## **Statement of Economic Interests**

HAND DELIVERED

Filed in 2017 for calendar year 2016 by

## Kerkman, Samantha

Legislature

Assembly District 61

FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS SEE THE INSTRUCTIONS OR VISIT OUR WEBSITE AT http://ethics.wi.gov. Still have questions? For priority service send an e-mail to: ethics@wi.gov; otherwise call (608) 266-8123.

ATTACH ADDITIONAL PAGES AS NEEDED/PLEASE SEE INSTRUCTIONS

art A						As of D	ecembe	er 31, 20
Wisconsin Deferre	ed Comper	sation F	SATION PROGRAM Program, please place a rough the Program.			estment in a fund av each fund in which		
	\$5,000 to \$50,000	More than \$50,000		\$5,000 to \$50,000	More than \$50,000		\$5,000 to \$50,000	More than \$50,000
Profile Series			Small Cap			Bond		
Vanguard Retirement 2055			BlackRock Russell 2000 Index			BlackRock US Debt Index		
Vanguard Retirement 2045			DFA US Micro Cap			Federated US		
Vanguard Retirement 2035			Mid Cap  BlackRock Mid Cap Equity			Government Securities 2-5yr	5	
Vanguard Retirement 2025			Index T Rowe Price Mid Cap			Vanguard Long-term Investment Grade Adr	n 🗆	
Vanguard Retirement 2015			Growth  Large Cap			Money Market		
Vanguard Target Retirement Income			Calvert Social Investment Equity			Vanguard Admiral Treasury Money Marke	et	-49
			Fidelity Contrafund			Fixed		
International American Euro Pacific Growth			Vanguard Institutional Inde	× 🗆		Stable Value		
BlackRock EAFE Equity Index			Plus Vanguard Wellington - Admiral Shares			FDIC Bank Option		
b) OTHER INVEST mutual and money	/ market fu	ınds in w	ks, bonds, limited partn hich you and your famil	y's interes	t was va	lued at \$5,000 or m	ore.	
MUTUAL OR MON	EY MARKE	ET FUND		(ch	neck one)	\$5,000 to \$50,000	More than	\$50,000
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LIMITED PARTNER	RSHIPS		7	(ch	neck one)	\$5,000 to \$50,000	More than	\$50,000
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WISCONSIN GOVE	ERNMENTA	AL SECU	RITIES	(ch	neck one)	\$5,000 to \$50,000	More than	\$50,000

a) Enterprise(s) operating und	er a business or trade	name, list here.			
Name of business	Municipality or Town	County	State	Describe nature of business	
b) Enterprise(s) NOT operating	g under a business or	rade name, list he	ere.		
Name of business	Municipality or Town	County	State	Describe nature of business	
S corporation, service corporate	tion (SC), limited liabil	ty company (LLC	), partnersh		
producing real estate reported received \$10,000 or more in 20 \$10,000 or more in calendar ye	tion (SC), limited liabil in Item 2, from which 16, list businesses, org ar 2016. Check if the org others as an at	ty company (LLC the filer or a mem ganizations, and long ganization authorized torney-at-law, agent, s	), partnersh ber of the fil obbyists tha you to represe	ip, or income- ler's immediate fa at paid the enterp ent it in its dealings w or representative.	amil rise ith
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Business or organization			City	VIII.AN AN ANTHE VIIII.A. I PRESTATE AND AN ANTHE STATE OF THE STATE O	oman pagaga	e e e e e e e e e e e e e e e e e e e	State
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## FILING NOTES -or- COMMENTS

If we saw an opportunity to clarify a prior report, we added comments or filing tips below. Please review any comments and make the appropriate corrections.

## CERTIFICATION

I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete, and correct to the best of my knowledge, information, and belief. In the event this Statement of Economic Interests is filed prior to December 31st for an election in the following year, I certify that I will amend it on or before the statutory filing deadline if an amendment is necessary to bring it into conformity with the true statement of my economic interests as of December 31, 2016. If any part has been left blank, I have done so intentionally because there is nothing to report.

The information sought in this form is required by §§19.43 and 19.44, *Wisconsin Statutes*. Failure to file a completed form may result in a forfeiture of up to \$500. Statements of Economic Interests are open for public inspection. The Wisconsin Ethics Commission will notify you of the identity of any person who examines your Statement. In accordance with §15.04(1)(m), *Wisconsin Statutes*, the Ethics Commission states that no personally identifiable information is likely to be used for purposes other than those for which it is collected.

Mail, email or fax to:

Wisconsin Ethics Commission, P.O. Box 7984, Madison, WI 53707-7984;

Email: Ethics@wi.gov; Fax: (608) 264-9319

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