UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	<b>FORM B</b> For New Members, Candidates, and New Employees	NOV 3 0 20:5
Name: Justin Contelle	Daytime Telephone:	2015 DEC - 7 PM IS
New Member of or Candidate for State: FL  U.S. House of Representatives District: 11  Candidates – Date of Election: 11 2016	Check if Amendment	M 10 (Office Use Only)
STATUS  New Officer or Employee  Employing Office:	Period Covered: January 1,to	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 QUESTIONS	
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?	No E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	g the reporting period 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 Yes reporting period?	No 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?	r 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 Source in the current year and two prior years?	n \$5,000 from a single Yes No X
ATTACH THE CORF	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	S" COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER B	INFORMATION - ANSWER BOTH OF THESE QUESTIONS	E QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" new this report details of such a trust that benefits you, your spouse, or your dependent child?	on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from it child?	ave you excluded from Yes No X
<b>EXEMPTION</b> – Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	ncome, transactions, or liabilities of a spouse or dependent child because they meet all three Committee on Ethics.	ise they meet all three Yes No K

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## SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Justin Grabelle

Page 2

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_			7	_			7,,-	all interest-bearing accounts, total the amount in all interest-bearing accounts. If the total is, over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.  For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state.  For an ownership interest in a privately-held businesses the is not publicly traded, state the name of the business, the mature of its activities, and its geographic location homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Sevings Plan. If you have a privately-traded fund that is an Excepted Investment Fund, please check the "EIF" box.  If you have a privately-traded fund that is an Excepted Investment Fund, please check the "EIF" box.  If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left.	For all IRAs and other retirement plans (such as 40°1(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	onot	≥					
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Use additional sheets if more space is required.

## SCHEDULE C - EARNED INCOME

Name: Justin Gribelle Page 3 of 3

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

					8		Ļ	Examples: State of Maryland	ARC Trade Association Baltimore, MD (July 15)	Source (include date of receipt for honoraria)	
				ı	Spower Salvay	Sparse Saleny	Spouse Salary	Selary	Honorarium	Туре	
					312,682.16	\$72,578.61	N/A	\$20,000	0.5	Current Year to Filing	Am
					U/A	\$33,204.07	N/A	\$76,000 \$1,000	\$500	Preceding Year	Amount