



Filing ID #10061230

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

**Name:** Dr. John Sitka III  
**Status:** Congressional Candidate  
**State/District:** VA03

## FILING INFORMATION

**Filing Type:** Amendment Report  
**Filing Year:** 2024  
**Filing Date:** 05/14/2024  
**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
American Maritime Officers Pension [PE]		None	Pension	\$1,001 - \$2,500	\$5,001 - \$15,000
Bitcoin [CT]		\$1,001 - \$15,000	None		
Ethereum [CT]		\$1,001 - \$15,000	None		
Navy Federal Credit Union Certificate of Deposit and Savings Accounts [BA]		\$15,001 - \$50,000	Interest	\$1 - \$200	\$201 - \$1,000

\* 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

None disclosed.

## 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:** Dr. John Sitka III, 05/14/2024