Filing ID #10063194

Financial Disclosure Report

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Filer Information

Name: Hon. Jared Golden
Status: Congressional Candidate
State/District: ME02

Filing Information

Filing Type: Amendment Report
Filing Year: 2017
Filing Date: 01/8/2025
Period Covered: 01/01/2016– 09/25/2017

Schedule A: Assets and "Unearned" Income

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
Checking Account [BA]	SP	$1,001 - $15,000	None		
Maine Public Employees Retirement System [DB]	SP	$1,001 - $15,000	Tax-Deferred		
Maine Public Employees Retirement System [DB]		$1,001 - $15,000	Tax-Deferred		
Savings [BA]	SP	$1,001 - $15,000	None		
Savings Account [BA]	SP	$15,001 - $50,000	Interest	$201 - $1,000	$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

Source	Type	Amount Current Year to Filing	Amount Preceding Year
Good Hamel Inc	Wages	N/A	$1,828.00

Source	Type	Amount Current Year to Filing	Amount Preceding Year
Rosemarie Sheline DDS PA	Wages	N/A	$23,769.00
State of Maine	Wages	N/A	$9,183.00
State of Maine	Spouse Wages	N/A	N/A
City of Lewiston	Spouse Wages	N/A	N/A

Schedule D: Liabilities

Owner	Creditor	Date Incurred	Type	Amount of Liability
JT	Franklin American Mortgage	2014	Home Loan	$50,001 - $100,000
SP	Nelnet and Conduent	2010	Student Loans	$15,001 - $50,000
	USAA Credit Card	September 2017	Credit Card	$10,000 - $15,000

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

Comments

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: Hon. Jared Golden , 01/8/2025