



Filing ID #10056134

# FINANCIAL DISCLOSURE REPORT

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

## FILER INFORMATION

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

## FILING INFORMATION

**Filing Type:** Candidate Report  
**Filing Year:** 2023  
**Filing Date:** 10/31/2023

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
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		

\* Asset class 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 Legislature	Salary	\$57,408.00	\$51,629.28
Clifton Larson Allen LLP	Spouse Salary	\$65,000.00	\$31,108.16
State of Wisconsin	Spouse Salary	N/A	\$26,960.84

## 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.

## SCHEDULE A ASSET CLASS 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 , 10/31/2023