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UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	FORM B For New Members, Candidates, and New Employees	NOV 13 2017 Page 1 of 8
Name: TIMOTITY U. DONNELLY	Daytime Telephone.	2017 NOV 22 PM 12: 36
New Member of or Candidate for State: C+ U.S. House of Representatives District: C Candidates – Date of Election:	Check if Amendment	(Office Use Only)
STATUS New Officer or Employee Staff Fill Employing Office: Shared	er Type (If Applicable): Period Covered: January 1, 2016 Principal Assistant to CCDER13, 2017	A \$200 penaity shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	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?	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 X No 12 No
C. Did you or your spouse have "eamed" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	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?	ortable agreement or arrangement with an reporting period or in the current calendar Yes No No of filing?
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 J. Did you receive compensation of more than \$5,000 from single source in the current year and two prior years?	n \$5,000 from a Yes X No
ATTACH THE CORR THIS FORM INCLUDES ONLY T	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 BO	IH 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?	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, "unearned" 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.	income, or liabilities of a spouse or dependent child because they menittee on Ethics.	et all three tests for Yes 🔲 No 🔀

SCHEDULE A - ASSETS & "UNEARNED INCOME" Page_ 으

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				IC MORT HUB	ABC Hedge Fund	Simon & Schuster	Mega Corp Stock		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 homes and vacation 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 Savings Plan. 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 income source is that of your spouse (SP) in the optional column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	cash accounts, total the amount	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	ncome during the year. Provide complete names of stocks and mutual funds (do not use only ticker symbols).	identify (a) each asset held for investment or 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" which generated more than \$200 in "unearned".	Assets and/or Income Sources	BLOCK A
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					Partnership Income	Royalties			Other Type of Income (Specify: e.g., Partnership Income or Farm Income)			reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if the asset generated no income during the reporting period.	Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, or 529 accounts), you may check the "Tax-Deferred" column. Dividends, interest, and capital gains, even if		
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SCHEDULE A – ASSETS	SCHEDULE A – ASSETS & "UNEARNED INCOME"	Name: TIMOTI	5THY W. Donnelly	Page 3 of 8
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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.

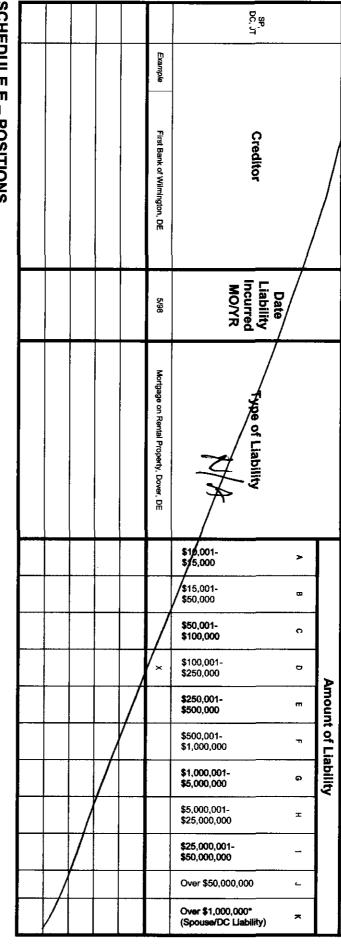
INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. In addition, 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

		Am	Amount
Source (include date of receipt for nonoraria)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples: Civil War Roundtable (Oct. 2) Ontario County Roard of Education	Spouse Speech	\$0 N/A	\$1,000 N/A
BREITBART NEWS	Sacarey	26,700	1950
PATRIOT NOT BUTICIAN TRODUCTIONS, INC.	Squary	28,677	35,100
CREATINE DIRECT MARKETING	SALARY	465	612
AMERICAN FREEDOM ALLIANCE 8/23	Horvasaium	500	
ADAMS COUNTY GOP	11	500	1500
AMERICAN PRINCIPIES TUSTITUTE	11]	1500
HALO UNLIMITED, INC.	Stouse Survey		
STATER BROS. MARKETS	u a		
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SCHEDULE D - LIABILITIES

Name: TROTHY W. Donnelly Page 앜

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 rent); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and exceeded \$10,000. 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 olumn K is for liabilities held solely by your spouse or dependent child.



SCHEDULE E 1 **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, fratemal, 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.

		KESIDENT	Position
	1	PATRIOT NOT POLITICIAN PRODUCTIONS, INC. 2015-Prosent	Name of Organization

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SCH

IEDULE F AGREEMENTS	Name: THOTHY M. DONNElly Page 6 of 8
y the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leav	spect to: future employment, a leave of absence during the period of government service; or continuing participation in an employee welfare or benefit plan maintained by a former

			Date	Identify the date continuation or employer.
			Parties to Agreement	e, parties to, and general terms of any agreement or arrangement that you h deferral of payments by a former or current employer other than the U.S. go
			Terms of Agreement	Identify the date, 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; continuition or deferral 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 employer.

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)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
TABLE TOPICS, INC.	PR/E-MAIL MARKETING
SB277 REFERENDUM Committee	PR / GRASS ROOTS ORGANIZING
	•

NOMBEX

Name:/1440THYW. DONNEWY Page 8 of 8

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CAMPAIGN NOTICE REGARDING FINANCIAL DISCLOSURE REQUIREMENT

If you have not yet raised (either through contributions or loans from yourself or others) or spent in excess of \$5,000 for your campaign, or if you have withdrawn your candidacy, please indicate your status and sign and date below.

The Honorable Karen L. Haas, Clerk
Office of the Clerk, U.S. House of Representatives
Legislative Resource Center
135 Cannon House Office Building
Washington, DC 20515-6601

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OCCUPANTIVE RESOURCE CENTER

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U.S. HOUSE OF NEEDER SERVICES

Indicate Your Status: (Select One) Dear Madam Clerk:

Over \$5,000 Threshold Not Exceeded This is to notify you that I have not yet raised (either through contributions or loans from myself or others) or spent in excess of \$5,000 for my campaign for the U.S. House of Representatives.

I understand that when I do raise or spend in excess of \$5,000 for my campaign, I must file a Financial Disclosure Statement with the Clerk of the House of Representatives according to the deadlines set out on pages 2 and 3 of the Financial Disclosure Instruction booklet, a copy of which has been provided to me by the Clerk.

thdrawal Candidacy

This is to notify you that under the laws of the state of	,
I withdrew my candidacy for the U.S. House of Representatives on	•

[Note: If your Financial Disclosure Statement was due **before** the date on which you withdrew from the race, you still must file a Financial Disclosure Statement with the House.]

Name (Please Print or Type):	<u> </u>	DONNEUT		
State:	CALIFORNIA		District:	08	
Date:	11-13-2017				

(THIS PAGE WILL BE MADE PUBLICLY AVAILABLE)

RETURN COMPLETED STATEMENT TO:
The Clerk, U.S. House of Represents

The Clerk, U.S. House of Representatives Legislative Resource Center 135 Cannon House Office Building Washington, DC 20515-6601