| × N | Yes | t child because | sactions, or liabilities of a spouse or dependent child because | income, trans | EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities they meet all three tests for exemption? |
|---------------------|---------------------------------|--|--|---|---|
| No. | Yes | d trusts" need not | of Official Conduct and certain other "excepted souse, or dependent child? | on standards on standards on standards on standards | 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? |
| φ, | UESTIONS | EACH OF THESE QUESTIONS | - ANSWER | INFORM | EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION |
| the)nse. | wered and 'Yes" respo | must be ansi | Each question in this part must be answered and the appropriate schedule attached for each "Yes" response. | No | V. 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 V. |
| № | Yes | arrangement with | IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX. | ₹ X | IV. Did you, your spouse, or a 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 IV. |
| ₹ | Yes | or before the date | | No | III. 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 III. |
| <u>8</u> | Yes X | Id receive any in the reporting e)? | | × No | II. 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? If yes, complete and attach Schedule II. |
| ₹ | Yes | d receive any gregating more | VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$305 and not otherwise exempt)? If yes, complete and attach Schedule VI. | No I | I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes If yes, complete and attach Schedule I. |
| | | | E QUESTIONS | OF THESE | PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS |
| ssessed ore than | ty shall be a re who files m | A \$200 penalty shall be assessed against anyone who files more than 30 days late. | e Employing Office: e Termination Date: | Officer or Employee | Status Status House of Representatives Heport Type Annual (May 15) State: 2 × 7 × District: 2 3 Amendment |
| 7 7 | IONE SIER PHINNES | H.S. HUUSE OF ROTTOR SER PHWIFS | (Daytime Telephone) | | (Full Na |
| • • | SEESIMOS OTRISE | 2009 MAY 14 PM 2: 19 | 202-22545-11 | | Cino D. Rodriguez |
| M O | HAND DELIVERED | | Form A For use by Members, officers, and employees | | UNITED STATES HOUSE OF REPRESENTATIVES 2008 FINANCIAL DISCLOSURE STATEMENT For 2007 Calendar Year Reporting Period |
| | | , | | | |

| Name | つえつ |
|------|-------------|
| 0 | O. Rodrigue |
| | 402 |

Page 3

SCHEDULE I—EARNED INCOME

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

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

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|--|--|-------------|
| Source | Туре | Amount |
| Keene State | Approved Teaching Fee | \$6,000 |
| - 7 | Legislative Pension | \$9,000 |
| Civil War Roundtable (Oct. 2nd) | Spouse Speech | \$1,000 |
| Ontario County Board of Education | Spouse Salary | NA |
| SAN ANTONIO I.S.D. SAN ANTONIO, TEXAS | SAO USE SALARY | 2/4 |
| Texas Employee Refinement Fund (PENSION) | Laislative lawsion | 19,000.00 |
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SAW ANTONIO CRECIT UNION WAIGHT **FIRST** Ŗ ş TIM-CRET optional column on the far left dependent child (DC) or is jointly held (JT), in the or income source is that of your spouse (SP) or parent, or sibling; any deposits totalling \$5,000 or Exclude: Your personal residence(s) (unless If you so choose, you may indicate that an asset Government retirement programs. interest in or income derived from U.S. less in personal savings accounts; any financial your spouse, or by you or your spouse's child, there is rental income); any debt owed to you by instruction booklet. Block A. For additional information, of its activities, and its geographic location traded, state the name of the business, the nature period. For an active business that is not publicly account and its value at the end of the reporting not self-directed, name the institution holding the each asset in the account that exceeds provide the value and income information on names of stocks and mutual funds (do not use land, provide a complete address. Provide full income during the year. For rental property or which generated more than \$200 in "unearned" od, and (b) any other asset or sources of income exceeding \$1,000 at the end of the reporting periduction of income with a fair market value reporting threshold. For retirement plans that are not exercised, to select the specific investments) (i.e., plans in which you have the power, even if plans (such as 401(k) plans) that are self directed ticker symbols). For all IRAs and other retirement Identify (a) each asset held for investment or pro-37 タイス 530 Examples: 242 WASH. Asset and/or Income Source MARK CREAT W. HARAINS Chian ANTONIO 151 SP ANTONIO ANTON'O Simon & Schuster Mega Corp. Stock 1st Bank of Paducah, KY Accounts RETIREMEN STAZZT - BASK O. CONC. FED 1×78221 5. 7 UN:00 7822 フォスト see at None ➣ generated income, the value should be year and is included only because if If an asset was sold during the reporting please specify the method used. method other than fair market value reporting year. It you use a valuation Indicate value of asset at close of None. 0 \$1 - \$1,000Indefinite × × × O \$1,001 - \$15,000 o \$15,001 - \$50,000 Value of Asset × × × m \$50,001 - \$100,000 BLOCK B × חד \$100,001 - \$250,000 a \$250,001 - \$500,000 × I \$500,001 - \$1,000,000 _ \$1,000,001 - \$5,000,000 _ \$5,000,001 - \$25,000,000 $\overline{}$ \$25,000,001 - \$50,000,000 Over \$50,000,000 NONE Dividends and interest, even if reinall other assets including all IRAs, investments, you may write "NA." For not allow you to choose specific Check all columns that apply. ate any income during calendar year vested, should be listed as income. Check "None" if asset did not generretirement plans or accounts that do indicate the type of income by check-X X × × **DIVIDENDS** the × X × RENT Type of Income appropriate box below. × X INTEREST BLOCK C × CAPITAL GAINS **EXCEPTED/BLIND TRUST** Royalties Other Type of Income (Specify: For Example, Partnership Income or Farm Income) × None Dividends and interest, even if reinchecking the appropriate box below not allow you to choose specific invest-Check "None" if no income was received. vested, should be listed as income For all other assets, including all IRAs, For retirement plans or accounts that do indicate the category of income by ments, you may write "NA" for income. \$1 - \$200= \$201 - \$1,000 ≡ Amount of Income × ₹ × \$1,001 - \$2,500BLOCK D < \$2,501 - \$5,000 × × ≤ \$5,001 - \$15,000 ≦ \$15,001 - \$50,000 ≦ \$50,001 - \$100,000 ⋝ × \$100,001 - \$1,000,000 × \$1,000,001 - \$5,000,000 ≚ Over \$5,000,000 If only a \$1000 in exceeding exchanges (E) sales (S), or purchases (P) example See below for as follows: please indicate asset is sold, portion of an asset had Indicate if the Transaction reporting year. S (S) (partial) BLOCK E (partial) or, cy, m

SCHEDULE III—ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed)

Name ROCKTIQUEZ

Page 5 of 7

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SCHEDULE V— LIABILITIES

Name Rodriguez

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

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during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest; 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. J DC, Example: S X19000 5 MORTAGE First Bank of Wilmington, Delaware アススンア MOR TEAGE Creditor 530 Sou to St. 6249 Mortgage on 123 Main St., Dover, Del Type of Liability SAN ANTONIO STREET 0, C ズミルライツ 1 7822 \$1,001-\$15,000 W \$15,001 \$50,000 O \$50,001-O \$100,000 \$100,001-\$250,000 m Amount of Liability × \$250,001-\$500,000 X X \$500,001-\$1,000,000 Ω \$1,000,001-\$5,000,000 \$5,000,001-\$25,000,000 \$25,000,001 \$50,000,000 Over \$50,000,000

SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her Report the source, a brief description, and the value of all gifts totalling more than \$305 received by you, your spouse, or a dependent child from any source during the year. relationship to you. Gifts with a value of \$122 or less need not be added towards the \$305 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

| Source Source | Description |
|---|--|
| Example: Mr. Joseph H. Smith, Anytown, Anystate | Silver Platter (determination on personal friendship received from Committee on Standards) |
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SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

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 amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$305 received by

spouse or dependent child that is totally independent of his or her relationship to you. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under 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 or were paid by you and reimbursed by the sponsor.

| Source | Examples: Chicago Chamber of Commerce | Roycroft Corporation | Wood ROW WILSON INT. CONTERTO AUG 26-29 Scholms - Makico Institute | | | | | | | |
|---|---------------------------------------|--------------------------|--|---|--|--|--|--|--|--|
| Date(s) | | Aug. 6–11 | tare Aug 26-29 | · | | | | | | |
| City of Departure—Destination— City of Return | DC—Chicago—DC | DC—Los Angeles—Cleveland | SAW AWTONIO - MOKICO CITY SAW AWTONIO | | | | | | | |
| Lodging? | z | ~ | ~ | | | | | | | |
| Food? (Y/N | z | ~ | 7 | | | | | | | |
| Was a Family Member Included? (Y/N) | Z | ~ | ~ | | | | | | | |
| Number of days not at sponsor's expense | None | 2 Days | NOME | | | | | | | |