Filer Type (If Applicable): Shared Principal Assistant	New Officer or Employee St  Employing Office: St
(Office Use Only)	Check if Amendment		New Member of or Candidate for State:  U.S. House of Representatives District:  Candidates – Date of Election: 1974/18
U.S. HOUSE OF REPRESENTATIVES	hone:	Daytime Telephone:	Name: Sherrill Kenneth Alexander
LEGISLATIVE RESOURCE CENTER 17 DEC 13 PH 2: 42	FORM B For New Members, Candidates, and New Employees		UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT

## SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Shervill KAlexander

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## SCHEDULE D - LIABILITIES

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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 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

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								>	Amount of Liability	t of Li	ability				
	<del></del>		Date		>	В	င	D	m	F	G	I	_	ر	*
DC, JT DC, JT	-	Creditor	Date Liability Incurred MO/YR	Type of Liability	\$10,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,001- \$250,000	\$250,001- \$500,000	\$500,001- \$1,000,000	\$1,000,001- \$5,000,000	\$5,000,001- \$25,000,000	\$25,000,001- \$50,000,000	Over \$50,000,000	Over \$1,000,000* (Spouse/DC Liability)
	Example	First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE				×							
	Securit	Security State Bank, TX	5/15	Real Estate Loan			×								
	Americ	American Express, cc	12/17	12/17 Revolving Codit Card		×									
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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, fratemal, 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 Name of Organization	Period and the canent calendar year. First-year canvidates	pened and the calletter year. Files year candidates and her simple year report positions used in the callette callette callette callette.
	Position	Name of Organization