#### 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. Make more than \$200 in unearned income from any reportable asset during the reporting period? Name: EXEMPTION - Have you excluded from this report any other assets, "uneemed" 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. EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? C. Did you or your spouse have "samed" income (e.g., salaries, honoraria, or pension/iRA distributions) of \$200 or more during the PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS FINANCIAL DISCLOSURE STATEMENT UNITED STATES HOUSE OF REPRESENTATIVES 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? reporting period? FILER STATUS D Employing Office: U.S. House of Representatives New Officer or Employee Candidates - Date of Election: New Member of or Candidate for THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" State: × ž. 2 \* Daytime Telephone: For New Members, Candidates, and New Employees 종 중 S Z X J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years? F. Do 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? E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? Period Covered: January 1, Check If Amendment A \$200 penalty shall be assessed against any individual who files more than 30 days late. LINGUATIVE RECOURSE DIVINIO U.S. HOUSE OF REPRESENTATIVES 2016 OCT -5 PM 12: 56 (Office Use Only) SEP 3 0 2018, 1 of 5 š š ž ž X ₹ 중 중 중 \$ A

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## SCHEDULE C - EARNED INCOME

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ist 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.  XCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act
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THOOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2015 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,225. The 2016 limit is \$27,485. 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.	I income may apply to you after y 16 limit is \$27,485. In addition, cer nior staff.	ou are on House payroli. The 2011 tain types of income (notably honoral	5 limit on outside earned income for rie, director's fees, and payments for
Source (include date of receipt for honoraria)	Туре	Arm Current Year to Filling	Amount Proceeding Year
AND THE ASSESSMENT OF THE STATE			
Examples: Single of Manyland Chill War Roundlade (Oct. 2)	Spouse Speech	\$29,000 \$0	\$78,000 \$1,000
Charle County Board of Education	Spouse Selery	WA	N/A
LAMAR Schools CAMP Colorado	SALAM	49,000	48,000
	^		

#### SCHEDULE D - LIABILITIES

he reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence	
by you, your spouse, including mortgages or	Name:
or your dependent child n their personal residen	
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he reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting is by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence.	Page 4 of 5
reporting 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 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 itabilities held solely by your spouse or dependent child. period. New Members: Members are required to report all liabilities secured Report liabilities of over \$10,000 owed to any one creditor at any time during the

								≥	mount	<b>Amount of Liability</b>	bility		   		
			}		>	<b></b>	c	σ.	m	-m	G	×	-	-	*
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	6/940	Mortgage on Rental Property, Dover, DE				×							
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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, 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 and two previous years.

Position /BCher	Name of Organization  CAMAR Roblic School, CAMAR (D)

### SCHEDULE F

		Date	Identify the date, pa		SCHEDULE
	Mone	Parties to Agreement	Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a l continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an	9 9 9	SCHEDULE F - AGREEMENTS
		Terms of Agreement	we with respect to: future employment; a leave of absence during the period of government service; vernment; or continuing participation in an employee welfare or benefit plan maintained by a former employer.	7	Name: 1309 Leng
			ment service; t by a former employer.		Page 5 of 5

# 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) Doe Jones & Smith, Hometown, Homestate 10012 **Brief Description of Duties** Accounting Services