	THE STATES HOUSE OF REDDESENTATIVES			Page 1 of
		For New Wernbers, Candidates, an	andidates, and New Employees	LEGISLATIVE RESOURCE CENTER
	Name: LAVEXNE JOHES GOVE Day	Daytime Telephone:	10	2019 NOV 18 PH 1: 12
	New Member of or Candidate for State: 16/6 U.S. House of Representatives District: 1/ Candidates - Date of Election: 1/6/15/1	1000	Chack If Amendment	U.S. HOUSE OF PREPRESENTATIVES (Office Use Only)
	New Officer or Employee Staff Filer To	Staff Filer Type (If Applicable): Shared Principal Assistant	Period Covered: January 1,	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	IESE QUESTIO	NS	
	A. Did you, your spause, or your dependent child: a. Cam any reportable asset that was worth more than \$1,000 at the end of the reporting period? or the reporting period? or the sasset during the reporting period? b. Receive more than \$200 in unearmed income from any reportable asset during the reporting period?	No E.D	E. Did you haid any reportable positions during the reporting period or in the ourrent cetendar year up through the date of filing?	ng the reporting was Mao
•	C. Did you or your spouse have "senned" income (e.g., seleries, honoraria, or pension/RA distributions) of \$200 or more during the Yes 1 reporting period?	*	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?	r arrangement with an Yes 80 180
	©. Did you, your spause, or your dependent child have any reportable Yes implify finane than \$10,000) at any point during the reporting period?	Ping	J. Did you receive compensation of more than \$5,000 from single source in the current year and two prior years?	nn \$5,000 from B Yes Mo
	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	ONDING SCHEI	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" I INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO I	S" COMPLETE
	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER	-ORMATION - /	ANSWER <u>BOTH</u> OF THESE QUESTIONS	E 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?	thics end certain other " 1167	excepted trusts" need not be disclosed. †	Heve you excluded Yes
	EXEMPTION - Have you excluded from this report any other assets, "unsamed" income, or liabilities of a spause or dependent child because they meet all three tests for exemption? Do not enswer "yes" unless you have first consulted with the Committee on Ethics.	ne, or liabilities of a spo on Ethics.	use or dependent ohild because they mes	est all three tests for Yes

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: LAKRUE TOLES FORE

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				ABC Hedge Fund	Simon & Schuster	Maga-Copy Stock	#	For bank and other cash accounts, total the amount in all interest-bearing speeding. If the total is over \$5,000, let every fleatfole inatitution where there is more than \$1,000 in interest-bearing accounts. For tential and other read property held to investment, provide a complete address or description, e.g., "settle property," and a only and state. For an cownessity interegy in a privately-held the locas trained in property of the desired in the property of the state who are the property of the business mot publicly interegy and a only and state the business in the flettle of the state who are the property of the business the reported (understitistic, and any there are not understand in the majoriting period); and any flettle period); and any flettle of the property of the period); and any flettle period; and any flettle period); and any flettle period; any flettle period in any flettle period; any flettle period in any flettle period; and any flettle period in any flettle period in any flettle	For all IRAs and other rethernant plans (buch as 201(k) plans) provide the value for each easet hek in the account that exceeds the reporting thresholds	rovide complete nemes of stocks and mutual funds do not use only ticker symbols).	continy (a) sect ease feet in revenient of production of incorne and with a feir market value seceeding \$1,000 at the end of the reporting period set (b) ery other reportable sesent or source of fections which generated more than \$200 in functioned incorne during the year.	Assets andlor Income Sources	PLOOK A
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SCHEDULE A - ASSETS & "UNEARMED INCOME"

SCHEDULE C - EARNED INCOME

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					Lockheed MANTIN TENSION STANS	Orderto County Board of Education	EXAMPLES: Side of Maryland	ASC Trade Association, Ballimore, W.D. Lub (18)	Source (include date of receipt for honoraria)	List and source, type, and amount of any honorarie. 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: Se advised that the outside earned income limit and prohibitions on types of income may apply to you are on House payroll. The 2018 limit on outside earned income/for Members and employees compensated at or above the "senior staff rate was \$28,050. The 2019 limit is \$28,440. 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.	
					STAUSE PEDEGU	Spouse Selany	Selary	Mangrapha	Туре	e serned income exceeding \$1,0 benefits received under the Social prohibitions on types of incomes \$28,050. The 2019 limit is \$ or Members and social settle.	
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SCHEDULE D - LIABILITIES

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Report liabilities of over \$10,000 awed 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, where Mannbers: Mannbers 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 rant it out or are a Member); leans secured by autemobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are passonally liable); and liabilities are do 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 closs of the reporting period exceeded \$10,000. "Column K is for liabilities hald solely by your spouse or dependent child.

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			Over \$1,000,000* (Spouse/DC Liability)	*	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, pertner, proprietor, representative, employee, or consultant of any corporation, firm, pertnership, or other business enterprise, nonperalt organization, labor organization, or educational or other shalltuffor 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 Manubers and second-year candidates report positions held in the reporting hard and the current calendar was such candidates and new amendments held in the current calendar was and two resolutes vests.

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			Position	period and the current calendar year. First-year candidate
			Name of Organization	period and the current calander year. First-year candidates and new employees raport positions neld in the current calander year and the previous years.

SCHEDULE F - AGREEMENTS

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dentify the di continuation of employer.	dentify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a continuation or deferral of payments by a termer or current employer other than the U.S. government; or continuing participation in a amployer.	we with respect to: future employment; a leave of absence during the period of government service; ernment; or continuing participation in an employee welfere or benefit plan maintained by a former
Date	Parties to Agreement	Terms of Agreement

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 the prior years. This includes the names of clients and customers of any corporation, firm, parknership, 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. On not repeat information listed on Schedule C.

	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
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