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UNITED STATES HOUSE OF REPRESENTATIVES	FORM B For New Members, Candidates, and New Employees	This parties from the first
Name: Josh Cottheiner	Daytime Telephone:	2017 HAY 22 MM11: 25
New Member of or Candidate for State: U.S. House of Representatives District: Candidates - Date of Election:	Check if Amendment	(Office Use Only)
STATUS New Officer or Employee Sta Employing Office: Sha	Staff Filer Type (If Applicable): Shared Principal Assistant to May 7017	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	OF 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. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	Yes 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 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 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
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Yes No J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	r years?
ATTACH THE CO	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO	SWER "YES" QUIRED TO COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH	-	OF THESE QUESTIONS
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?	ittee on Ethics and certain other 'excepted trusts' need not be disclosed.	Have you excluded Yes No
EXEMPTION – Have you excluded from this report any other assets, "uneamed" 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.	ned" income, or liabilities of a spouse or dependent child because they me xnmittee on Ethics.	et all three tests for Yes No No

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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Name: Josh Corhelmer

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Chisé Checking	Emisser Direct	We Ith Comot		SP Triff Sevings Plus	ABC Hedge Fund X	Examples: Simon & Schuster	DC, Mega Corp Stock	please refer to the instruction booklet.	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 field with anyone (JT), in the optional column on the far left.	If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.	exetude: Your personal residence, including second nones and vacation homes (unless there was renal income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	For an ownership interest in a privately-hold business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental and other real property held for investment, provide a complete address or description, e.g., rental property, and a city and state.	indicate and other cash 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 all IRAs and other retirement plans (such as	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	Identify (a) each asset held for investment on production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in 'unearned' income during the year.	Assets and/or income Sources	BLOCK A
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SCHEDULE C - EARNED INCOME

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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 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. 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.

Examples: Source (include date of receipt for honoraria) ABC Trade Association, Battimore, MD (July 15)
State of Manyland
Civil War Roundtable (Oct. 2)
Ontario County Board of Education Schr Pouse Jahr Type **Current Year to Filing** \ ? Amount \$29,510 Ø Preceding Year \$76,000 \$1,000

SCHEDULE D - LIABILITIES

Name: Josh Cothwine

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you are not 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. *Column K is for liabilities held solely by your spouse or dependent child.

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		M	7	c/.		sp, DC, JT		
		Wed	hielly	Luess	Example			
		115 Pago	lane o	is long too.	First Bank of Wilmington, DE	Creditor		
		5-13	5/06	8/01	5/98	Liability Incurred MO/YR	7	
		DC mortageon home Widak	Monga se on Renal March, Washinger,	Strolent low	Mortgage on Rental Property, Dover, DE	Type of Liability		
		7	100			\$10,001- \$15,000	>	
				X		\$15,001- \$50,000	B	
						\$50,001- \$100,000	n	
					×	\$100,001- \$250,000	0	
			X			\$250,001- \$500,000	m	Amount of Liability
						\$500,001- \$1,000,000	π	T of Li
		X				\$1,000,001- \$5,000,000	G	ability
		/				\$5,000,001- \$25,000,000	I	1
						\$25,000,001- \$50,000,000	-	1
1						Over \$50,000,000	د	1
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SCHEDULE E - POSITIONS

period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years 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

Position	Name of Organization
Board Number	Ever ine Op
Rand Marby	The larging Conks
1,000	

SCHEDULE

parties to, and general terms of any agreement or arrangement that you have with respect to: future employment, a leave of absence during the period of government service; sferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former	Name: Josh Lathe med Page 38 of 40

Identify the date, pa continuation or defi-employer.

Date	Parties to Agreement	Terms of Agreement
		and the state of t

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.

0	and many many contract to comment as a result of	government of the contraction of
	Source (Name and City/State)	Brief Description of Duties
Ехатрів:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
The S	The Staywell group, Washington, DC	Consulring Services
Pomo	Portio Color divisio, Wichaum, DC	Consulphy Services

FILER NOTES (Optional)

Name: Josh (rotthe) mer

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FILER NOTES (Optional)

me: Josh Cottheimer

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