



Filing ID #10061844

FINANCIAL DISCLOSURE REPORT

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

FILER INFORMATION

Name: Katrina Shankland
Status: Congressional Candidate
State/District: WI03

FILING INFORMATION

Filing Type: Amendment 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
Savings Account [BA]		\$1,001 - \$15,000	Interest	\$1 - \$200	\$1 - \$200
Savings Account [BA]		\$1,001 - \$15,000	Interest	\$1 - \$200	\$1 - \$200
Wisconsin Deferred Compensation Program ⇒ SP Wisconsin Deferred Compensation Program [PE]		\$15,001 - \$50,000	Tax-Deferred		
Wisconsin Retirement System ⇒ Wisconsin Retirement System [PE]		\$100,001 - \$250,000	Tax-Deferred		

* Investment vehicle details available at the bottom of this form. 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
Wisconsin State Assembly	salary	\$57,408.00	\$57,408.00
CliftonLarsonAllen LLP	Spouse salary	\$68,424.00	\$68,424.00

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
JT	UW Credit Union	October 2020	Mortgage	\$100,001 - \$250,000

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

None disclosed.

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

None disclosed.

SCHEDULE A INVESTMENT VEHICLE DETAILS

- Wisconsin Deferred Compensation Program (Owner: SP)
- Wisconsin Retirement System

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: Katrina Shankland , 05/15/2024