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	ild Yes No 🐼	Exemptions— 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? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct.	EX.
	ent Yes No	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?	Trus
	STIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS	EXCL
		If yes, complete and attach Schedule V. schedule attached for each "Yes" response.	If yea
	and the appropriate	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?  Yes 🔲 No 📝 Each question in this part must be answered and the appropriate	V. than !
		If yes, complete and attach Schedule IV.	: ************************************
	Yes No S	Did you, your spouse, or depandent child purchase, self, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting Yes W No I IX. entity?	V. Poor
		If yes, complete and attach	H yas
	ng in the Yes □ No ☑	Did you, your spouse, or a dependent child receive "unearmed" income of Did you hold any reportable positions on or before the date of filing in the more than \$200 in the reporting period or hold any reportable asset worth  Yes VIII. current calendar year?	III. more
	•	If yes, complete and attach	If yes
	erravetor	e reporting period?  Yes No VII.	II. you fo
		if yes, complete and attach Schedule I.	if ye
	egift in the Yes No No	Did you or your spouse, or a dependent child receive any reportable gift in the or more from any source in the reporting period?  Yes No VI. reporting period (i.e., aggregating more than \$335 and not otherwise	i. or mx
		PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	PRELI
	more than 30 days late.	Report Type  Type  Termination  Termination	Repo Typ
	A \$200 penalty shall be assessed against anyone who files	Filer Member of the U.S. State: LA Cofficer Or Employing Office:  Status House of Representatives District: 3 Employee	Filor Statu
	U.S. HUGS OF REPORT OF K. (Office Use Only)	CHARLES JOSEPH MELANCON  (Full Name)  (Daytime Telephone)	
200	2010 MAY 17 PM 2: 11		
	EGISTATIVE RESOURCE CLAT	UNITED STATES HOUSE OF REPRESENTATIVES FORM A Page 1.15 7 CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT For use by Members, officers, and employees	CALEN

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name CHARLES JOSEPH MELANCON

Age Lory

#### BLOCK A

## Asset and/or Income Source

information, see the instruction booklet. in which you have the power, even if not exercised, to select the specific investments), provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans a fair market value exceeding \$1,000 at the end of the reporting period, activities, and its geographic location in Block A. For additional not publicly traded, state the name of the business, the nature of its its value at the end of the reporting period. For an active business that is that are not self-directed, name the institution holding the account and retirement plans (such as 401(k) plans) that are self directed (i.e., plans mutual funds (do not use ticker symbols). For all IRAs and other land, provide a complete address. Provide full names of stocks and than \$200 in "unearned" income during the year. For rental property or and (b) any other assets or sources of income which generated more identify (a) each asset held for investment or production of income with

Government retirement programs. savings accounts; any financial interest in or income derived from U.S. debt owed to you by your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$5,000 or less in personal Exclude: Your personal residence(s) (unless there is rental income); any

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.

**SEE PAGES 3, 4, 5** ATTACHED

#### Value of Asset Year-End

it is generated income, asset was sold and is method used. If an please specify the than fair market value, valuation method other at close of reporting the value should be included only because year. If you use a Check all columns that appropriate box below. may write "NA". For all be listed as income. even if reinvested, should Dividends and Interest, income by checking the IRAs, indicate the type of other assets including all specific investments, you not allow you to choose plans or accounts that do apply. For retirement

"None."

during the calendar year.

### BLOCK C

BLOCK B

not generate any income Check "None" if asset did Type of Income earned or generated.

appropriate box below. of income by checking the other assets, including all iRAs, indicate the category you to choose specific For retirement plans or "None" if no income was isted as income. Check f reinvested, should be Dividends and interest, even "NA" for income. For all investments, you may write accounts that do not allow Amount of Income

#### BLOCK D

**BLOCK E** 

\$1,000 in Transaction reporting year. exceeding exchanges (E) (P), sales (S), or Indicate if asset had purchases

Page 3 of 7

Franklin Flex Cap Growth		SP Columbia Acorn Tr	Victory Diversified Stock Fund	MFS Value Fund	Hartford Cap Appreciation	Wells Fargo (FormerlyML) Bank Deposit Accour	SP Metropolitan West Tot Ret Fund	┼	<del> </del> -	SP FPA New Income Inc.	ļ	SP Thornburg Invst Income Fund	SP Thornburg Core Growth Fund	SP Hartford Cap Appreciation Fund	SP American Cap Income Builder	SP Wells Fargo (FormerlyML) Bank Deposit Accoun	Pioneer Strategic Income	Nuveen Qual Pref Inc.	Loomis Sayless Strategic	Fidelity Adv Strategic	Thornburg income Builder	American Inc Fund of Am	American Cap Income Builder	Corncast Corp Unsecured Notes	AT&T Senior Notes	CD Imperial Capital Bank	Wells Fargo (FormerlyML) Bank Deposit Accour	JT Rental - House - Napoleonville,		BLOCK A  Asset and/or Income Source
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CHARLES JOSEPH
Name MELANCON

Page 4 of 7

CHARLES JOSEPH MELANCON

Page Tof Z

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## SCHEDULE IV - TRANSACTIONS

Name CHARLES JOSEPH MELANCON

Page 6.f7

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 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.

	SP. DC,
SEE PAGE 7 ATTACHED	Asset
	Type of Transaction
	Capital Gain in Excess of \$200?
	Date
	Amount of Transaction

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Victory Diversified Stock Fund	MFS Value Fund	Hartford Cap Appreciation	Wells Fargo (FormerlyML) Bank Deposit Account	Thomburg Invst Income Fund		Hartford Cap Appreciation Fund	Nuveen Qual Pref Inc.	Loomis Sayless Strategic	Thomburg Income Builder	CD Imperial Capital Bank	Templeton Growth Fund	Franklin Mutual Shares Fund	Franklin Income Funds	ML Bank Deposit Account		Tenn Valley Authority Note		BLOCK A Asset	SCHEDULE IV - TRANSACTIONS
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