Yes No 🐼		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? Do not answer "yes" unless you have first consulted with the Committee on	sets, "unearned" in ? Do not answer "y	Exemptions— Have you excluded from this report any other as because they meet all three tests for exemption
Yes 🗀 No 💽	 	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?	ved by the Committed from this report	Trusts— Details regarding "Qualified Blind Trusts" approtrusts" need not be disclosed. Have you exclud child?
S	STIONS	ATION - ANSWER EACH OF THESE QUESTIONS	JST INFORM	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWE
		schedule attached for each "Yes" response.		If yes, complete and attach Schedule V.
e appropriate	and the	Each question in this part must be answered and the appropriate	Yes No	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 IX.	 	If yes, complete and attach Schedule IV.
Yes - No 🖳	outside	Did you have any reportable agreement or arrangement with an outside IX. entity?	Yes 🗸 No 🖂	Did you, your spouse, or dependent child purchase, sell, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting period?
Yes V No		VIII. current calendar year?  If yes, complete and attach Schedule VIII.	Yes No	III. 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.
	;	If yes, complete and attach Schedule VII.		If yes, complete and attach Schedule II.
Yes 🛂 No 🗀	le travel or en \$335	Did you, your spouse, or a dependent child receive any reportable travel or VIII. reimbursements for travel in the reporting period (worth more than \$335 from one source)?	Yes 🗍 No 🔾	Did any individual or organization make a donation to charity in lieu of paying II. you for a speech, appearance, or article in the reporting period?
,        -	       	If yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.
Yes 🗇 No 🔽	le gift in herwise	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)?	Yes [] No 🕢	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 in or more from any source in the reporting period?
		OF THESE QUESTIONS	1	PRELIMINARY INFORMATION - ANSWER EACH
	late.	ation		Type ( Annual (May 15)   [ Amendment
more than 30 days	more th	Termination Date:		
be assessed against	be asse	 		 
U.S. HOUSE DE REPRESENTATIVES	. 99 <b>5</b> 50 €	Employing Office:		Member of the U.S. State: NC
(Office Use Only),	(Offi	(Daytime Telephone)		(Full Name)
BOO MAY IN PM L: 11	7009 MAY	(202) 225-2576		Patrick Timothy McHenry
THE STATIVE RESOURCE CENTER	CISI AIIVI			
		For use by Members, officers, and employees	MENT	CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT
TANS DEL VERED	F	FORM A Page 1 of 7	TATIVES	INITED STATES HOUSE OF BEPRESENTATIVES

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that of your spouse (SP) or dependent child (DC) or is jointly held (JT). in the optional column on the far left. If you so choose, you may indicate that an asset or income source is savings accounts; any financial interest in or income derived from U.S. parent or sibling; any deposits totaling \$5,000 or less in personal debt owed to you by your spouse, or by your or your spouse's child, Exclude: Your personal residence(s) (unless there is rental income); any information, see the instruction booklet. and its value at the end of the reporting period. For an active business 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, Government retirement programs. its activities, and its geographic location in Block A. For additional that is not publicly traded, state the name of the business, the nature of plans that are not self-directed, name the institution holding the account in the account that exceeds the reporting threshold. For retirement mutual funds (do not use ticker symbols). For all IRAs and other and (b) any other assets or sources of income which generated more investments), provide the value and income information on each asset in which you have the power, even if not exercised, to select the specific retirement plans (such as 401(k) plans) that are self directed (i.e., plans land, provide a complete address. Provide full names of stocks and than \$200 in "unearned" income during the year. For rental property or Asset and/or Income Source real estate (holdings Union Rd 215 Robinson Rd., Gastonia McHenry-McHenry & 8th Ave., below) partnership - real estate (10% ownership) 5524 Union Rd., Gastonia NC McHenry-Putman Partnership Garrison Blvd., below) (holdings Robinson Rd. & 109 W. 8th Ave., Gastonia NC (10% ownership) K \$100,001 -See below \$15,001 -\$50,000 \$15,001 -See below at close of reporting \$50,000 the value should be value, please specify other than fair market valuation method year. If you use a it is generated income, included only because asset was sold and is the method used. If an Value of Asset Year-End Name Patrick Timothy McHenry BLOCK B RENT RENT see below RENT see below other assets including all plans or accounts that do during the calendar year not generate any income be listed as income. even if reinvested, should Dividends and Interest, appropriate box below. may write "NA". For all specific investments, you apply. For retirement Check all columns that Check "None" if asset did not allow you to choose income by checking the RAs, indicate the type of Type of Income BLOCK C \$5,001 - \$15,000 See below \$5,001 - \$15,000 See below Dividends and interest, ever "NA" for income. For all \$5,001 - \$15,000 earned or generated. "None" if no income was listed as income. Check if reinvested, should be appropriate box below. of income by checking the IRAs, indicate the category other assets, including all investments, you may write you to choose specific accounts that do not allow For retirement plans or Amount of Income (P), sales (S), or \$1,000 in Transaction reporting year. exceeding exchanges (E) Indicate if asset nad purchases BLOCK E Page 2 of 7

NC (50% ownership)

\$250,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME Alliance Bank and Trust stock 806 Requa Rd., Cherryville NC SCANA common stock checking account Congress campaign Personal loan to McHenry for partnership (.294% ownership) Locust, NC (real estate Locust-Highway 200 LLC, (rental property) ING Direct Savings Account Alliance Bank and Trust Gastonia NC (50% ownership) 621 W. Garrrison Blvd., \$1,001 -\$15,000 \$15,001 -\$50,000 \$15,001 -\$50,000 \$15,001 -\$50,000 \$1,001 -\$15,000 None \$100,001 \$250,000 \$100,001 -\$250,000 Name Patrick Timothy McHenry RENT RENT None None DIVIDENDS Interest INTEREST INTEREST NONE NONE \$1 - \$200 \$2,501 - \$5,000 NONE \$201 - \$1,000 \$2,501 - \$5,000 \$5,001 - \$15,000 ഗ Page 3 of 7

## SCHEDULE IV - TRANSACTIONS

Name Patrick Timothy McHenry

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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 exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. 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. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

	SP, DC, JT
621 W. Garrison Blvd, Gastonia NC	Asset
<b>σ</b>	Type of Transaction
03-27-08	Date
\$15,001 - \$50,000	Amount of Transaction

## SCHEDULE V - LIABILITIES

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

Name Patrick Timothy McHenry

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cards) on	cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.	ceeded \$10,000.	
SP, DC,	Creditor	Type of Liability	Amount of Liability
	Mr/Mrs George LeCroy, Hendersonville NC (previous owners of property)	Mortgage on 215 Robinson Rd., Gastonia	\$100,001 - \$250,000
	First Gaston Bank, Gastonia NC	Mortgage on 621 W. Garrison Blvd	\$10,001 - \$15,000
	Citizen's South Bank, NC	Mortgage on 806 Requa Road	\$50,001 - \$100,000

## SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Patrick Timothy McHenry

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spouse or dependent child that is totally independent of his or her relationship to you. 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 sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under 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 Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 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

Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Prood? Member Included? (Y/N) (Y/N)	Days not at sponsor's expense
Heritage Foundation	Jan. 30- Feb. 1,	DC-Baltimore-DC	Υ	<b>*</b>	Z	0 Days
	2008		-		-	

## SCHEDULE VIII - POSITIONS

Name Patrick Timothy McHenry

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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
Partner	McHenry-McHenry Partnership
Partner	McHenry-Putman Partnership
Sole Proprietor	McHenry Real Estate (no assets)