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DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES  
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007

FORM A Pg 1 of 10  
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER  
2008 MAY 15 PM 1:27

CHARLES JOSEPH MELANCON  
(Full Name)

985-369-7785  
(Daytime Telephone)

MC OFFICE OF THE CLERK  
U.S. HOUSE OF REPRESENTATIVES  
(Office Use Only)

Filer Status: ☒ Member of the U.S. House of Representatives  
State: LA District: 3

Officer Or Employee: \_\_\_\_\_  
Employing Office: \_\_\_\_\_

Report Type: ☒ Annual (May 15) ☐ Amendment ☐ Termination

Termination Date: \_\_\_\_\_

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

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 <input type="checkbox"/> No <input checked="" type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$205 and not otherwise exempt)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, complete and attach Schedule I.		If yes, complete and attach Schedule VI.	
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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$205 from one source)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes, complete and attach Schedule II.		If yes, complete and attach Schedule VII.	
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?	Yes <input type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, complete and attach Schedule III.		If yes, complete and attach Schedule VIII.	
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, complete and attach Schedule IV.		If yes, complete and attach Schedule IX.	
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If yes, complete and attach Schedule V.			

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name CHARLES JOSEPH MELANCON

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BLOCK A <b>Asset and/or Income Source</b> 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.	BLOCK B <b>Year-End Value of Asset</b> 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."	BLOCK C <b>Type of Income</b> 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)	BLOCK D <b>Amount of Income</b> 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.	BLOCK E <b>Transaction</b> Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
SEE PAGES 3, 4, 5, 6 ATTACHED				

**SCHEDULE III - ASSETS AND "UNEARNED" INCOME**

Name **CHARLES JOSEPH MELANCON**

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BLOCK A Asset and/or Income Source	BLOCK B Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
	A	B	C	D	E	F	G	H	I	J	K	L	DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED TRUST QUALIFIED BLIND TRUST  Other Type of Income	I	II	III	IV	V	VI	VII	VIII	IX	X	XI																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
	None	\$1 - \$1,000	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000		None	\$1 - \$200	\$201 - \$1,000	\$1,001 - \$2,500	\$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																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
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# SCHEDULE IV - TRANSACTIONS

Name CHARLES JOSEPH MELANCON

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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 or series of transactions exceeded \$1,000. Include transactions that resulted in a loss. 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. Provide a brief

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SEE PAGES 8, 9 ATTACHED				

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BLOCK A	BLOCK B	BLOCK C	BLOCK D
Asset	TYPE OF TRANSACTION	Date	Amount of Transaction
JT Franklin Income Funds	Purchase	06-25-07	\$1,001 - \$15,000
JT Franklin Income Funds (Partial)	Sale	Var	X
JT Franklin Mutual Shares Fund		06-25-07	\$15,001 - \$50,000
JT Franklin Mutual Shares Fund (Partial)		Var	X
JT Templeton Growth Fund		06-25-07	\$50,001 - \$100,000
JT Templeton Growth Fund (Partial)		Var	X
JT Rental - Condo - Baton Rouge, LA		06-15-07	\$100,001 - \$250,000
AT&T Senior Notes		07-13-07	\$250,001 - \$500,000
Comcast Corp Unsecured Notes		07-13-07	\$500,001 - \$1,000,000
Thornburg Core Growth		07-13-07	\$1,000,001 - \$5,000,000
Great Plains Energy Income		07-13-07	\$5,000,001 - \$25,000,000
Lehman Bros Hldgs Inc		07-13-07	\$25,000,001 - \$50,000,000
Oneok Inc		07-13-07	Over \$50,000,000
XL Capital Ltd		12-19-07	
Rydex Juno Fund		07-13-07	
Hartford Floating Rate Fnd		07-13-07	
Loomis Sayless Strategic		07-13-07	
Nuveen Qual Pref Inc.		07-13-07	
John Hancock Strategic		05-07-07	
MLJWH Strat Alloc Fd		10-26-07	
SP American Cap Income Builder		10-26-07	
SP Hartford Cap Appreciation Fund		10-26-07	
SP Thornburg Core Growth Fund		10-26-07	
SP Thornburg Invest Income Fund		10-26-07	
SP Fidelity Adv Strategic Inc Fund		10-26-07	
SP FPA New Income Inc.		10-26-07	
SP Franklin Cust Fd Inc.		10-26-07	
SP Loomis Sayless Bond Fd		10-26-07	
SP Metropolitan West Tot Ret Fund		10-16-07	
SP Blackrock Stragic		10-16-07	
SP FPL Group Inc		10-16-07	



BLOCK A		BLOCK B		BLOCK C	BLOCK D										
Asset		TYPE OF TRANSACTION		Date	Amount of Transaction										
SP	Great Plains Energy Income	Purchase	Sale	07-13-07	X	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000
SP	Ishtares Trust Dow Jones		X	10-16-07	X										
SP	Lehman Bros Hldgs Inc		X	07-13-07	X										
SP	Marshall & Ilsley Corp		X	07-13-07	X										
SP	ML&CO Proceeds Select		X	10-22-07	X										
SP	ML&CO Proceeds Value		X	10-22-07	X										
SP	Wachovia Corp		X	10-16-07	X										
SP	XL Capital		X	07-13-07	X										
	Columbia Mansco Focused Equity	X		10-10-07	X										
	Hartford Cap Appreciation	X		10-10-07	X										
	MFS Value Fund	X		10-10-07	X										
	Victory Diversified Stock Fund	X		10-10-07	X										
	Metropolitan West Total Ret	X		10-10-07	X										
	Thornburg Income Builder		X	10-09-07	X										
	Pioneer Strategic Income		X	10-09-07	X										

# **SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS**

Name CHARLES JOSEPH MELANCON

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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 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 sponsor. 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 spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
AMERICAN SUGAR ALLIANCE	AUG. 5-8	WASHINGTON DC - SAN FRANCISCO - NEW ORLEANS	Y	Y	Y	1 DAY