<b>₹</b>	Yes	child because	sactions, or liabilities of a spouse or dependent child because	" income, trans	<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	trusts" need not	of Official Conduct and certain other "excepted trusts" need not pouse, or dependent child?	on standards	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct and ce be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?
S	UESTIONS	FTHESE Q	MATION — ANSWER EACH OF THESE QUESTIONS	T INFORI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
the onse.	wered and 'Yes" respo	must be ansi	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	□ 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.  Yes
<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.
	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.	□ 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.
<u>s</u>	Yes	d receive any n the reporting a)?	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.	× ×	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.
§ ⊠	Yes	receive any regating 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.	S	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.  Yes
			E QUESTIONS	OF THESE	PRELIMINARY INFORMATION — ANSWER EACH
assessed nore than	ity shall be ane who files n	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	Termination	Employee	Status House of Representatives District: 3  Report Annual (May 15)  Amendment
RCE CENTER H 4: 35 SLERK SLERK	LEGISLATIVE RESOURCE CENTER  2008 MAY 15 FM 4: 35  US (PRESIDE CONTES SUSIEMES)	MC 2008			2
ERE	MAND DELIVERE		Form A For use by Members, officers, and employees		UNITED STATES HOUSE OF REPRESENTATIVES 2008 FINANCIAL DISCLOSURE STATEMENT For 2007 Calendar Year Reporting Period

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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.

Source Source	Type Am	Amount
Keene State	Approved Teaching Fee	\$6,000
	Legislative Pension	\$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
U.S. Government House at Representatives	salary	162,615.48
City of St. Louis, Municipal Court	spouse salary	24

For payments to charity in lieu of honoraria, use Schedule II.

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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.

Conduct. A fireal envelope for neutralining the list is included in each intellibers filling package.	IIIII y package.		
Source	Activity	Date	Amount
	Speech	Feb. 2, 2007	\$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2007	\$500
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IT Thrift Saries Plan	IT Checking of Savings	JT Readed Prop. J.C. Mo.	JT Carnaman Inv., CLC no	١١	JT 1st Bank of Paducah, KY Accounts	,	SP, Sp Mega Corp. Stock	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.	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 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.	BLOCK A  Asset and/or Income Source  Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other asset or sources of income which generated more than \$200 in "unearned" income during the year. For rental property or land, provide a complete address. Provide full names of stocks and mutual funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments).
*	<b>X</b>	×	**************************************		*	Indefinite	×	None \$1 - \$1,000 \$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	A B C D E F G H I J K L	BLOCK B  Value of Asset  Indicate value of asset at close of 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 year and is included only because it generated income, the value should be "None."
<b>&gt;</b>	*	×	<b>&gt;</b>	×	×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: For Example, Partnership	Income or Farm Income)	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 it reinvested, should be listed as income. Check "None" if asset did not generate any income during calendar year.
		×			×	X	*	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$60,001 - \$100,000 \$100,001 - \$1,000,000 Over \$5,000,000	- H   H   V   V   V   X   X   X	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.
							S (partial)	example. P, S, E	portion of an asset is sold, please indicate as follows:  (S) (partial)	BLOCK E Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1000 in

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

None	ဥ္	Continuation Sheet (if needed)	`		Ţ		3		_	7	Ò										Name (	5	7	ż	arnahan	,						Pa	Page Sof 7
None   >		BLOCK A	<b>-</b>		ı	1	_	<u>۳</u>	Ř	Σ.	- [			ì		- }			<u> </u>	₹   _		- 11	- 11	- 11	Ш	瞪	홎╽╽	╸╽╽		- 11		-	BLOCK E
None   >	<del>-</del>	Asset and/or Income Source				<	<u>≌</u> ≾ .	P BB	<u> </u>	Z d	Ď.							2	₹₹	5 g			_	Ā	٥	ᇍ	으	त्र	om	Ō			ransaction
None   \$1 - \$1,000     \$1 - \$1,000     \$1,001 - \$15,000     \$15,001 - \$50,000     \$50,001 - \$100,000     \$10,007 - \$890,000     \$25,001 - \$100,000     \$500,001 - \$100,000     \$1,000,001 - \$25,000,000     \$5,000,001 - \$25,000,000     \$5,000,001 - \$25,000,000     \$6,000,000     NONE   \$1,000,000     DIVIDENDS   ARNT     RENT   INTEREST     CAPITAL GAINS     STORPTED/BUND TRUST     CAPITAL GAINS     CAPITA	)		>	000	0	0	m	'n	മ	I	_	۷.	~	-								-]	=		₹		<b>≦</b>	爿				<del>-</del>	
None   \$1 - \$1,000     \$1 - \$1,000     \$1,001 - \$15,000     \$15,001 - \$50,000     \$150,001 - \$50,000     \$250,001 - \$50,000     \$250,001 - \$50,000     \$250,001 - \$50,000     \$3,000,001 - \$5,000,000     \$3,000,001 - \$5,000,000     \$3,000,001 - \$5,000,000     \$3,000,001 - \$5,000,000     \$3,000,001 - \$5,000,000     \$3,000,001 - \$5,000,000     \$3,000,001 - \$5,000,000     \$3,000,001 - \$5,000,000     \$1,000,001 - \$5,000,000     \$1,001,001 - \$0,000     \$1,001,001 - \$0,000     \$1,001,001 - \$0,000     \$1,001,001 - \$1,000,000     \$1,000	5					h ,		,												ST			· · · ·				`		·				סד, יי
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			None	\$1 \$		\$15,00									NONE	DIVID	RENT	INTER		EXCE	Other	None	\$1 - \$	\$201 -	\$1,001				_	· · · · · · · · · · · · · ·	_	Over \$	
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## **SCHEDULE IV— TRANSACTIONS**

Name Carnahan

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Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting year of any real property,	Type of Transaction	Type ansac	tion	Date			Amount of	nt T	of Tra	Transaction	ction	_	
stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions				(MO/DAY/YR)	8	O	, <b>O</b>	m		e E			<b>7</b>
that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse,	HASE		ANGE	or Quarterly, Monthly or	<u></u>			)	0.15	00 <b>01</b> -	00 01-	001-	<u> </u>
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.	PURC	SALE	EXCH	Bi-weekly, if applicable	\$1,001- \$15,000	\$15,001- \$50,000	\$50,001 \$100,000 \$100,001	\$250,000	\$500,000 \$500,001	\$1,000,0 <b>\$1,000,0</b>	<b>\$5,000,0</b> \$5,000,0	\$25,000,	\$50,000, Over \$50,000,
SP, DC, JT Asset						2 2 2	7	****					
SP Example: Mega Coporation Common Stock (partial sale)	2 2 2 2	×		10-12-07		×	3	1 2 4		. A.		4	
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#### SCHEDULE V— LIABILITIES

Name Carnahan

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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 furniture, 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.

5 P	C)	リナ		JT DC,	
Syllie Mae, Wilker Barre, 84	IT Royal. Bank, Stronie, Mo	JT Mo. Credit Un., Jefforan City, Mo	Example: First Bank of Wilmington, Delaware	Creditor	
student loan	Polla, no. Farm Hanse	dard meren in administration	Mortgage on 123 Main St., Dover, Del.	Type of Liability	
*			, X,	\$1,000 <b>0</b> 0	
<u> </u>	۲		· · · · ·	\$15,001- \$50,000	
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			×	\$100,001- \$250,000	Amou
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#### SCHEDULE VI— GIFTS

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.

**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.

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

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

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## SCHEDULE VII— TRAVEL PAYMENTS AND REIMBURSEMENTS

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 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 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

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 or were paid by you and reimbursed by the sponsor.

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

Source	Date(s)	City of Departure—Destination— City of Return	Lodging?	Food?	Was a Family Member Included? (Y/N)	Number of days <u>not</u> at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	DCChicagoDC	z	z	<b>Z</b>	None
Roycroft Corporation	Aug. 6–11	DC—Los Angeles—Cleveland	Υ	Y	Y	2 Days
undormy Aprils Pordo issuitable of someting	ny 3/31-4/8	12-Hamburg-Berlin-BC	4	Y	Y	3days
USIA FINC Congressional Study brown in Turkey	5/25-6/1	DC-Ankara-Islanbul-DC	y	Υ.	<	none
The Paper Cation parks 11/20-11/28 Stronis-Names FI-Stronis	11/26-11/28	Stionis-Napres FI-Stionis	Ý.	×	Z	Mone
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#### SCHEDULE VIII—POSITIONS

Name Carnahan

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, 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

Exclude: Positions listed on Schedule 1; positions held in any religious, social, fraternal, or political entities; and positions solely of an honorary nature

_	 	 		
			member	Position
			Carnahan Farms LLC/Carnahan Inv. LLC.	Name of Organization

### 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	