

FINANCIAL DISCLOSURE REPORT

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

FILER INFORMATION

Name: Test Test Account Test Status: Congressional Candidate

State/District: CA25

FILING INFORMATION

Filing Type: Candidate Report

Filing Year: 2016

Filing Date: 07/12/2016

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
Ford Motor Company (F)	\$1 - \$1,000	None		
DESCRIPTION: Testing COMMENTS: Testing				

SCHEDULE C: EARNED INCOME

Source	Туре	Amount Current Year to Filing	Amount Preceding Year
Test	Testing	\$1,500.00	\$1,500.00
COMMENTS: Testing			

SCHEDULE D: LIABILITIES

None disclosed.

SCHEDULE E: POSITIONS

None disclosed.

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?

C 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

COMMENTS

Testing

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: Test Test Account Test, 07/12/2016