



Filing ID #10061839

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • B81 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Dr. Herb Conaway
Status: Congressional Candidate
State/District: NJ03

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2024
Filing Date: 05/15/2024
Period Covered: 01/01/2023– 04/15/2024

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
HCHCJR LLC [RP]		\$100,001 - \$250,000	Rent	\$2,501 - \$5,000	\$2,501 - \$5,000
LOCATION: TRENTON, NJ, US					

* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
State of New Jersey	salary	\$18,846.00	\$47,540.00
County of Burlington	salary	\$63,835.00	\$151,047.00
Premier Research Inc	salary	\$9,231.00	\$4,615.00

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	Crown Bank	July 2023	commercial real estate loan	\$50,001 - \$100,000
	Jane Rohlf	June 2023	promissory note	\$250,001 - \$500,000
	Roger Deacon	June 2023	promissory note	\$100,001 - \$250,000

SCHEDULE E: POSITIONS

Position	Name of Organization
President	Herb Conaway MD LLC
President	HCHCJR LLC
Trustee	Truth Initiative

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

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?

☐ Yes ☒ 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: Dr. Herb Conaway , 05/15/2024