

HAND DELIVERED MC

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

FORM A
For use by Members, officers, and employees

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Paul C. Brown, Jr.

(Full Name)

706-227-0510

(Daytime Telephone)

2008 MAY 20 3 11 PM '07

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(Office Use Only)

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representative	State: GA	District: 10	Officer Or Employee	Employing Office:	A \$200 penalty shall be assessed against anyone who files more than 30 days late.
Report Type	<input checked="" type="checkbox"/> Annual (May 15)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Termination Date:		

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? If yes, complete and attach Schedule I.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	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.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <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 \$305 from one source)? If yes, complete and attach Schedule VII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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 <input checked="" 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? If yes, complete and attach Schedule VIII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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? If yes, complete and attach Schedule IV.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

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 I - EARNED INCOME

Name Paul C. Broun, Jr.

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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.

Source	Type	Amount
Latin American Translators Network	Spouse Spanish Interpreter Fee	\$69.80
Colores Nuestra Cultura	Spouse Spanish Interpreter Fee	\$325.25
Judicial Council of Georgia	Spouse Spanish Interpreter Fee	\$132.30
Black Diamond	Spouse Spanish Interpreter Fee	\$151.40
Optimal Communicators, Inc.	Spouse Spanish Interpreter Fee	\$489.44
Medi-Translation, Inc.	Spouse Spanish Interpreter Fee	\$177.24
Optimal Transport, Inc.	Spouse Spanish Interpreter Fee	\$345
Global Translation Services, Inc.	Spouse Spanish Interpreter Fee	\$3,421.75
Quick-Med, Inc. (Earned Prior to Becoming Member of Congress)	Physician Fee	\$3,560
Medquest Associates (Earned Prior to Becoming Member of Congress)	Physician Fee	\$16,100
Georgia Department of Labor (Earned Prior to Becoming Member of Congress)	Physician Fee	\$625
Georgia Department of Labor (Earned Prior to Becoming Member of Congress)	Physician Fee	\$1,500
Georgia Legislative Retirement System Pensions	Death Beneficiary	\$2,452.32

SCHEDULE I - EARNED INCOME

Name Paul C. Broun, Jr.

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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.

Source	Type	Amount
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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Paul C. Broun, Jr.

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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.	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."	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)	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.	BLOCK E Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
AFB&T Savings Account	\$1 - \$1,000	Interest	\$1 - \$200	
DC American Capital World Growth & Income Fund Class C	\$1,001 - \$15,000	CAPITAL GAINS Distributions	\$201 - \$1,000	
DC American Capital World Growth & Income Fund Class C	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Bank of America Stock	\$15,001 - \$50,000	Dividends	\$1,001 - \$2,500	P
SP Bank of America Stock	\$15,001 - \$50,000	Dividends	\$201 - \$1,000	
Fidelity Advisor New Insights Class C (SEP IRA)	\$1,001 - \$15,000	DIVIDENDS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Paul C. Brown, Jr.

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DC	Fidelity Advisors New Insights Class C	\$1,001 - \$15,000	Dividends/CAPIT AL GAIN Distributions	\$1 - \$200	
DC	First Eagle Global Class C	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	P
DC	First Eagle Global Class C	\$15,001 - \$50,000	CAPITAL GAIN Distributions	\$1,001 - \$2,500	
	First Eagle Global Class C (SEP IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Fiserve Trust Money Market Account (IRA)	\$1 - \$1,000	Interest	\$1 - \$200	
DC	John Hancock Classic Value Class C	\$1,001 - \$15,000	Capital Gains Distribution	\$201 - \$1,000	
	McIntosh Commercial Bank S-Corporation Stock (Only Asset Held in 33.33% Membership Interest in Brown Brother's Investments)	\$250,001 - \$500,000	LLC Company Membership Interest	\$1,001 - \$2,500	
	Rydex US Government Core Moneymarket Investor	\$15,001 - \$50,000	Dividends	\$1,001 - \$2,500	
DC	Rydex US Government Core Moneymarket Investor	\$15,001 - \$50,000	Dividends	\$1,001 - \$2,500	
	Synovus Financial Corporation, Inc. (Stock Held in Rollover IRA)	\$1 - \$1,000	Dividends	\$1 - \$200	
DC	Thornburg Investment Income Builder Fund Class C	\$1,001 - \$15,000	Capital Gains Distributions	\$1 - \$200	
DC	Thornburg Investment Income Builder Fund Class C	\$1,001 - \$15,000	Dividends	\$201 - \$1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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Total Systems Services, Inc. (Stock Held Rollover IRA)	\$1,001 - \$15,000 Dividends	\$1 - \$200	
Wachovia Corp.	\$1,001 - \$15,000 Dividends	\$201 - \$1,000	

SCHEDULE IV - TRANSACTIONS

Name Paul C. Broun, Jr.

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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
DC	First Eagle Global Class C	Purchase	Various - Capital Gains Reinvested	\$1,001 - \$15,000
	Bank of America	Purchase	Various - Dividends Reinvested	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

Name Paul C. Broun, Jr.

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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 all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; 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.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	American Express	Credit Card	\$15,001 - \$50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Paul C. Brown, Jr.

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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
UGA Athletic Association	Dec. 31 - Jan 2	Athens - New Orleans - Athens	Y	Y	Y	None

SCHEDULE VIII - POSITIONS

Name Paul C. Broun, Jr.

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Limited Liability Company Member	Broun Brothers Investments, LLC