	Yes No		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	Exemptions Have you excluded from this report any other because they meet all three tests for exemptions of the state of
	Yes No V	"	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?	Trusts- Details regarding "Qualified Blind Trusts" a trusts" need not be disclosed. Have you exchild?
	NS.	ESTION	TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWI
		ġ	schedule attached for each "Yes" response.	If yes, complete and attach Schedule V.
	he appropriate	ed and th	more Yes ✓ No Each question in thís part must be answered and the appropriate	Did you, your spouse, or a dependent child have any reportable liability (more V. than \$10,000) during the reporting period?
			If yes, complete and attach Schedule IX.	If yes, complete and attach Schedule IV.
	Yes No	ın outside	y Did you have any reportable agreement or arrangement with an outside Yes ✓ No IX. entity?	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting
	l		 	more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.
	Yes No <	filing in the	of Did you hold any reportable positions on or before the date of filing in the hear? ✓ No VIII. current calendar year?	Did you, your spouse, or a dependent child receive "unearned" income of ll. more than \$200 in the reporting period or hold any reportable asset worth
			If yes, complete and attach Schedule VII.	If yes, complete and attach Schedule II.
	or Yes □ No ☑	table travel o than \$335	aying Did you, your spouse, or a dependent child receive any reportable travel or Yes No VII. reimbursements for travel in the reporting period (worth more than \$335 from one source)?	Did any individual or organization make a donation to charity in lieu of paying II. you for a speech, appearance, or article in the reporting period?
			If yes, complete and attach Schedule VI.	If yes, complete and attach Schedule I.
	Yes No 🗸	able gift in otherwise	Did you, your spouse, or a dependent child receive any reportable gift in Yes VI. the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)?	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?
			CH OF THESE QUESTIONS	PRELIMINARY INFORMATION ANSWER EACH
	•	late.	t Termination	Type Annual (May 15)
	more than 30 days	more	Termination Date:	Report
	be assessed against	be as	5 Employee	S)
	A \$200 penatty shall VES	A \$20		Member of the U.S. State: AL
MC	(Office Use Only)	(Ot	(Daytime Telephone)	(Full Name)
; <	Min. 20	; - <u>'</u>	256-551-0190	R. Parker Griffith, M.D.
	100 TO 10			
100 Sept. 100 Se		<u></u>	ATEMENT For use by Members, officers, and employees	CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT
7			ENTATIVES FORM A Page 1 of 10	UNITED STATES HOUSE OF REPRESENTATIVES
7				

SCHEDULE I - EARNED INCOME

Name R. Parker Griffith, M.D.

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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.

4 9 4 4 4 7		
Source	Туре	Amount
State of Alabama, State Senate	Salary	\$43,336
Green River Enterprises, Inc.	Shareholder/Officer	\$50,000

	SP	SP		SP	: :	in which yo investment in the accorplans that and its vall that is not its activitie information. Exclude: Y debt owed parent or s savings ac Governme If you so c that of you	Identify (a) a fair mark and (b) any than \$200 land, provintual fun retirement	<u> </u>
Capital Income Builder Fund	Capital Income Builder	Anglo American PLC	American Mutual Fund	American High Income	American Capital/AMCAP Fund	in which you have the power, even it 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 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. Exclude: Your personal residence(s) (unless there is rental income); any 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 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),	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 assets 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	BLOCK A
\$500,001 - \$1,000,000	\$250,001 - \$500,000	\$15,001 - \$50,000	\$250,001 - \$500,000	\$50,001 \$100,000	\$250,001 - \$500,000	asset was sold and is included only because it is generated income, the value should be "None."	Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the	BLOCK B
DIVIDENDS	DIVIDENDS	DIVIDENDS	None	DIVIDENDS	None	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 the calendar year.	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	BLOCK C
\$5,001 - \$15,000	\$15,001 - \$50,000	\$201 - \$1,000	NONE	\$5,001 - \$15,000	NONE	appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.	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	BLOCK D
			0		. o		Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.	BLOCK E

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name	R. Parker Griffith, M.D.		Page 4 of 10
	Capital World Growth & Income Fund	\$500,001 - \$1,000,000	DIVIDENDS	\$2,501 - \$5,000	S(part)
SP	Capital World Growth and Income Fund	\$250,001 - \$500,000	DIVIDENDS	\$5,001 - \$15,000	
SP	Coca Cola Company	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
	Colonial Bank-Checking Account	\$50,001 - \$100,000	INTEREST	\$201 - \$1,000	·
SP	Emerson Electric	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
SP	Europacific Growth FD	\$100,001 - \$250,000	DIVIDENDS	\$5,001 - \$15,000	S(part)
	Europacific Growth Fund	\$1,001 - \$15,000	DIVIDENDS/CAPI TAL GAINS	\$5,001 - \$15,000	
	Exxon Mobil	None	DIVIDENDS/CAPI TAL GAINS	\$2,501 - \$5,000	<u> </u>
SP	Exxon Mobil Corp	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	
 	Farm Bob Wade Ln and Nick Fitchard Rd Madison County, AL	\$1,000,001 - \$5,000,000	RENT	\$5,001 - \$15,000	
	Farmland on Highway 75 Albertville, AL	\$500,001 - \$1,000,000	None	NONE	
<u> </u>	Goldman Sachs Group	None	DIVIDENDS	\$201 - \$1,000	ω
Sp	Growth Fund America	\$100,001 - \$250,000	DIVIDENDS	\$2,501 - \$5,000	

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name	R. Parker Griffith, M.D.		Page 5 of 10
	Growth Fund of America	\$250,001 - \$500,000	DIVIDENDS	\$2,501 - \$5,000	S(part)
Sp	Income Fund of America	\$100,001 - \$250,000	DIVIDENDS	\$2,501 - \$5,000	
	Income Fund of America	\$500,001 - \$1,000,000	DIVIDENDS	\$5,001 - \$15,000	
S P	Intermediate Bond Fund of America	\$50,001 - \$100,000	DIVIDENDS	\$2,501 - \$5,000	
	JP Morgan Chase and Co	None	DIVIDENDS	\$1,001 - \$2,500	ဟ
!	Legg Mason Opportunity Trust	\$100,001 - \$250,000	None	NONE	
	Legg Mason Value Trust	\$250,001 - \$500,000	None	NONE	
	New Perspective Fund	\$100,001 - \$250,000	DIVIDENDS	\$5,001 - \$15,000	ס
	Note Receivable from Manning Properties Huntsville, AL	\$100,001 - \$250,000	Other: payment on loan note	\$15,001 - \$50,000	
	Real Estate 101 Lowe Avenue Huntsville, AL	\$500,001 - \$1,000,000	RENT	\$15,001 - \$50,000	
: 	Real Estate 2105 Leeman Ferry Way Madison County, AL	\$250,001 - \$500,000	RENT	\$50,001 - \$100,000	:
	Real Estate Carr Funeral Home 807 Sparks Avenue Boaz, AL 35956	\$250,001 - \$500,000	RENT	\$15,001 - \$50,000	

•	SCHEDULE III - ASSETS AND "UNEARNED" INCOME
	Name R. Parker Griffith, M.D.

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME		Name R. Parker Griffith, M.D.		Page 6 of 10
	Real Estate-Building 2102 Leeman Ferry Way Huntsville, AL	\$250,001 - \$500,000	RENT	\$5,001 - \$15,000	
	Real Estate-Land 310 Governors Drive Huntsville, AL	\$250,001 - \$500,000	RENT	\$15,001 - \$50,000	
SP	Regions Bank-Checking Account	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
SP	Royal Dutch SHL ADR CL	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
	Triple Springs, Inc. (holding company) Owns: 500 St. Clair Avenue Huntsville, AL	\$500,001 - \$1,000,000	RENT	\$100,001 - \$1,000,000	
	Washington Mutual Investors Fund	\$1,000,001 - \$5,000,000	DIVIDENDS	\$15,001 - \$50,000	S(part)
SP	Washington Mutual Investors Fund	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	

SCHEDULE IV - TRANSACTIONS

Name R. Parker Griffith, M.D.

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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.

SP,	J C	Alfac	Ame	SP Ame	Ame	Capi	Citigroup		Euro	Europacific (Euro	Euro Exxo Gilea Gold
	Asset	Alfacell Corporation	American Capital/AMCAP	American International Group, Inc	American Mutual Fund	Capital World Growth & Income Fund	roup	Europacific Growth Fund	Mobil		Gilead Sciences, Inc	Gilead Sciences, Inc
	Type of Transaction	S	ָּטר 	S		S	S	3	 	s v	S S S	S S S
	Date	08/06/08	12/22/08	3/27/08	12/22/08	12/24/08	8/6/08	 !	12/24/08	12/24/08 1/14/08 4/22/08 6/17/08 8/6/08	12/24/08 1/14/08 4/22/08 6/17/08 8/6/08 8/6/08	12/24/08 1/14/08 4/22/08 6/17/08 8/6/08 8/06/08
	Amount of Transaction	\$15,001 - \$50,000	\$250,001 - \$500,000	\$1,001 - \$15,000	\$250,001 - \$500,000	\$100,001 - \$250,000	\$50,001 - \$100,000		\$50,001 - \$100,000	\$50,001 - \$100,000 \$500,001 - \$1,000,000	\$50,001 - \$100,000 \$500,001 - \$1,000,000 \$50,001 - \$100,000	\$50,001 - \$100,000 \$500,001 - \$1,000,000 \$50,001 - \$100,000

Name R. Parker Griffith, M.D.

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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. 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

JT CS	Asset	Type of Transaction	Date	Amount of Transaction
SP	Intel Corp	တ	3/27/08	\$1,001 - \$15,000
	JP Morgan Chase and Co	o	5/22/08	\$50,001 - \$100,000
SP	Merck and Co, Inc.	 	03/27/08	\$15,001 - \$50,000
	New Perspective Fund	P	12/24/08	\$100,001 - \$250,000
SP	Pfizer Inc.	ω	3/27/08	\$1,001 - \$15,000
SP	Piedmont Natural Gas Co	S	3/31/08	\$15,001 - \$50,000
JT	Regions Financial Corp. Stock	S	08/06/08	\$15,001 - \$50,000
	Schlumberger	S	8/06/08	\$250,001 - \$500,000

Name R. Parker Griffith, M.D.

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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. 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

2	SP, DC,
Asset Washington Mutual Investors Fund	
S Fransaction	Type of
1/25/08 2/28/08 3/25/08 4/25/08 5/23/08	,
\$500,001 - \$1,000,000	

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Name R. Parker Griffith, M.D.

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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.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
.	First American Bank	Mortgage on: 101 Lowe Avenue Huntsville, AL	\$1,000,001 - \$5,000,000
	Aubrey Carr	Mortgage on: Carr Funeral Home 807 Sparks Avenue Boaz, AL 35956	\$250,001 - \$500,000
	Swanee L. Carver	Mortgage on: farmland Highway 75 Albertville, AL	\$100,001 - \$250,000