HAND DELIVERED

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UNITED STATES HOUSE OF REPRESENTATIVES 2018 FINANCIAL DISCLOSURE STATEMENT	Form A For Use by Members, Officers, and Employees	2015 MAY 15 FIND: 01
	77.70,0	Marina (Office, Use Only)
Name: Albid Sires	Daytime Telephone: 202-336-7919	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
FILER  Member of the U.S.  State: 1.  STATUS  House of Representatives  District: 6.	Officer or Employing Office:  Employee KLP ALL	ploying Office: Staff Filer Type: (If Applicable) CLP ALb10 SixeS Shared Principal Assistant
TYPE 2018 Annual (Due: May 15, 2019)	Amendment Termination  Date of Termination:	ination:
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	SE 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?      b. Receive more than \$200 in unearned income from any reportable asset 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?	rrangement with an Yes No
B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction     Yes exceeding \$1,000 during the reporting period?	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$390 in value from a single source during the reporting period?	ld receive any  ves 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?	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$390 in value from a single source during the reporting period?	d receive any taking more than Pes No V  porting period?
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  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?	article during the Yes No
E. Did you hold any reportable positions during the reporting period or Yes in the current calendar year up through the date of filing?	N₀ ✓ ATTACH THE CO	RRESPONDING SCHEDULE IF YOU ANSWER "YES"
IPO AND EXCLUSION OF SPOUSE, DEPENDENT,	DEPENDENT, OR TRUST INFORMATION - ANSWER EACH O	ANSWER 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 qu	estion, please 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 that benefits you, your spouse, or dependent child?	ee on Ethics and certain other "excepted trusts" need not be disclosed. H	ave you excluded Yes No 🗹
<b>EXEMPTION</b> – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	d" income, transactions, or liabilities of a spouse or your dependent child because they meet lited with the Committee on Ethics.	ecause they meet Yes No

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			7	_	3			$\exists$	For a detailed discussion of Schedule A requirements 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 held with anyone (JT), in the optional column on the far left.	If you report a privately-traded fund that is an Excepted Investment Fund, please check the "EIF" box.	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental homes during the reporting period); and any financial income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Sawings Plan.	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.	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 bank 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.	401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use only ticker symbols).  For all IRAs and other retirement plans (such as	during the year	exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income that constitutions that \$200 is "transmed" income.	Identify (a) each asset held for investment	Ass	l	SCHEDULE A – ASSETS & "UNEARNED INCOME"
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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## SCHEDULE B - TRANSACTIONS

Name: Albio SIRES Page H of 9

										the proposition of	SP Example Mega Corp. Stock	SP, DC, JT Asset	Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A.  "Column K is for assets solely held by your spouse or dependent child.	Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose "partial sale" as the type of transaction.	dependent child for investment or the production of income. Include transactions that resulted in a capital loss. Provide a brief description of an exchange transaction,	Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting neglid of any security or real property held by your services or your
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## SCHEDULE C - EARNED INCOME

Name: Albio SIRES Page 6 of a

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 a 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: 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 face, and nayments for professional services involving a fiduciary relationship) are totally prohibited.

					West New York BOARD OF Ed (Spite PersiON)	11.3. STate Pension	ļ.,	Keene State  Keene State  Keene Maryland	Source (include date of receipt for honoraria)	In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.
					BOOKE	NJ. YENSION	Spouse Salary	Approved Feaching Fee Legislative Perision	Type	y relationship) are totally prohibited.
					N/A	38,170	\$1,000 N/A	\$6,000 \$18,000	Amount	

#### SCHEDULE D - LIABILITIES

Name: Albio Gires Page\_ 6 2 2

you rent 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 exceeded \$10,000. \*Column K is for liabilities held solely by your spouse or dependent child. period. 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 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

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Fort Myers, Francis Ric Gaus 11/14	What wanted , W.T. Everbour	Example First Bank of Wilmington, DE	Creditor		
11/11	4/96	5/16	Date Liability Incurred MO/YR		
Mortgage	Mothage	Mortgage on Rental Property, Dover, DE	Type of Liability		
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#### **SCHEDULE E - POSITIONS**

Report all positions, compensated or uncompensated, held during the current or prior calendar year 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:

Dostrings hald in any religious social fraternal or political entities fouch as political partners and campaign programs and positions social fraternal or political entities fouch as political partners and campaign programs and positions social fraternal or political entities fouch as political partners and campaign programs.

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				Position	Positions held in any religious, social, fraternal, or political el
		A/P		Name of Organization	Positions neighbus, social, traternal, or political entitles (such as political parties and campaign organizations), and positions solely of an normally nature.

### **SCHEDULE F - AGREEMENTS**

	Name: Albid SIRES	Page 7 of 4
nent or arrangement that you have with re	ment or arrangement that you have with respect to: future employment; a leave of absence during the period of government service;	f government service;

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 continuation 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.		
Date	Parties to Agreement	Terms of Agreement
	NA	

#### **SCHEDULE G - GIFTS**

Report the source (by name), a brief description, and the value of all gifts totaling more than \$390 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an individual (which may not include a registered lobbyist or foreign agent), local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$156 or less need not be added towards the \$390 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Ethics.

Source	Description	Value
Example: Mr. Joseph Smith, Adlington, VA	Silver Platter (prior determination of personal friendship received from the Committee on Etrics)	\$400
$\alpha/\beta$		

# **SCHEDULE H -- TRAVEL PAYMENTS and REIMBURSEMENTS**

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8 of 9	2
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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$390 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

**EXCLUDE**: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

						Frank, Masshay
	Source	Date(s)	City of Departure-Destination-City of Return	Lodging? (Y/N)	Food? (Y/N)	Included? (Y/N)
	Government of China (MECEA)	Aug. 6-11	DC-Bejing, China-DC	<b>Y</b>	<b>*</b>	2
Examples;	Habitat for Humanity (charity fundraiser)	Mar. 3-4	DC-Bostor-DC	4	≺	≺
	NA					

# SCHEDULE I – PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Name: Albid SiRe Page 9 of 9

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of paying an honorarium to you. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.	f an event to a charitable organization	n in lieu of paying an honora	rium to you. A separate
Source	Activity	Date	Amount
Examples: Association of American Associations, Washington, DC	Speech	Feb, 2, 2018	\$2,000
XYZ Magazine	Article	Aug. 13, 2018	\$500
N/B			
	,		