



Filing ID #10016821

FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Hon. Collin C. Peterson
Status: Member
State/District: MNo7

FILING INFORMATION

Filing Type: Annual Report
Filing Year: 2016
Filing Date: 05/12/2017

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Bremer Bank N. A.		\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>
CollinC and Jason R Peterson - Peterson Farms Partnership - 50% Interest, 50% Interest		\$100,001 - \$250,000	None		<input type="checkbox"/>
LOCATION: Pennington County , MN, US DESCRIPTION: 50% share in farm with my son					
Condominium - Washington, DC		\$250,001 - \$500,000	None		<input type="checkbox"/>
LOCATION: Washington, DC, US					
Lakewest Properties, 33% Interest		\$1 - \$1,000	None		<input type="checkbox"/>
LOCATION: Becker, MN, US DESCRIPTION: 1/3 interest in partnership					
Personal Residence		\$500,001 - \$1,000,000	None		<input type="checkbox"/>
LOCATION: Becker, MN, US					
Thrift Savings Plan		\$500,001 - \$1,000,000	Interest	\$15,001 - \$50,000	<input type="checkbox"/>
DESCRIPTION: Value of my 403b account					

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
USAA		\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>
Wright Patman Congressional Federal Credit Union		\$50,001 - \$100,000	Interest	\$1 - \$200	<input type="checkbox"/>

SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE C: EARNED INCOME

None disclosed.

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	Well Fargo Home Mortgage	9/20/2013	Mortgage on Detroit Lakes, MN residence	\$250,001 - \$500,000
	Chase Mortgage	3/11/2013	Mortgage on Washington DC condominium	\$100,001 - \$250,000

SCHEDULE E: POSITIONS

Position	Name of Organization
Professional/Advisory Board	MINnesota State University Moorhead - School of Business
Partner	Collin C and Jason R Peterson - Peterson Farms Partnership
Partner	Lakewest Properties

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

None disclosed.

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

IPO: Did you purchase any shares that were allocated as a part of an Initial Public Offering?

☐ Yes ☒ No

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

COMMENTS

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: Hon. Collin C. Peterson , 05/12/2017