	child because Yes	sactions, or liabilities of a spouse or dependent o	l" income, trans	EXEMPTION —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?
ON Sé	trusts" need not Yes	s of Official Conduct and certain other "excepted pouse, or dependent child?	on standards	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?
STIONS	EACH OF THESE QUESTIONS	— ANSWER	T INFORI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
ed and the "response.	must be answer ed for each "Yes	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	₹	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.
No <	arrangement with Yes	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.
Z _o	or before the date Yes		S S	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.
No V	d receive any n the reporting Yes		¥ []	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.
ON SE	regating more Yes	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.	S S	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!
		E QUESTIONS	EACH OF THESE	PRELIMINARY INFORMATION — ANSWER EACH
A 3200 penany shan be assessed against anyone who files more than 30 days late.	against anyone who files more than 30 days late.		Employee	House of Representatives District: Annual (May 15)
se Only)	2 -2 P) 3:57	(Daytime Telephone)	Officer or	James Oks McCrey III Filer 7 Member of the U.S. State: LA
₹.				2008
HAND DELIVERED	HANDD	Form A For use by Members, officers, and employees	ě	UNITED STATES HOUSE OF REPRESENTATIVES 2008 FINANCIAL DISCLOSURE STATEMENT For 2007 Calendar Year Reporting Period

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Name James Otis McCrery
Page \ of 3

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$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. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	ts received under the Social Sec	curity Act.
Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
	Legislative Pension	\$9,000
Civil War Roundtable (Oct. 2nd) Ontario County Board of Education	Spouse Speech Spouse Salary	\$1,000 NA
(SMOTATE) THOUSE TORONG THEORY SHOCK	Spoux Solary	N/A
	1	

For payments to charity in lieu of honoraria, use Schedule II.

Fidelity Crowth & Income Fund	Fidelity Equity Irrane Furd	tidelity Contra tura	Federated Court Income	Euro Pacific Growth Fund	Proneur Cash Fund	JT 1st Bank of Paducah, KY Accounts	Examples:	SP. Sp Mega Corp. Stock	each asset in the account that exceeds the each asset in the account 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 you or your spouse's child, parent, or sibling; any deposits totalling \$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 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 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).
× .		×	~	>	×	×	Indefinite	×	None	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	×	75	×	×	Royalties	×	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 including all IRAs, 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	** ** ** ** ** ** ** *			7	×	×	×	None - \$1 - \$200 = \$201 - \$1,000 = \$1,001 - \$2,500 ₹ \$2,501 - \$5,000 ₹ \$5,001 - \$15,000 ₹ \$50,001 - \$50,000 ₹ \$50,001 - \$100,000 ₹ \$100,001 - \$1,000,000 ₹ \$1,000,001 - \$5,000,000 X Over \$5,000,000 X	Amount of Income 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 enterprinate have halow. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was received.
								S (partial)	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.

	Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by you or your spouse's child, parent, or sibling; any deposits totalling \$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.	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.	1	BLOCK A Asset and/or Income Source
×	\$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	C D E F G H - J K L	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."	BLOCK B Value of Asset
× × ×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: For Example, Partnership	Income or Farm 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.	BLOCK C Type of Income
* * * * *	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000	X X X X X X X X X X X X X X X X X X X	For retirement plans or accounts that do 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 box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was received.	BLOCK D Amount of Income
	example. P. S.	If only a portion of an asset is sold, please indicate as follows: (S) (partial)	asset had purchases (P), sales (S) or exchanges (E) exceeding \$1000 in reporting year.	BLOCK E

SCI	SCHEDULE III—ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed)		Σ	ΕÞ	٦	M I	Ö	Ē	ਨੂ	2	m									Name	J J					I	J J				Pa	Page 3 of 3
· · · · · · · · · · · · · · · · · · ·	BLOCK A Asset and/or Income Source	"			∀ a	в Уе	BLOCK B	BLOCK B Year-End Value of Asset	d sse	7						_	약 뮬	BLOCK C Type of Income	ON TO	т	j j		BLOCK D Amount of Income	<u>و</u>	BLOCK D	9 유	nc	m	(P)			BLOCK E Transaction
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··· <u>···</u>		None	\$1 - \$1,000	\$1,001 - \$15	\$15,001 - \$5	\$50,001 - \$1	\$100,001 - \$	\$250,001 - \$	\$500,001 - \$	\$1,000,001 -	\$5,000,001 -	\$25,000,001	Over \$50,000	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GA	EXCEPTED/	Other Type o	None	\$1 - \$200	\$201 – \$1,000	\$1,001 – \$2,50	\$2,501 - \$5,00	\$5,001 - \$15,0	\$15,001 - \$50	\$50,001 - \$10	\$100,001 - \$1 \$1,000,001 - \$	S1,000,001 - 3 Over \$5,000,0		
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