	₹ 	s. Yes	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 Ethics.	ets, "unearned" inc Do not answer "ye	Exemptions— Have you excluded from this report any other ass because they meet all three tests for exemption?	
	N	Yes 🗌	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics 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?	ed by the Committe tails of such a trus	Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain disclosed. Have you excluded from this report details of such a trust benefiting you, your sp	
		TIONS	TION - ANSWER EACH OF THESE QUES	ST INFORMA	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS	اجرا
			schedule attached for each "Yes" response.		If yes, complete and attach Schedule V.	
	priate	and the appro	Each question in this part must be answered and the appropriate	Yes No	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 IX.		if yes, complete and attach Schedule IV.	
	Yes No		Did you have any reportable agreement or arrangement with an outside IX. entity?	Yes No	Did you, your spouse, or 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 VIII.		If yes, complete and attach Schedule III.	
	□ 8 €	Yes	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes No	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 VII.		If yes, complete and attach Schedule II.	T
	□ 8 <	or Yes	Did you, your spouse, or a dependent child receive any reportable travel or VII. relimbursements for travel in the reporting period (worth more than \$350 from one source)?	Yes No	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?	=
			omplete an		If yes, complete and attach Schedule I.	
	□ 8 €	Yes	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)?	Yes ☑ No □	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	,
•				OF THESE Q	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	
	days	more than 30 days	Termination Date:	☐ Termination	Report Type (May 15) Amendment	
	y shall against	A \$200 penalty shall be assessed against anyone who files	Officer Or Employing Office: Employee		Filer Member of the U.S. State: VA House of Representatives District: 09	
ATIVES	OMAGE ER	U.S. WHISE DESEMBLENTATIVES	(Daytime Telephone)		(Full Name)	Т
34 M	1 AM 9:	2012 HAY 11 AM 9: 34 N	5403538287		H. Morgan Griffith	
ENTER	ESOURCE C	LEGISLATIVE RESOURCE CENTER				
NAND DELIVERED) UEL	TAIMU	FORM A Page 1 of 6 For use by Members, officers, and employees	ATIVES	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT	
	ファー					1

SCHEDULE I - EARNED INCOME

Name H. Morgan Griffith

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$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.

Source	Туре	Amount
Albo & Oblon	Spouse Salary	N./A

1	1	17 4 =	307507 -	***	~ ~ ~	/A = 40 =	0 4	,		7.	
		ASSE dentify (a) each raius exceeding reportable asset unearmed" inco	Provide complete For all IRAs and (i.e.,plans in white (i.e.,plans in white investments), pur reporting threshot only the name of reporting period.	For rental or oth	For an ownership in state the name of the location in Block A.	Exclude: Your g (unless there wa \$5,000 or less in in, or income de Savings Plan.	if you so choose, you may indice spouse (SP) or dependent child optional column on the far left.	JT	JT	SP	
F	BLOCK A	Asset and/or income Source dentify (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 reportable asset or sources of income which generated more than \$200 in "unearmed" income during the year.	Provide complete 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), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.	For rental or other real property held for investment, provide a complete address.	For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	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 with your spouse (JT), in the optional column on the far left.	Building in Salem, VA	Stonegate Swim Club	VRS	VRS
	BLOCK B	Year-End 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 and is included only because it is generated income, the value should be "None."					\$250,001 - \$500,000	\$15,001 - \$50,000	undetermined	undetermined
	BLOCK C	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income	(such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.					RENT	Other: (Please specify) Partnership	None	None
	BLOCK D	Amount of Income For retirement accounts that do not allow you to choose specific investments or that generate tax- deferred income (such as 401(t) plans or IRAs), you may check the	"None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	¢				\$5,001 - \$15,000	\$5,001 - \$15,000	NONE	NONE
	BLOCK E	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in	reporting year.								

SCHEDULE IV - TRANSACTIONS

Name H. Morgan Griffith

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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, 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.

JT	SP, DC, JT
Stellar One Stock	Asset
S	Type of Transaction
No	Capital Gain in Excess of \$200?
07-01-11	Date
\$1,001 - \$15,000	Amount of Transaction

SCHEDULE V - LIABILITIES

Name H. Morgan Griffith

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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 all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; 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. NOTE: Pending legislation may require Members to report mortgates on personal residences.

JD, SP,	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
ΙΓ	Chase Bank	Jan 2011	Credit Card	\$10,001 - \$15,000
JT	Stellar One Mortgage on Building	1993	Mortgage on 113 East Main Street, Salem, VA	\$100,001 - \$250,000
JT	Suntrust Mortgage	2008	Mortgage of personal residence	\$250,001 - \$500,000

SCHEDULE IX - AGREEMENTS

Name H. Morgan Griffith

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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 government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
January 3, 2011	VRS	continuing participation in pension plan