			ner 22 2015
UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	FORM B For New Members, Candidates, and N	FORM B Andidates, and New Employees	Page 1 of
Name: Exiche CXGE	Daytime Telephone:		2016 JAN - 5 PM 2: 18
New Member of or Candidate for State: V.S. House of Representatives District: OS FILER Candidates – Date of Election: 172		Check if Amendment	(S.H.33 E. CF.R.), p.e.S.Libbel F.S. (Office Use Only)
New Officer or Employee Employing Office:		Period Covered: January 1, 214 to 11 729 January 1, 214	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	F THESE QUESTION	ONS	
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 Yes b. Make more than \$200 in unearned income from any reportable asset during the reporting period?	No E.	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	ing the reporting period Yes No 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?	No F.	F. Did you have any reportable agreements or arrangements with an outside entity during the reporting period or in the current calendar year up through the date of filing?	or arrangements with Yes No X
D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	No. 3.	J. Did you receive compensation of more than \$5,000 from a single source in the current year and \(\)\(\)\(\)\(\)\(\)\(\)\(\)\(\)\(\)\(\	s? No 15,000 from a single Yes No
ATTACH THE CORRESPONDING SCHEDULE IF YOU THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE	ESPONDING SCHE	EDULE IF YOU ANSWER "YES" HAT YOU ARE REQUIRED TO COMPLETE	S" D COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	INFORMATION -	ANSWER <u>BOTH</u> OF THESI	E QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need this report details of such a trust that benefits you, your spouse, or your dependent child?	on Ethics and certain other " t child?		not be disclosed. Have you excluded from Yes No X
EXEMPTION – Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or duests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	ncome, transactions, or liabi Committee on Ethics.	ilities of a spouse or dependent child becau	ependent child because they meet all three Yes No X

SCHEDULE A - ASSETS & "UNEARNED INCOME" Name: Exiche CACE

1					News the	ABC Hedge Fund X	Examples: Simon & Schuster	Mega Corp Stock	interest-bearing accounts, total the amount in Interest-bearing accounts. If the total is over 5,000, list every financial institution where there is over than \$1,000 in interest-bearing accounts. ore than \$1,000 in interest-bearing accounts. or renetal and other real property held for investment, wide a complete address or description, e.g., and property, and a city and state. or an ownership interest in a privately-held business at is not publicly traded, state the name of the stiness, the nature of its activities, and its sographic location in Block A. Sographic location in Block A. The premark readence, including second mes and vacation homes (unless there was rental come during the reporting period); and any financial come during the reporting period); and any financial diement program, including the Thrift Savings Plan, you have a privately-traded fund that is an Excepted vestment Fund, please check the "EIF" box, you have a privately-traded fund that is an Excepted vestment Fund, please check the "EIF" box, you so choose, you may indicate that an asset or come source is that of your spouse (SP) or you so choose, you may indicate that an asset or come source is that of your spouse (SP) or periodent child (DC), or jointly held with anyone (JT), the optional column on the far left. or a detailed discussion of Schadule A quirements, please refer to the instruction booklet.	or all IRAs and other retirement plans (such as 11(k) plans) provide the value for each asset held in e account that exceeds the reporting thresholds.	rovide complete names of stocks and mutual funds to not use only ticker symbols).	entify (a) each asset held for investment or roduction of income and with a fair market value (ceeding \$1,000 ret the end of the reporting period, rd (b) any other reportable asset or source of come which generated more than \$200 in reamed income during the year.	Assets and/or income Sources	BLOCK A
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Use additional sheets if more space is required.

SCHEDULE C - EARNED INCOME

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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.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act

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 professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

	•	Am	Amount
coarce (include date of receipt for Horiotalia)	Type	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples: State of Maryland Cort 2)	Salary	\$20,000	\$76,000
Ontario County Board of Education	Spouse Salary	N/A	N/A
read for America	4-145	0	94,000
Halifa austy Public Schols	SXIONY	680	0

SCHEDULE D - LIABILITIES

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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. 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 exceeded \$10,000. 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.

		SP, DC, JT		
54	Example			
SAME MAE	First Bank of Wilmington, DE	Creditor		
PP 80	5/98	Date Liability Incurred MO/YR		
08/94 Student LOAN	Mortgage on Rental Property, Dover, DE	Type of Liability		
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		Over \$1,000,000*	*	

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.

Position	Position Name of Organization
Director Constitution & Pails	Treath For America

SCHEDULE F - AGREEMENTS

Name: Training Page_ 잌

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 Agreement	Terms of Agreement
	None	
-		

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.

•		
	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
	Mone	