Yes No V	transactions, or liabilities of a spouse or dependent child less you have first consulted with the Committee on	Exemptions Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent 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.	Exer
Yes _ ! No ✔	Standards of Official Conduct and certain other "excepted of such a trust benefiting you, your spouse, or dependent	Sts- 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
SNC	INFORMATION ANSWER EACH OF THESE QUESTIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLU
	schedule attached for each "Yes" response.	If yes, complete and attach Schedule V.	If yes
the appropriate	Each question in this part must be answered and the appropriate	than \$10,000) during the reporting period?	V. than \$
	If yes, complete and attach Schedule IX.	If yes, complete and attach Schedule IV.	If yes
Yes No 🗸	Did you have any reportable agreement or arrangement with an outside entity?	Did you, your spouse, or dependent child purchase, seil, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting Yes ☑ No ☐ IX. period?	IV. reportation period?
 	If yes, complete and attach Schedule VIII.	If yes, complete and attach Schedule III.	If yes
the Yes : No 🗸	Did you hold any reportable positions on or before the date of filing in the current calendar year?	Did you, your spouse, or a dependent child receive "unearmed" income of more than \$200 in the reporting period or hold any reportable asset worth Yes VIII. Wo Till VIII.	III. more t
	If yes, complete and attach Schedule VII.	If yes, complete and attach Schedule II.	If yes
elor 35 Yes No 🗸	Did you, your spouse, or a dependent child receive any reportable travel or 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 Yes No VII.	II. you fo
	If yes, complete and attach Schedule VI.	If yes, complete and attach Schedule I.	If yes
in Yes □ No 💽	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)?	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 Yes ✓ No ─ VI.	Did yo
	QUESTIONS	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUE	PRELI
	late	Annual (May 15) Amendment Termination	Туре
more than 30 days	Termination Date: mor		Report
A \$200 penalty shall be assessed against	Officer Or Employing Office: A \$2 Employee be a	Member of the U.S. State: AL House of Representatives District: 05	Filer Status
Coffice Use Only)	(Daytime Telephone)	(Full Name)	
26.38.17.15 PM 2: 52	256-551-0190 26	R. Parker Griffith, M.D.	,
EGIC: DEMINER ENDER			
HAND	FORM A Page 1 of 9 For use by Members, officers, and employees	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT	CALEN

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.

4:3444.		
Source	Туре	Amount
State of Alabama, State Senate	Salary	\$43,336
Green River Enterprises, Inc.	Shareholder/Officer	\$50,000

:	SP	SP		SP		Government r If you so choo that of your si in the optiona	Exclude: You debt owed to parent or sibli savings according	in which you investments), in the accoun plans that are and its value that is not put its activities, information, s	Identify (a) ea a fair market v and (b) any ot than \$200 in " land, provide mutual funds	Asse	
Capital Income Builder Fund	Capital Income Builder	Anglo American PLC	American Mutual Fund	American High Income	AMCAP Fund	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.	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.	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 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.	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 mutual funds (such as 40/1/k) plans) that are self directed (i.e. plans).	Asset and/or Income Source	BLOCK A
\$50 \$ 1,0	\$25 \$50	\$15 \$50	\$25 \$50	\$50 \$10	\$25 \$ 50			method asset wa included it is gen the valu "None."	at clo year. valua than t		
\$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	10001	101	method used. If an 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	Year-End	BLOCK B
DIVIDENDS	DIVIDENDS	DIVIDENDS	None	DIVIDENDS	None			IRAS, indicate the type of 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	Type of Income	BLOCK C
\$5,001 - \$15,000	\$15,001 - \$50,000	\$201 - \$1,000	NONE	\$5,001 - \$15,000	NONE			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 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	Amount of Income	BLOCK D
									indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in	Transaction	BLOCK E

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SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name	R. Parker Griffith, M.D.	
	Capital World Growth & Income Fund	\$500,001 - \$1,000,000	DIVIDENDS	\$2,501 - \$5,000
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
	Cytrx Corporation	None	DIVIDENDS	\$1 - \$200
SP	Emerson Electric	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200
Sp	Europacific Growth FD	\$100,001 - \$250,000	DIVIDENDS	\$5,001 - \$15,000
!	Europacific Growth Fund	\$1,001 - \$15,000	DIVIDENDS/CAPI TAL GAINS	\$5,001 - \$15,000
i	Exxon Mobil	None	DIVIDENDS/CAPI TAL GAINS	\$2,501 - \$5,000
SP	Exxon Mobil Corp	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500
	Farm Madison County, AL	\$500,001 - \$1,000,000	RENT	\$5,001 - \$15,000
	Goldman Sachs Group	None	DIVIDENDS	\$201 - \$1,000
SP	Growth Fund America	\$100,001 - \$250,000	DIVIDENDS	\$2,501 - \$5,000
!	Growth Fund of America	\$250,001 - \$500,000	DIVIDENDS	\$2,501 - \$5,000

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SP SP Income Fund of America Madison County, AL Madison County, AL Real Estate **New Perspective Fund** Madison County, AL Real Estate Real Estate Real Estate Madison County, AL Madison County, AL Boaz, AL JP Morgan Chase and Co America Real Estate Real Estate Intermediate Bond Fund of Legg Mason Value Trust Legg Mason Opportunity Trust Income Fund of America \$100,001 -\$250,000 \$50,001 -\$100,000 \$100,001 · \$250,000 \$250,001 -\$500,000 \$100,001 \$250,000 \$250,001 \$500,000 \$250,001 \$500,000 None \$1,000,000 \$500,001 -\$500,000 \$250,001 \$250,000 \$100,001 \$1,000,000 \$500,000 \$250,001 \$500,001 -Name R. Parker Griffith, M.D. RENT RENT on loan note RENT RENT RENT from Manning Other: (paymet None None Street Properties) DIVIDENDS DIVIDENDS **DIVIDENDS** DIVIDENDS DIVIDENDS NONE NONE \$15,001 - \$50,000 \$15,001 - \$50,000 \$15,001 - \$50,000 \$15,001 - \$50,000 \$1,001 - \$2,500 \$5,001 - \$15,000 \$50,001 - \$100,000 \$5,001 - \$15,000 \$2,501 - \$5,000 \$5,001 - \$15,000 \$2,501 - \$5,000 ഗ Page 5 of 9

SCHEDULE III - ASSETS AND "UNEARNED" INCOME SP SP SP Washington Mutual Investors Fund Triple Springs, Inc. Huntsville, AL Regions Bank-Checking Washington Mutual Investors Fund Account Royal Dutch SHL ADR CL \$1,000,001 -\$5,000,000 \$500,001 -\$1,000,000 \$1,001 -\$15,000 \$15,001 -\$50,000 \$15,001 -\$50,000 Name R. Parker Griffith, M.D. RENT **DIVIDENDS** INTEREST DIVIDENDS **DIVIDENDS** \$100,001 -\$1,000,000 \$201 - \$1,000 \$15,001 - \$50,000 \$1,001 - \$2,500 \$201 - \$1,000 S(part) Page 6 of 9

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, DC,		Type of		
JT	Asset	Transaction	Date	Amount of Transaction
dS	American International Group, Inc	S	3/27/08	\$1,001 - \$15,000
	Capital World Growth & Income Fund	Ø	12/24/08	\$100,001 - \$250,000
	Citigroup	S	8/6/08	\$50,001 - \$100,000
	Europacific Growth Fund	ω	12/24/08	\$50,001 - \$100,000
	Exxon Mobil	σ	1/14/08 4/22/08 6/17/08 8/6/08	\$500,001 - \$1,000,000
	Gilead Sciences, Inc	σ	8/06/08	\$50,001 - \$100,000
	Goldman Sachs Group	S	08/06/08	\$50,001 - \$100,000
	Growth Fund of America	Ø	09/18/08 12/22/08	\$250,001 - \$500,000
SP	Intel Corp	ω	3/27/08	\$1,001 - \$15,000
	JP Morgan Chase and Co	σ	4/22/08	\$50,001 - \$100,000
SP	Merck and Co, Inc.	S	03/27/08	\$15,001 - \$50,000

SCHEDULE IV - TRANSACTIONS

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

		Q _S	SP	SP, DC,
Washington Mutual Investors Fund	Schlumberger	Piedmont Natural Gas Co	Pfizer Inc.	Asset
o i	·	ω	Ó	Type of Transaction
1/25/08 2/28/08 2/28/08 4/25/08 5/23/08 6/25/08 6/25/08 8/25/08 9/18/08 9/18/08 10/24/08 11/25/08 12/22/08	8/06/08	3/31/08	3/27/08	Date
\$500,001 - \$1,000,000	\$250,001 - \$500,000	\$15,001 - \$50,000	\$1,001 - \$15,000	Amount of Transaction

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. 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

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 Boaz, AL	\$250,001 - \$500,000
	Swanee L. Carver	Mortgage on: farmland Highway 75 Albertville, AL	\$100,001 - \$250,000