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UNITED STATES HOUSE OF REPRESENTATIVES		Form A Form A	DELIVERED of 4
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Name: DINA TITUS	Daytime Telephone:		LITTING STATES TO LITTING STATES AND A SECRETARISM STATES AND A SECRETARISM STATES AND A SECRETARISM STATES AND A SECRETARISM
FILER STATUS  Member of or Candidate for State: 1/4 U.S. House of Representatives District:	NENYDY	Officer or Employing Office: Employee	
REPORT 2014 Annual (Due: May 15, 2015)	Amendment	Termination  Date of Termination:	nination:
PRELIMINARY INFORMATION - ANSWER EACH OF TH	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? Of b. Make more than \$200 in unearmed income from any reportable asset during the reporting period?	Yes No F. Di outsi	F. Did 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?	arrangement with an Yes No No
dent child purchase, sell, or real estate in a transaction period?	Yes No G. Di	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$375 in value from a single source during the reporting period?	child receive any 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?	Yes No H. Di	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$375 in value from a single source during the reporting period?	hild receive any totaling more than Yes No No No Proporting period?
D. Did you, your spouse, or your dependent child have any reportable Y liability (more than \$10,000) at any point during the reporting period?	Yes No l. Dic	I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period?	onation to charity in Yes No No
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes No ATI	M	CORRESPONDING SCHEDULE IF YOU ANSWER "YES"
IPO AND EXCLUSION OF SPOUSE, DEPENDENT,	, OR TRUST INFORMATION	- ANS	WER EACH OF THESE QUESTIONS
IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance.	ublic Offering during the reporting	period? If you answered "yes" to this q	uestion, please contact Yes No No
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?	ee on Ethics and certain other "ex dent child?		not be disclosed. Have you excluded from Yes No No
<b>EXEMPTION</b> – Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or you three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	d" income, transactions, or liabiliti with the Committee on Ethics.	as of a spouse or your dependent child l	ur dependent child because they meet all Yes No No

## SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: TWA

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*DINANASINI	SP EQUITABLE WHOLE WHE	(NOUR	of Prodeatial whole like	INSURANCE	PRUDGATIAL WHOLE LINE	ABC Hedge Fund X	Examples:	SP, Maga Corp. Stock Eff	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 business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.  Exclude: Your personal residence, including second fromes and variation 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 Thirth Savings Plan.  If you have a privately-braded fund that is an Excepted Investment Fund, please check the "EIF" box.  If you so choose, you may indicate that an esset or income source is that of your apouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left.  For a detailed discussion of Schedule A requirements, please rater to the instruction bookles.	the account that exceeds the reporting thresholds.  For hank and other rash accounts total the amount			BLOCK A Asset and/or income Source
	X		×		×	×	Indefinite	×	None \$1-\$1,000 \$1.001-\$15,000 \$15,001-\$50,000 \$50,001-\$100,000 \$250,001-\$500,000 \$250,001-\$1,000,000 \$1,000,001-\$5,000,000 \$2,000,001-\$5,000,000 \$25,000,001-\$50,000,000 \$25,000,001-\$50,000,000 \$25,000,001-\$50,000,000 \$25,000,001-\$50,000,000 \$25,000,001-\$50,000,000	A B C D E F G H I J K L M	If an asset was sold during the reporting period and is included only because it generated income, the value should be "None." "Column M is for assets held by your spouse or dependent child in which you have no interest.		BLOCK B  Value of Asset
	*		<b>X</b>		<b>X</b>	Partnership	Royalbae	X	DIVIDENDS  RENT  INTEREST  CHARGE CARRES  EXCEPTED/BLIND TRUST  TAXABLE SARRES  Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		l as income heck "None" the reporting	Check all columns that apply. For accounts that generate tax-deferred income (such as 40(lk), IRA, or 529 accounts), you may check the "Tax-Deferred" that the such as the suc	BLOCK C  Type of Income
	*		<b>X</b>					×	\$1-\$200 \$201-\$1,000 \$1,001-\$2,500 \$5,001-\$15,000 \$5,001-\$100,000 \$1,000,001-\$5,000,000 \$1,000,001-\$5,000,000	IX XX XX IIV IV V V V V V V V V V V V V	must be di accounts, generaled. *Column XII in which you	For assets for which you checked "Tax-Deferred" in mey check the "None" column. For all other asset category of income by checking the appropria	BLOCK D  Amount of Income
								S(part)	blank if there are no bransactions that exceeded \$1,000.	Leave this column	exchanges (E) exceeding \$1,000 in the reporting period.  If only a portion of an asset was sold, please indicate as	Indicate if the asset had purchases (P).	BLOCK E Transaction

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