ti. Yes No No	ssactions, or liabilities of a spouse or dependent child because with the Committee on Standards of Official Conduct.	ets, "unearned" income, tra ss you have first consuited	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct.
sts" need not Yes No	s of Official Conduct and certain other "excepted trus spouse, or dependent child?	the Committee on standard trust benefiting you, your	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?
THESE QUESTIONS	MATION — ANSWER EACH OF THESE QUESTIONS	OR TRUST INFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION —
tion in this part must be answered and the schedule attached for each "Yes" response.	Each question in this part mu appropriate schedule attached	Yes No	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.
angement with Yes No No	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes 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.
efore the date Yes No		Yes No	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.
ceive any e reporting Yes No	VII. Did you, your spouse, or a dependent child receive any reportable travet or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	Yes No	II. Did any Individual or organization make a donation to charity in fieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.
seive any ating more Yes No	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes No	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? If yes, complete and attach Schedule I.
	E QUESTIONS	— ANSWER EACH OF THESE QUESTIONS	PRELIMINARY INFORMATION — ANSWE
30 days late.	Termination	\mendment	Report Annual (May 15)
A \$200 penalty shall be assessed against anyone who files more than	Employing Office:	d Officer or Employee	Filer Member of the U.S. State: Mft Status House of Representatives District:
(Office Use Sewitatives	Fo		
V21019 JUL -8 PH 2: 54	Daytime Telephone: (207)225.5661	Daytime	Name: Richard E. Neal
	Form A For use by Members, officers, and employees	TIVES RE STATEMENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT

Name

Page. 2

BLOCK E

land, provide a complete address. Provide full names of stocks and mutual funds (do not use ficker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self directed to hans in which you have the power even if おいて ひんりゅう which generated more than \$200 in "unearned" income during the year. For rental property or od, and (b) any other asset or sources of income duction of income with a fair market value exceeding \$1,000 at the end of the reporting peri-Identify (a) each asset held for investment or pro-Asset and/or income Source BLOCK A generated income, the value should be please specify the method used. year and is included only because it If an asset was sold during the reporting method other than fair market value, reporting year. If you use a valuation Indicate value of asset at close of Value of Asset BLOCK B Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA." For Dividends and interest, even if reinindicate the type of income by checkall other assets including all IRAs, vested, should be listed as income. Check "None" if asset did not generthe appropriate box below. Type of Income BLOCK C or generated vested, should be listed as income. Check "None" if no income was earned indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinments, you may write "NA" for income. For all other assets, including all IRAs, not allow you to choose specific invest-For retirement plans or accounts that do Amount of Income BLOCK D If only a \$1000 in exceeding exchanges (E) Transaction sales (S), or purchases (P) asset had reporting year. indicate if the

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by you or your spouse's child, parent, or sibling; any deposits totalling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government refirement programs.	account and its value at the end of the reporting period. For an active business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For additional information, see the instruction booklet.	provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans that are not self-directed, name the institution holding the	(i.e., plans in which you have the power, even it not exercised, to select the specific investments),
		>	"None."
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PTED/BLIND TRUST			j
Type of Income y: For Example, Partnershi	p Income or Farm	Income)	ate any income during caleridar year.
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\$5,000,000		<u>×</u>	1
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Prime Fund (T. Rowe Price Globa	TROWSFri	Fidelity le	Mutual	mml Investors	JT 1st	DC, Examples: Sim	SP, SP Meg	not self-directed, name the institution account and its value at the end of period. For an active business that traded, state the name of the busines that traded, state the name of the busine of its activities, and its geographics. A. For additional information instruction booklet. Exclude: Your personal reside there is rental income); any debt to your spouse, or by you or your parent, or sibling; any deposits tot tess in personal savings account interest in or income derives. Government retirement programs. If you so choose, you may indicate or income source is that of your dependent child (DC) or is jointly to optional column on the far left.
Prime Fund Cash Cap. Reserver	e Global (ABSSX)	TROWS Frice Cap Appreciation	Fidelity leverage FLVCX	Mutual Fidelth FBALX	stors	1st Bank of Paducah, KY Accounts	Simon & Schuster	Mega Corp. Stock	not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For additional information, see the instruction booklet. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by you or your spouse's child, parent, or sibling; any deposits totalling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.
	-					┢	-	-	None
	$\overline{}$	×	×	×	<u> </u>	7	=		\$1 - \$1,000
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							Royalties		Other Type of Income (Specify: For Example, Partnership Income or Farm Inco
X	X	X	X	X		L	L	!	None
			ļ <u>.</u>	<u> </u>				<u> </u>	\$1 - \$200
	<u> </u>						Ļ	1	\$201 - \$1,000
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								S (partial	asset is sold, please indicate as follows: (\$) (partial) See below for example. P, S, E

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For additional assets and unearned income, use next page.

SCHEDULE IV— TRANSACTIONS

Name Page____

	Repo deper stock amou that r	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 amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange	Type of Transacti	GE action		Date (MO/DAY/YR) or	Date MO/DAY/YR) B Our dedu		0	0	Amount of	Amount of	Amount of	Amount of Transaction B C D E F G H 1
	that retransa or you reside, sold,	that resulted in a loss. Provide a brief description of any exchange 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.	PURCHASE SALE	EXCHANGE	EXCHANGE	Qui Mor Bl-w app		Quarterly, Monthly, or Bi-weekly, if applicable \$1,001-\$15,000 \$15,000	Applicable \$15,000 \$15,000 \$50,000 \$50,000	Duarterly, Monthly, or Bi-weekly, if \$1,001-\$15,000 \$15,001-\$50,000	applicable \$1,001-\$15,000 \$15,001-\$50,000 \$150,001-\$250,000 \$250,001-\$500,000	applicable \$1,001-\$15,000 \$15,001-\$50,000 \$100,001-\$250,000 \$250,001-\$	applicable \$1,001-\$15,000 \$150,000 \$500,001-\$500,000 \$500,001-\$500,000 \$500,001-\$500,000 \$500,001-\$500,000 \$500,001-\$500,000 \$500,001-\$500,000 \$500,001-\$500,000	applicable \$1,001-\$15,000 \$1,000-\$250,000 \$250,001-\$1,000,000 \$1,000,000 \$1,000,000 \$1,000,001
	SP, DC, JT SP	Asset Example: Mega Coporation Common Stock (partial sale)	×	7		10-12-08	10–12–08	10-12-08 X						
		,	X	No. 1		03-06-08	03-06-08	03-06-08 X	03-06-08	03-06-08 X	03-06-08 X	03-06-08 X	03-06-08 X	03-06-08 X
M W		Mutual Fidelity (FBALX)	Χ			03.06-08	80-40	80-40	06 08 less than	06-08 less than \$1	06 08 less than	06-08 less than \$1	06-08 less than \$1	06-08 less than \$1
Investors)		Fidelity Leverage (FLUCX) Stock Fund	X			03-06-08	-06-08	-06-08 lesst	-06-08 lesst	-06-08 less than \$1.	-06-08 lesst	-06-08 less than \$1.	-06-08 less than \$1.	06-08 less than \$1,000.
Made \		T. Rowe Price Cap Appreciation (PRWCX)	Χ			80-06-08	30-00	30-00	06-08 less than	06-08 less than \$1.	06-08 less than	06-08 less than \$1.	06-08 less than \$1.	06-08 less than \$1,000.
Floring /		T. Rowe Price Global (PRGSX)	χ			80-90-69	06-08 less	06-08 less	80-90	06-08 less than \$1.	06-08 less	06-08 less than \$1,000.	06-08 less than \$1,000.	06-08 less than \$1,000.
funds.		Frime Fund Cash Cap. Reserve (FRPXX)	X			80.90.89	3.06.	3.06.	3.06.	3 06.08 X	3 06.08 X	3 06.08 X	3 06.08 X	3 06.08 X
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