

# FINANCIAL DISCLOSURE REPORT

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#### FILER INFORMATION

Name: Hon. Mark E. Amodei

Status: Member State/District: NV02

#### FILING INFORMATION

**Filing Type:** Annual Report

Filing Year: 2018

**Filing Date:** 05/14/2019

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
681 S Richmond Ave, [RP]	\$250,001 - \$500,000	Rent	\$2,501 - \$5,000	
LOCATION: Carson City, NV, US				
Bank of America [BA]	\$1,001 - \$15,000	Interest	\$1 - \$200	
Greater Nevada Credit Union [BA]	\$1,001 - \$15,000	Interest	\$1 - \$200	П
National Financial Services - Wells (IRA) [BA]	\$50,001 - \$100,000	Tax-Deferred		П
National Finanical Services - CNL (IRA) [BA]	\$50,001 - \$100,000	Tax-Deferred		П

<sup>\*</sup> For the complete list of asset type abbreviations, please visit  $\underline{\text{https://fd.house.gov/reference/asset-type-codes.aspx}}.$ 

#### SCHEDULE B: TRANSACTIONS

None disclosed.

#### SCHEDULE C: EARNED INCOME

None disclosed.

#### SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Туре	Amount of Liability
	Everhome Mortgage	December 2008	Mortgage on primary residence	\$100,001 - \$250,000
	Everhome Mortgage	November 2014	Mortgage on investment property	\$100,001 - \$250,000

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

None disclosed.

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

### EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

IPO: Did you purchase any shares that were allocated as a part of an Initial Public Offering?

© Yes © No

**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 benefiting you, your spouse, or dependent child?

© Yes © No

**Exemption**: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

∇es No

#### CERTIFICATION AND SIGNATURE

I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Hon. Mark E. Amodei, 05/14/2019