



Filing ID #10056685

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • 135 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Mr. David Dixon
Status: Congressional Candidate
State/District: NC13

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2023
Filing Date: 01/31/2024
Period Covered: 01/01/2022– 12/31/2023

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
Interest Income [BA]		\$1 - \$1,000	Interest	\$201 - \$1,000	\$201 - \$1,000
UNC Optional Retirement Program [IH]		\$50,001 - \$100,000	Distribution	\$50,001 - \$100,000	\$100,001 - \$1,000,000

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

SCHEDULE C: EARNED INCOME

None disclosed.

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	Wells Fargo	July 2015	Mortgage on primary residence	\$50,001 - \$100,000

SCHEDULE E: POSITIONS

None disclosed.

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: Mr. David Dixon , 01/31/2024