



FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Jamie Eng McLeod-Skinner
Status: Congressional Candidate
State/District: OR05

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2021
Filing Date: 11/15/2021

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
AD&D Insurance [OT]	SP	\$50,001 - \$100,000	None		
DESCRIPTION: Accidental Death & Dismemberment insurance policy through the State of Oregon.					
CalPERS/VOYA [DB]		\$15,001 - \$50,000	monthly retirement benefit	\$1,001 - \$2,500	\$15,001 - \$50,000
DESCRIPTION: monthly retirement benefit					
CBS [DB]	SP	Undetermined	Monthly benefit	Not Applicable	Not Applicable
ICMA-RA/CalPERS 457 [PE]		\$1,001 - \$15,000	Tax-Deferred		
Langford IC Systems, Inc. [PS]		\$1,001 - \$15,000	None		
DESCRIPTION: Shares held in privately traded company.					
OCCU [BA]	SP	\$1 - \$1,000	None		
Oregon Savings Growth Plan/VOYA [PE]	SP	\$1,001 - \$15,000	Tax-Deferred		
DESCRIPTION: Defined contribution pension.					
PERS - Oregon Public Employee Retirement	SP	Undetermined	Tax-Deferred		

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
System [DB]					
PERS IAP/VOYA [PE]	SP	\$50,001 - \$100,000	Tax-Deferred		
DESCRIPTION: Defined Contribution Pension.					
Principal Financial Group ⇒ Principal Financial Group Inc (PFG) [ST]		\$1,001 - \$15,000	Dividends	\$1 - \$200	\$1 - \$200
Spouse Optional Life Insurance [OT]	JT	\$100,001 - \$250,000	None		
DESCRIPTION: Optional life insurance policies held for candidate (\$100,000) and for spouse (\$100,000) through the State of Oregon.					
Standard Insurance, Basic Life [OT]	SP	\$1,001 - \$15,000	None		
DESCRIPTION: Basic life insurance plan.					
State Farm Term Life Insurance [OT]	SP	\$50,001 - \$100,000	None		
DESCRIPTION: Term life insurance plan.					
USAA [BA]	JT	\$1,001 - \$15,000	None		
USAA [BA]	SP	\$1,001 - \$15,000	None		
Wells Fargo Bank Accts [BA]		\$1,001 - \$15,000	None		

* 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
City of Talent, Oregon	salary	\$55,000.00	N/A
MS Sage Consulting LLC	consulting	\$3,500.00	\$12,100.00
State of Oregon	spouse salary	N/A	N/A
Stubborn Goat LLC	spouse consulting services	N/A	N/A
State of Oregon	hourly rate	N/A	N/A

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	U.S. Department of Education	8/2015	Student loan.	\$100,001 - \$250,000
SP	U.S. Department of Education	5/2006	Student loans.	\$100,001 - \$250,000
SP	Navient	5/2006	Student loans.	\$50,001 - \$100,000

SCHEDULE E: POSITIONS

Position	Name of Organization
Interim City Manager	City of Talent, Oregon
Owner (attorney, consultant)	MS Sage LLC
Principal Executive Manager E (part-time)	Oregon Department of Human Services, Emergency Management Unit

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
January 2014	Candidate and the State of California	CalPERS Pension.
November 2021	Candidate and Northwest Health Foundation	I serve as a Board Member for the Northwest Health Foundation for which I am now taking a leave of absence.

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

Source (Name and Address)	Brief Description of Duties
MS Sage Consulting LLC (Terrebonne, OR, US)	consultant, attorney
City of Talent, Oregon (Talent, OR, US)	Interim City Manager, wildfire recovery

SCHEDULE A ASSET CLASS DETAILS

<ul style="list-style-type: none"> o Principal Financial Group LOCATION: US DESCRIPTION: I have 100 shares of PFG common stock, which is administered by Computershare.
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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: Jamie Eng McLeod-Skinner , 11/15/2021