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FILER INFORMATION

Name:	Hon. Sharice Davids
Status:	Member
State/District:	KS03

FILING INFORMATION

Filing Type:	New Filer Report
Filing Year:	2018
Filing Date:	07/14/2019

Schedule A: Assets and "Unearned" Income

Asset 0	wner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
CB&T CUST SIMPLE IRA - AMCAP Fund-A [IH]		\$1,001 - \$15,000	None		
ClearBridge All CAP Value Fund [IH]		\$1,001 - \$15,000	None		
FuelCell Energy, Inc. (FCEL) [ST]		\$1 - \$1,000	None		
Ho-Chunk Nation Per Capita Income [OT]		\$1,001 - \$15,000	Tribal Per Capita Income	\$5,001 - \$15,000	\$5,001 - \$15,000
DESCRIPTION: Ho-Chunk Tribal Per Capita Payments paid each quarter at \$3,000 per quarter.					
Northwestern Mutual Comprehensive Whole Life [WU]		\$1,001 - \$15,000	None		
Organovo Holdings, Inc. (ONVO) [ST]		\$1 - \$1,000	None		
Single Family Home [RP]		\$100,001 - \$250,000	Rent	\$2,501 - \$5,000	\$5,001 - \$15,000
LOCATION: Roeland Park, KS, US					
SunPower Corporation (SPWR) [ST]		\$1,001 - \$15,000	None		

Asset	Owner Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
Transportation Federal Credit Union Accounts [BA]	\$1,001 - \$15,000	Interest	\$1 - \$200	\$1 - \$200

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

SCHEDULE C: EARNED INCOME

Source	Туре	Amount Current Year to Filing	Amount Preceding Year
Ceiba Legal	Salary	\$.00	\$9,000.00
Wopila Consulting, LLC	Salary	\$.00	\$12,525.00

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Туре	Amount of Liability		
	Wells Fargo Credit Services	Over previous five years	Credit Card	\$15,001 - \$50,000		
	American Express	Over previous five years	Credit Card	\$10,000 - \$15,000		
	Wells Fargo Mortgage	2011	Mortgage	\$100,001 - \$250,000		
	COMMENTS: Single Family home in Roeland Park, KS - now a rental.					
	Nelnet - US Dept. of Education	2010	Student Loans	\$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.

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: Hon. Sharice Davids , 07/14/2019