N N N	Yes	child because	sactions, or liabilities of a spouse or dependent child because	" income, tran:	<b>EXEMPTION</b> —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities they meet all three tests for exemption?
No No	Yes	d trusts" need not	of Official Conduct and certain other "excepted pouse, or dependent child?	on standards	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct 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?
SNC	UESTIC	OF THESE Q	MATION — ANSWER EACH OF THESE QUESTIONS	T INFORI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
and the sponse.	wered a 'Yes" re	must be ansi	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	N S	V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?  If yes, complete and attach Schedule V.
<b>™</b>	Yes	arrangement with	IX. Did you have any reportable agreement or arrangement with an outside entity?  If yes, complete and attach Schedule IX.	No No	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?  If yes, complete and attach Schedule IV.
No D	Yes	or before the date	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?  If yes, complete and attach Schedule VIII.	N <sub>O</sub>	III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period?  If yes, complete and attach Schedule III.
	Yes	d receive any in the reporting e)?	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$305 from one source)?  If yes, complete and attach Schedule VII.	S S	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?  If yes, complete and attach Schedule II.
No V	Yes	d receive any gregating more	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$305 and not otherwise exempt)?  If yes, complete and attach Schedule VI.	N <sub>o</sub>	I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?  Yes  If yes, complete and attach Schedule I.
			E QUESTIONS	OF THESE	PRELIMINARY INFORMATION - ANSWER EACH
be assessed es more than	ty shall the who file	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	or Employing Office:  Termination Date:	Officer or Employee	Status  Member of the U.S.  State: KE  House of Representatives District: 07  Type  Annual (May 15)  Amendment
	(Office Use Only)	S WILL ST. (Off)	(Daytime Telephone)		
TER	PM 2: 46	2009 MAY 20 PM 2: 46	G1918-568-808		Artur Genestre Davis
1	1		Form A For use by Members, officers, and employees		2008 FINANCIAL DISCLOSURE STATEMENT For 2007 Calendar Year Reporting Period
VERED	DEI	HAND DELIVERED		_	UNITED STATES HOUSE OF REPRESENTATIVES

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## SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

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# SCHEDULE II — PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e. speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. A green envelope for transmitting the list is included in each Member's filing package.

							(Kid One Transport)	American last Iron Pipe Company	Examples: XYZ Magazine	Association of American Associations, Washington DC	Source
								Speech	Article	Speech	Activity
								NOV. 20, 8001	Aug. 13, 2007	Feb. 2, 2007	Date
								\$250.00	\$500	\$2,000	Amount

ASSETS AND "UNEARNED" INCOME  BLOCK B  Type of Indicate value of asset at close of reporting perior reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold during the reporting that all thinds (do not use than a self directed have the power, even if restirement plans that are the institution holding the reporting perior income information on count that exceeds the religions that are the institution holding the reporting plans that are the institution in the foreition in the reportant in the foreition in the reportant in the foreition in the reportant in the prograchic foreition in the reportant in the foreition in the contraction in the co	BLOCK C  Type of Income  Check all columns that appl ation not allow you to choose signalue, investments, you may write "Nu all other assets including all indicate the type of income by ing the appropriate box pring bividends and interest, even is et it vested, should be listed as in Check "None" if asset did not ate any income during calendar
Type of In Check all columns to retirement plans or ad not allow you to climvestments, you may all other assets incluindicate the type of integrate and interevested, should be list Check "None" if asset ate any income during	BLOCK C  Type of Income  Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA." For all other assets including all IRAs, indicate the type of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during calendar year.
	Name AVA  Come hat apply, For counts that do not se specific write "NA." For box below st, even if reinted as income. aid not gener-calendar year.
AVAUV DAVIS  BLOCK D  Amount of Income  For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, including all IRAs, indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was received. gener.  "year."  I II III V V VI VII VIII IX X X	

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Name Page\_

Cont	Continuation Sheet (if needed)		Valle		
	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E
SP,		0 -			סיֶס
DC,		0 0 0 0,000 0,000	TRUS		m y
<b>'</b>		0,000 00,000 250,00 500,00 1,000,0 \$5,00	NS BLIND	000 000 0,000 000,000 000,000	<u>.</u>
		1 - \$15 01 - \$5 01 - \$1 001 - \$ 001 - \$	50,000 ENDS	\$1,000 \$1,000 - \$2,50 - \$5,00 - \$15,0 1 - \$10 01 - \$1 ,001 - \$ 5,000,00	
		\$15,00 \$50,00 \$100,6 \$250,6 \$500,6 \$1,000 \$5,000	NONE DIVID RENT INTEF CAPIT EXCE	\$1,001 \$2,501 \$5,001 \$15,00 \$100,0 \$1,000	

This page may be copied if more space is required.

## SCHEDULE IV— TRANSACTIONS

Name Artur Davis

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Report dependents	Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting year of any real property, stocks bonds commodities futures or other securities when the	of Tra	Type of Transaction	tion	Date			Amc	Amount of Transaction	of I	rans	actic	<u> </u> 3		
amour that re	amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange	ASE		IGE	(MO/DAY/YR) or Quarterly,	Œ	C	٥	m	<b>n</b>		) <b></b>	0	01- 00	o
transa or you resider <b>sold, p</b>	transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	PURCHAS	SALE	EXCHANG	Monthly, or Bi-weekly, if applicable	\$1,001- \$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
SP, DC, JT															
SP	Example: Mega Coporation Common Stock (partial sale)		×		10-12-07		×	_							
	None		_												
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#### **SCHEDULE V— LIABILITIES**

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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 dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household turniture, or appliances; liabilities of a business in which you own an interest; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

						S.P. DC,	
			Higher Education	Alabana Commission on	Example: First Bank of Wilmington, Delaware	Creditor	
				student loan	Mortgage on 123 Main St., Dover, Del.	Type of Liability	
			·			\$1,001- to	1
				<		\$15,001- \$50,000	
						\$50,001- \$100,000	
			<u> </u>		×	\$100,001- m \$250,000	Amoc
_			<u> </u>	1	<u> </u>	\$250,001- \$500,000 TI	nt of
	_		ļ	ļ <u>-</u>	<u> </u>	\$500,001- \$1,000,000	Amount of Liability
					1	\$5,000,000	₹
			-		_	\$5,000,001- \$25,000,000 \$25,000,001-	
					<u> </u>	\$50,000,000	
					1_	\$50,000,000	_

#### SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$122 or less need not be added towards the \$305 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$305 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	\$325
Nome		

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## SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$305 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a

spouse or dependent child that is totally independent of his or her relationship to you.

		Examples:		None							
Source		Chicago Chamber of Commerce	Roycroft Corporation	ne							
Date(s)		Mar. 2	Aug. 6–11								
- 1		DC—Chicago—DC	DC—Los Angeles—Cleveland								
Lodging?	(Y/N	z	Y								
Food?		z	Υ								
Was a Family Member included?	(Y/N)	Z	Υ								
Number of days not	at sponsor's expense	None	2 Days								

#### SCHEDULE VIII—POSITIONS

Name Rythw Davis

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organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any non profit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities; and positions solely of an honorary nature

Position	Name of Organization
Board Munber	Alabama center for law & civic Education
Member-Board of Trustes	Newber-Board of Trustees Tuskeace University (resigned Oct. 19, 2007)

### SCHEDULE IX—AGREEMENTS

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

Date	Parties To	Terms of Agreement
	Nove	