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(Office Use Only)

A \$200 penalty shall be assessed against any individual who files more than 30 days late.

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT		FORM B For New Members, Candidates, and New Employees	
Name: <u>ASHA CASTELLEROS HERNANDEZ</u>		Daytime Telephone: _____	
FILER STATUS	☒ New Member of or Candidate for U.S. House of Representatives	State: <u>NY</u> District: <u>11</u>	☐ Check if Amendment
	☐ Candidates - Date of Election: <u>6/23/20</u>		
☐ New Officer or Employee	Employing Office: _____	Staff Filer Type (if Applicable): ☐ Shared ☐ Principal Assistant	Period Covered: January 1, _____ to _____

PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? <u>or</u> b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	Yes ☒ No ☐	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes ☐ No ☒
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	Yes ☒ No ☐	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	Yes ☐ No ☒
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Yes ☒ No ☐	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	Yes ☐ No ☒

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"

THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

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 that benefits you, your spouse, or dependent child?

Yes ☐ No ☒

EXEMPTION - Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.

Yes ☐ No ☒

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Use additional sheets if more space is required.

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Use additional sheets if more space is required.

Page 4 of 6**Preceding Year**

Use additional sheets if more space is required.

SCHEDULE D - LIABILITIES

Name: Asila Michelle - Henderson

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

SP, DC, JT	Creditor	Date Liability Incurred MO/YR	Type of Liability	Amount of Liability										
				A	B	C	D	E	F	G	H	I	J	K
				\$10,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$250,000	\$250,001-\$500,000	\$500,001-\$1,000,000	\$1,000,001-\$5,000,000	\$5,000,001-\$25,000,000	\$25,000,001-\$50,000,000	Over \$50,000,000	Over \$1,000,000* (Spouse/DC Liability)
Example	First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE				X							
	USAA	4/16	CREDIT CARD		X									
	TRUST OF E.D.	9/02	STUDENT LOANS				X							

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization

SCHEDULE F – AGREEMENTS

Name: Ashla Castleberry-Henninger

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Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties to Agreement	Terms of Agreement

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

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

Source (Name and City/State)		Brief Description of Duties
Example	Doe Jones & Smith, Hometown, Homestate	Accounting Services



U.S. House of Representatives

COMMITTEE ON ETHICS

CANDIDATE FINANCIAL DISCLOSURE EXTENSION REQUEST FORM

Name of Requestor: ASIA CASTIBEJON-HERNANDEZ Date: 05/04/20
Please type or print legibly!

Date of Primary/Special Election: JULIE 23, 2020

State/District of Election: NEW YORK / 17

Financial Disclosure Statement Type (check one):

☐ Statement due in 2017 ☐ Amendment ☒ Other FDS FOR 2020
Specify

The length of time for which extension is requested (check one):

☐ 30 days ☐ 60 days ☐ 90 days ☒ Other _____
Specify number of days or specific date

For Ethics Committee Use Only

Days granted: _____

(If days granted differ from days requested)

Reason: ☐ Total days requested exceeds 90.

☐ Would result in a due date within 30 days of an election.

Your request for an extension of time in which to file the Financial Disclosure Statement (FD) referenced above is hereby granted. Your FD must be filed on or before _____. The Ethics Committee may grant additional requests, which may not, in the aggregate, exceed 90 days from the original due date or result in a due date within 30 days of an election. Please note that if the date listed in this paragraph is on a weekend and you intend to file using the paper form, your FD must be either received by the Clerk of the House no later than close of business on the last business day before this date or postmarked on or before that date.

Date: _____

Susan W. Brooks, Chairwoman

Theodore E. Deutch, Ranking Member

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