Yes No X	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?
Yes No X	trusts" need not	of Official Conduct and certain other "excepted trusts" need not pouse, or dependent child?	on standards ng you, your sp	TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct a be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent
QUESTIONS	OF THESE Q	— ANSWER EACH	T INFORM	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
wered and the "Yes" response.	must be ans ed for each	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	S S	V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes X If yes, complete and attach Schedule V.
Yes X No	arrangement with	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	No	IV. Did you, your spouse, or a dependent child purchase, selt, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.
Yes X No	or before the date	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.		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.
Yes No X	d receive any in the reporting	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$305 from one source)? If yes, complete and attach Schedule VII.	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 No X	receive any regating 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 ×	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 complete and attach Schedule I.
		E QUESTIONS	OF THESI	PRELIMINARY INFORMATION — ANSWER EACH OF THESE
A \$200 penalty shall be assessed against anyone who files more than 30 days late.	A \$200 pena against anyor 30 days late.	e Employing Office: Termination Date:	Officer or Employee	Status Member of the U.S. State: OH Status House of Representatives District: 15 t.h Type X Annual (May 15) Amendment
2009 HAY -9 PM 4: 21	POSTORIES AND MANAGED TO THE MENTING THE M	614-469-56 <u>1</u> 4 (Daytime Telephone)		DEBORAH D. PRYCE (Full Name)
THE STROUBLE SERVER				
HAND DELIVERED	IANE	Form A For use by Members, officers, and employees		UNITED STATES HOUSE OF REPRESENTATIVES 2008 FINANCIAL DISCLOSURE STATEMENT For 2007 Calendar Year Reporting Period

	SCH
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	SCHEDULE III
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	II—ASSETS AND "UNEARNED" INCOI
	ETS
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Name DEBORAH D. PRYCE Page 2 of 6

JP MORGAN CHASE (2542 sh @ \$43.65) MERRILL LYNCH IRA RETIREMEN': FEDERATED CAPITAL RESERVES	SP, SP Mega Corp Stock DC, Examples: Simon & Schuster JT 1st Bank of Paducah, KY Accounts CONGRESSIONAL FEDERAL CREDIT UNION AMTRUST BANK		BLOCK A Asset and/or Income Source Identify (a) each asset held for investment or production of income with a tair market value exceeding \$1,000 at the end of the reporting period, and (b) any other asset 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).
X X	Indefinite X	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$250,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$1,000,001 - \$25,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000	BLOCK B Value of Asset Indicate 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 during the reporting year and is included only because it generated income, the value should be "None."
X (SEE BROKER STATEMEN' X	X X Royalties X X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	BLOCK C Type of Income 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 <i>including all IRAs</i> , 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 calendar year.
X X	x x	None - \$1 - \$200 = \$201 - \$1,000 ≡ \$1,001 - \$2,500 ⋜ \$2,501 - \$5,000 <	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, including all IRAs, indicate the category 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 received.
P	S (partial) S	portion of an asset is sold, please indicate as follows: (S) (partial) See below for example. P. S, E	BLOCK E Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1000 in reporting year.

This page may be copied if more space is required.

SCHEDULE IV— TRANSACTIONS

Name DEBORAH D PRYCE

Page 4

016

SP, DC, JT or your dependent child, or the purchase or sale of your personal sold, please so indicate (i.e., "partial sale"). See example below. amount of the transaction exceeded \$1,000. Include transactions stocks, bonds, commodities futures, or other securities when the residence, unless it is rented out. If only a portion of an asset is transaction. Do not report a transaction between you, your spouse, dependent child during the reporting year of any real property, Report any purchase, sale, or exchange by you, your spouse or that resulted in a loss. Provide a brief description of any exchange CHARING ROAD ASSOC. TAX EXEMPT FUND DAILY MONEY CLASS Example: Mega Coporation Common Stock (partial sale) Asset of Transaction **PURCHASE** Type × × SALE **EXCHANGE** (MO/DAY/YR) 01-03-07 12-10-07 Bi-weekly, if Monthly, or applicable Quarterly, 10-12-07 Date \$1,001-\$15,000 × \Box LESS \$15,001-\$50,000 O THAN \$50,001-\$100,000 Amount of Transaction O \$1,000-\$100,001-Ш \$250,000 \$250,001-71 \$500,000 MOVED \$500,001-Ω \$1,000,000 \$1,000,001-I \$5,000,000 ij \$5,000,001-MARYLAND \$25,000,000 \$25,000,001-ے \$50,000,000 Over ㅈ \$50,000,000

SCHEDULE V- LIABILITIES

Name DEBORAH D. PRYCE

Page 5 of 6

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 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 D SP	
Creditor Example: First Bank of Wilmington, Delaware HOMECOMINGS FINANCIAL (BANK OF AMERICA)	
Type of Liability Mortgage on 123 Main St., Dover, Del. MTG ON PENSYLVANIA AVE	
\$1,001- \$15,000	П
\$15,001- \$50,000	
\$50,001- \$100,000	
× \$100,001- m	Amou
\$250,001- \$500,000	n of
\$500,001- \$1,000,000 o \$1,000,001-	Amount of Liability
\$5,000,001 = \$5,000,000 = \$5,000,001 =	2
\$25,000,001 \$25,000,000 \$25,000,001-	$\{\ \}$
\$50,000,000	1 J

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 relationship to you. Gifts with a value of \$122 or less need not be added towards the \$305 disclosure threshold. 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.

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

		None	Example: Mr. Joseph H. Smith, Anytown, Anystate	Source	
			Silver Platter (determination on personal friendship received from Committee on Standards)	Description	
			\$325	Value	

SCHEDULE VIII—POSITIONS

Name DEBORAH D. PRYCE

Page 6 of 6

organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any non profit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities; and positions solely of an honorary nature.

Position	Name of Organization
BOARD MEMBER	TRUSTEE OF THE NATIONAL FUND FOR THE US BONTANICAL GARDENS
BOARD MEMBER	KENNEDY CENTER
BOARD OF ADVISORS	CORNERSTONE COMMUNITY SCHOOL
FOUNDER	HOPE STREET KIDS
D	

SCHEDULE IX—AGREEMENTS

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.

_	 	 		
			1978	Date
			STATE OF OHIO PUBLIC EMPLOYEE RETIREMENT CHAPTER 145.01 OHIO REVISED CODE	Parties To
			QUALIFIED RETIREMENT PLAN TO BEGIN AT RETIREMENT AGE 65	Terms of Agreement

Merrill Lynch Pierce, Fenner & Smith Inc. Member, Securities Investor Protection Corporation (SIPC)

Statement of Retirement Account

ACCOUNT # F/A# P	IGE #				
STATEMENT PERIOD 09/29/07 TO 12/31/9	17				
FINANCIAL ADVISOR THOMAS C PULER! (614) 428-2571	ACCOL TYP				
OFFICE SERVING YOUR ACCOUNT: 2 EASTON OVAL SUITE 100 COLUMBUS OH 43219					



All a separation of the separa	2	EAS	E SERVING YOUR ACCOUNT TON OVAL SUITE 100 IBUS OH 43219	:			
			****	ACCOUNT	SUMMARY	#####	
	PR	AS	PORTFOLIO OF 12/31/07 OF 09/28/07	\$35,186.90 \$34,592.72	DIVIDEND/ This s This y	TATEMENT	\$2,086.83CR \$2,266.30CR
			#### #	CONTRIBUTION	INFORMATION	****	
and the second of the second o				-	TAX YEAR 2006	TAX YEAR	2007
, ·					\$.0	0	\$.00
			***	DISTRIBUTION	INFORMATION	****	
					TAX YEAR 2006	TAX YEAR	2007
· .					\$.0	0	\$.00
	Г		**** MONEY ACC	COUNT QUARTERLY	DIVIDEND/INTERE	ST RECAP ****	
	MOI	VEY	ACCOUNT	OCTOBER	NOVEMBER	CURRE DECEMBER YIELD	NT MONTH'S
4			EMENT RESERVES CL I NK USA RASP	\$1.16 \$1.92	\$1.41 \$1.82	\$.97 \$1.57	4.67 .69
	Γ		****	DAILY ACCOU	NT ACTIVITY	****	
	D	ATE	TRANSACTION	DESCRIP	TION	PRICE	AMOUNT
	09	29	OPENING BALANCE				\$.14CR
	12	05	Received	87 ML RETIREM	ENT RSRVS CL I		
	12	05	Redeemed	87 ML RETIREM	ENT RSRVS CL I		\$87.00CR
	12	05	Journal Entry	ANNUAL ACC	SOUNT FEE \$ 86.48		\$86.48
, , , , , , , , , , , , , , , , , , ,	12	18	*Dividend		GLOBAL FD INC INSTL 12/17/2007		\$242.22CR
	12	18	Reinvestment	BLACKROCK ALLOCATION	GLOBAL I FD INC INSTL	•	\$242.22
	12	18	*Lg Tm Cap Gain	BLACKROCK ALLOCATION PAY DATE	GLOBAL FD NC NSTL 12/17/2007		\$445.28CR
	12	18	Reinvestment	BLACKROCK ALLOCATION	GLOBAL FD INC INSTL		\$445.28
	12	18	#Sh Tm Cap Gain	BLACKROCK ALLOCATION PAY DATE	GLOBAL FD INC INSTL 12/17/2007		\$67.67CR
	12	18	Reinvestment	BLACKROCK ALLOCATION	GLOBAL N FD INC INSTL		\$67.67

Merrill Lynch

DECEMBER, 2007

Merrill Lynch Pierce, Fenner & Smith Inc. Member, Securities Investor Protection Corporation (SIPC)

.83CR .30CR

14CR

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.22

.28CR

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2007

.67CR

Statement of Retirement Account

ACCOUNT # F/A# PAGE #

MLPF& S CUST FPO DEBORAH PRYCE IRA

	****	DAILY ACCOUNT ACTIVITY	***
DATE	TRANSACTION	DESCRIPTION	PRICE AMOUNT
12 18	Divd Reinv	3 BLACKROCK GLOBAL ALLOCATION FD INC INSTL REINV AMOUNT \$67.67 REINV PRICE \$19.62000 QUANTITY BOT 3.4490 AS OF 12/14	
12 18	Divd Reinv	22 BLACKROCK GLOBAL ALLOCATION FD INC INSTE REINV AMOUNT \$445.28 REINV PRICE \$19.62000 QUANTITY BOT 22.6950 AS OF 12/14	
12 18	Divd Reinv	12 BLACKROCK GLOBAL ALLOCATION FD INC INSTL REINV AMOUNT \$242.22 REINV PRICE \$19.62000 QUANTITY BOT 12.3460 AS OF 12/14	
12 18	Journal Entry	1 BLACKROCK GLOBAL ALLOCATION FD INC INSTL FULL SHARE ACCUM SHARE VALUE \$19.49	
12 18	Journal Entry	1 BLACKROCK GLOBAL ALLOCATION FD INC INSTL FULL SHARE ACCUM SHARE VALUE \$19.49	
12 21	#Lg Tm Cap Gain	MFS EMERGING GROWTH FUND CLASS A PAY DATE 12/20/2007	\$1305.68
12 21	#Sh Tm Cap Gain	MFS EMERGING GROWTH FUND CLASS A PAY DATE 12/20/2007	\$17.13
2 24	Fund Delivery	1323 ML BANK USA RASP	
12 24	Subscription	1323 ML BANK USA RASP	\$1323.00
12 31	CLOSING BALANCE		\$.47
	****	CURRENT PORTFOLIO	****
ומ	ANTITY INVESTME		CURRENT MARKET CURR. EST. PRICE VALUE YIELD INCOM
		-	2.010 \$18046
	FUND CLA 665.1290 BLACKROO	ASS A	19.840 \$13196 3.13 \$4
1	OTALS FOR PRICED IN	ESTMENTS	\$31242 \$4
MONE	Y ACCOUNT	PENING BALANCE CLOSING BALANCE AS OF 09/29 AS OF 12/31	DIVIDENDS/INTEREST THIS STMT. YEAR TO DA
act inc	MENT RESERVES CL I	\$318,62 \$235,16	\$3.54 \$14.6

DECEMBER, 2007

Please advise your Financial Advisor immediately of any discrepancies on your statement or it you contemplate changing your address. When making inquiries, please, mention your account number and address all correspondence to the office servoing your account. Please retain this statement for your tax records. See reverse side for explanation of key terms.





Merrill Lynch
Pierce, Fenner & Smith Inc.
Member, Securities Investor Protection Corporation (SIPC)

Statement of Retirement Account

ACCOUNT # F	A# PAGE #	
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MLPF& S CUST FPO DEBORAH PRYCE IRA

FOR PURPOSES OF CALCULATING REQUIRED MINIMUM DISTRIBUTIONS OR COMPLETING IRS FORM 8606, YOU ARE REQUIRED TO USE THE VALUE OF YOUR ACCOUNT AS OF 12/31/07. THIS VALUE SHOULD INCLUDE YOUR PRICED PORTFOLIO TOTAL AND THE VALUE OF CERTAIN LIMITED PARTNERSHIPS AND OTHER DIRECT INVESTMENTS AS WELL AS ANY SECURITIES THAT WE ARE UNABLE TO PRICE - MARKED "UNAVAILABLE". THE "YEAR-END PLAN VALUE" SHOWN CONSISTS OF YOUR PRICED PORTFOLIO TOTAL PLUS THE ESTIMATED VALUE OF LIMITED PARTNERSHIPS OR OTHER DIRECT INVESTMENTS REPORTED ON YOUR YEAR-END STATEMENT.

YEAR-END PLAN VALUE AS OF 12/31/07:

\$35,186.90

FOR IRA, IRRA, SEP/IRA, SIMPLE/IRA, ROTH IRA AND COVERDELL ESA ACCOUNTS, THE YEAR-END PLAN VALUE REPRESENTS THE VALUATION WE MUST FURNISH TO YOU AND THE INTERNAL REVENUE SERVICE AS PART OF THE IRS FORM 5498 REPORTING REQUIREMENTS.

105.68CR

JOUNT

Service A Graph of Comments

317.13CR

123.00

\$.47CR

EST.

\$413

\$413

ST O DATE

\$14.66 \$28.43

R. 2007

END OF STATEMENT

DECEMBER, 2007

/nch



