nild Yes No No	ncome, transactions, or liabilities of a spouse or dependent child	Exemptions Have you excluded from this report any other assets, "unearned" income, transactions, or because they meet all three tests for exemption?
sted Yes [No ✓	tee on Standards of Official Conduct and certain other "excepdetails of such a trust benefiting you, your spouse, or depend	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?
STIONS	ATION - ANSWER EACH OF THESE QUESTIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	schedule attached for each "Yes" response.	ff yes, complete and attach Schedule V.
d and the appropriate	Each question in this part must be answered and the appropriate	V. (more than \$10,000) during the reporting period?
	If yes, complete and attach Schedule IX.	if yes, complete and attach Schedule IV.
n outside Yes 🛂 No	Did you have any reportable agreement or arrangement with an outside IX. entity?	Did you, your spouse, or dependent child purchase, sell, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting Yes V No
	If yes, complete and attach Schedule VIII.	If yes, complete and attach Schedule III.
filing in the Yes No 📝	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Did you, your spouse, or a dependent child receive "unearned" income of III. more than \$200 in the reporting period or hold any reportable asset worth Yes V No Indoore than \$1,000 at the end of the period?
	If yes, complete and attach Schedule VII.	If yes, complete and attach Schedule II.
able travel	Did you, your spouse, or a dependent child receive any reportable travel VII. or reimbursements for travel in the reporting period (worth more than \$305 from one source)?	II. paying you for a speech, appearance, or article in the reporting period? Yes No
 	If yes, complete and attach Schedule VI.	If yes, complete and attach Schedule I.
able gift in otherwise Yes □ No 🗸	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$305 and not otherwise exempt)?	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 Yes ✓ No ☐
	QUESTIONS	PRELIMINARY INFORMATION ANSWER EACH OF THESE
more than 30 days	Termination Date:	Report Type Annual (May 15) Amendment Termination
A \$200 penalty shall be assessed against	Officer Or Employing Office: Employee	Filer Member of the U.S. State: TX House of Representative District: 29
U(Office Use CAN) STATISTICS	(Daytime Telephone)	(Full Name)
M 2008 MAY 15 AM 10: 18	281-999-5879	Raymond Eugene 'Gene' Green
LEUISLATIVE RESOURCE CENTER		
DELIVERED	FORM A Page 1 of 7 For use by Members, officers, and employees	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007

SCHEDULE I - EARNED INCOME

Name Raymond Eugene 'Gene' Green

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.

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Source	Туре	Amount
Employees Retirement System of Texas	Legislative Pension	\$51,575
Teachers Retirement System of Texas	Spouse Pension	NA

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	Asset ar Identify (a) each as; fair market value ex (b) any other assets \$200 in "unearned" provide a complete funds (do not use ti plans (such as 401(have the power, ew provide the value at that exceeds the rejuself-directed, name the end of the reported, state the na geographic location instruction booklet.	Exclude: You debt owed to parent or sibl accounts; an Government	If you so choo of your spous optional colur	 	 	SP	 . 	' ≒ 	JT
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 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 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.	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), in the optional column on the far left.	20.049 Acres Rural Land, Montgomery County, TX	Bank of America	Chase Bank (IRA) - Allstate Preferred Preference Annuities	Chase Bank (IRA) - Allstate Preferred Preference Annuities	Common Stock, Prudential Financial	Crosby State Bank
	Value at close year. If valuatio than fair please s method asset we included it is gen the value "None."			None	\$10 \$25	\$50 \$10	\$15 \$50	\$1,0	\$10 \$25
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."			10	\$100,001 - \$250,000	\$50,001 - \$100,000	\$15,001 - \$50,000	\$1,001 - \$15,000	\$100,001 - \$250,000
BLOCK C	Type of income Check all columns that apply. Check "None" if asset did not generate any income during the calendar year. If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)			CAPITAL GAINS	INTEREST	INTEREST	INTEREST	DIVIDENDS	INTEREST
BLOCK D	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, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income. Check "None" if no income was earned.			\$15,001 - \$50,000	\$5,001 - \$15,000	\$1,001 - \$2,500	\$1,001 - \$2,500	\$201 - \$1,000	\$5,001 - \$15,000
BLOCK E	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.			S					

SCHEDULE III -	
- ASSETS AND "UNEARNE	
D" INCOME	

ָרָ 2	Schieback in - Asserts AND GNEADNED INCOME		Name Raymond Eugene 'Gene' Green		Page 4 of 7
	Crosby State Bank (IRA) (Formerly at Regions)	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	
SP	Crosby State Bank (IRA) (Formerly at Regions)	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	
SP	Prudential Financial	\$100,001 - \$250,000	INTEREST & DEFERRED COMP.	\$5,001 - \$15,000	

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SCHEDULE IV - TRANSACTIONS

Name Raymond Eugene 'Gene' Green

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DC,		Type of		
T	Asset	Transaction	Date	Amount of Transaction
J	20.049 Acres Rural Land, Montgomery County, S	S	05-14-07	\$50,001 - \$100,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Raymond Eugene 'Gene' Green

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spouse or dependent child that is totally independent of his or her relationship to you. 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 sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$305 received by 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 the

Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging?	Food? (Y/N)	Was a Family 19? Food? Member Included? 1) (Y/N) (Y/N)	Days not at sponsor's expense
Aspen Institute	Feb 20-25	Houston-San Juan, PR- Houston	Υ	≺	~	None
American Israel Education Foundation	Aug 11-19	Aug 11-19 Houston-Tel Aviv-Houston	~	\	~	None
Aspen Institute	Nov 26- Dec 2	Houston, Liberia, Costa Rica- Houston	·-	~	~	1 Day

SCHEDULE IX - AGREEMENTS

Name Raymond Eugene 'Gene' Green

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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
05/90	International Typographical Union	Pension Upon Retirement