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| Yes No X | nt child because onduct. | nsactions, or liabilities of a spouse or dependent child because with the Committee on Standards of Official Conduct. | d" income, trar first consulted | EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee or |
|--|--|--|------------------------------------|---|
| Yes No X | ed trusts" need not | ds of Official Conduct and certain other "excepte spouse, or dependent child? | e on Standard ing you, your s | 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? |
| DESTIONS | EACH OF THESE QUESTIONS | - ANSWER | ST INFOR | EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION |
| wered and the "Yes" response. | must be ans | Each question in this part must be answered and the appropriate schedule attached for each "Yes" response. | No X | 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 No 🙀 | r arrangement | IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX. | No No | 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 No X | 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 | ild receive any in the reporting (xe)? | VII. 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)? If yes, complete and attach Schedule VII. | ₹ | 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 | ld 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 \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI. | 8 ⊠ | 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. |
| | | SE QUESTIONS | OF THES | PRELIMINARY INFORMATION — ANSWER EACH OF THESE |
| A \$200 penalty shall be assessed against anyone who files more than 30 days late. | A \$200 penalty s against anyone than 30 days late | ee Termination 4.0 20 (| Officer or Employee | Status Member of the U.S. State: 10 Status House of Representatives District: 10 Annual (May 17, 2010) |
| Office Use Only) PRIZ: 35 | HAND | Daytime Telephone: 570 a78 9286 | Daytime | Christopher Paul Car |
| EGISLATIVE RESOURCE CENTER | ្រ ភ | Form A For use by Members, officers, and employees | MENT | UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2010FINANCIAL DISCLOSURE STATEMENT |

Name Christopher

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Asset and/or Income Source **BLOCK A**

provide the value and income information on plans (such as 401(k) plans) that are self directed income during the year. For rental property or land, provide a complete address. Provide full od, and (b) any other asset or sources of income which generated more than \$200 in "unearned" exceeding \$1,000 at the end of the reporting periduction of income with a fair market value instruction booklet. Block A. For additional information, see the of its activities, and its geographic location period. For an active business that is not publicly account and its value at the end of the reporting each asset in the account that exceeds the reporting threshold. For retirement plans that are ticker symbols). For all IRAs and other retirement Identify (a) each asset held for investment or protraded, state the name of the business, the nature not self-directed, name the institution holding the not exercised, to select the specific investments), (i.e., plans in which you have the power, even if names of stocks and mutual funds (do not use ≻

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cial interest in or income derived from U.S. parent, or sibling; any deposits totalling \$5,000 or your spouse, or by you or your spouse's child, there is rental income); any debt owed to you by Government retirement programs. less in personal savings accounts; and any finan-Exclude: Your personal residence(s) (unless

dependent child (DC) or is jointly held (JT), in the optional column on the far left or income source is that of your spouse (SP) or If you so choose, you may indicate that an asset None

\$1 -- \$1,000

\$100,001 -

\$250,001 -

\$1,001 - \$15,000

\$15,001 - \$50,000

\$50,001 - \$100,000

\$500,001 - \$1,000,000

DC, Examples:

SP Mega Corp. Stock

Simon & Schuster

Indefinite

1st Bank of Paducah, KY Accounts

Value of Asset **BLOCK B**

please specify the method u reporting year. If you use method other than fair m Indicate value of asset

generated income, the valu year and is included only If an asset was sold during "None."

BLOCK C

Type of Income

BLOCK D

Amount of Income Indicate if the ransaction BLOCK E

| | X | * | - | ~ | X | × | | × | \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,00 \$25,000,001 - \$50,000,0 Over \$50,000,000 NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUS | 0 | | - J | retirement plans or not allow you to ue, investments, you ma all other assets inc indicate the type of ing the appropriating bividends and interest it vested, should be it check "None" if asset ate any income durir | at close of Check all columns |
|------------|-------------|--------|------------|----------------------------|----------|----------|-----------|-------------|---|--|-----------------------------------|-------------------------|--|--|
| | | | | | | | Royalties | | Other Type of Income (Specify: For Example, Partne | | or Farm I | ncome) | accounts that do choose specific ay write "NA." For all IFAs, income by checkate box below. rest, even if reinisted as income. set did not generage calendar year. | that apply. For |
| | | | | | | | | | None \$1 - \$200 | | | = | not allow you to choose specific investments, you may write "NA" for income. For all other assets, <i>including all IRAs</i> , 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 earned or generated. | For retirement plans or accounts that do |
| Z | | - Jago | _ | × | | \vdash | - | × | \$201 - \$1,000 \$1,001 - \$2,500 | | | _ ≡ | ther a the a the a the a the by the b | ement |
| Ĺ | > | X | X | | | | | | \$2,501 - \$5,000 | | | < | ay way way way way way way way was seet cate app | plan |
| | | | | | | × | | | \$5,001 ~ \$15,000 | | | ≤ | to choose sp ay write "NA" ssets, <i>includ</i> scategory of appropriate d interest, e d be listed if no income | าร |
| | | | | | | | _ | | \$15,001 - \$50,000 | | | ≦ Viii | Se s "N/ riate riate sted com | r acc |
| | | | | | | L | <u> </u> | Ш | \$50,001 \$100,000 | | | <u>≨</u> | peci ding fing fing fing fase | M |
| <u>L</u> _ | | ļ | ļ <u> </u> | ļ | | L | × | | \$100,001 - \$1,000,000 | | | × | ecific invest- for income ing all IRAs, income by box below, ven if rein- as income was earnec | its # |
| | <u> </u> | | | <u> </u> | Ļ | | L | | \$1,000,001 \$5,000,000 |) | | × | nves com le t le t belov belov reli reli com | nat c |
| | | | | | | | | | Over \$5,000,000 | | | × | | ŏ |
| | | | | 14 14 15 15 16 | | | | S (partial) | m w .v | as follows: (S) (partial) See below for example. | asset is sold, please indicate | If only a portion of an | asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year. | molcate ii me |

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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Page 2 of 3

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| | | | | | | | | | | | | | | 3 | | | REAL PROPERTY DWOLLDA | ing Link | CREF BOND MARKET | | BLOCK A Asset and/or Income Source | Continuation Sheet (if needed) |
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