#### PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct and certain other "excepted trusts" need not 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. **EXEMPTION**—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? 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. If yes, complete and attach Schedule IV. IV. Did you, your spouse, or a dependent child purchase, sell If yes, complete and attach Schedule III. reportable asset worth more than \$1,000 at the end of the period? III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any lieu of paying you for a speech, appearance, or article in the II. Did any individual or organization make a donation to charity in Name: CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT **UNITED STATES HOUSE OF REPRESENTATIVES** reporting period? yes, complete and attach Schedule II. Report Status Fier Annual (May 15) House of Representatives Member of the U.S. Doozman State: District: 0 0 0 8 Amendment Yes Yes X Yes Yes X Yes Daytime Telephone: **2 Z** 8 ₹ ⊠ <u>₹</u> Officer or Employee an outside entity? If yes, complete and attach Schedule IX. reportable travel or reimbursements for travel in the reporting of filing in the current calendar year? VII. Did you, your spouse, or a dependent child receive any Did you have any reportable agreement or arrangement with If yes, complete and attach Schedule VIII. period (worth more than \$335 from one source): VIII. Did you hold any reportable positions on or before the date If yes, complete and attach Schedule VII If yes, complete and attach Schedule VI. reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? VI. Did you, your spouse, or a dependent child receive any For use by Members, officers, and employees appropriate schedule attached for each "Yes" response. Employing Office: Each question in this part must be answered and the Termination 202-225-4301 PM 3: 06 Form A Termination Date: HAND DELIVERED 30 days late. against anyone who files more than A \$200 penalty shall be assessed TAVE RESOURCE CENTER COTTLE WISHONS Yes Yes Yes Yes Yes <u>Z</u> <u>Z</u> ₹ |X <u>₹</u> × X <u>₹</u>

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#### SCHEDULE I—EARNED INCOME

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.

	Source	Type	Amount
	Keene State	Approved Teaching Fee	\$6,000
	State of Maryland	Legislative Pension	\$9,000
Liampies.	Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
	Ontario County Board of Education	spouse salary	N.
			10 10 10 10
		5 5 5	

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Pageof	
9	

# SCHEDULE II—PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. A green envelope for transmitting the list is included in each Member's filing package.

Source Association of American Associations, Washington DC	Activity	<b>Date</b> Feb. 2, 2008	Amount \$2,000

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JT Booznen-Hof 401-K JT Northwest Mutual Life	IT MBG Muni Bord Fun	IT AIM S.T Treasury	JT ARG Equity Fund	JT ABG Gov't Rond Fund		SP, SP Mega Corp. Stock  DC, Examples: Simon & Schuster	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 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  by (a) each asset held for investment or or income with a fair market voting \$1,000 at the end of the reporting and (b) any other asset or sources of income during the year. For rental property provide a complete address. Provide so f stocks and mutual funds (do not symbols). For all IHAs and other retirer (such as 401 (k) plans) that are self dire consisted to select the specific investment in which you have the power, evercised, to select the specific investment in the power and income information.
× ×	×	><	×		×	Indefinite	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  \$1,000,001 - \$5,000,000  \$5,000,001 - \$5,000,000  \$5,000,001 - \$5,000,000  \$5,000,001 - \$50,000,000  \$5,000,001 - \$50,000,000	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 N/A	×	×	×	×	×	X X Royalties	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST  Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	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 <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" it asset did not generate any income during calendar year.
X	><	><			×	×	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       ×	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 IHAs, 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.
		ا ا	S()	S(2*		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.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John Boozman Page.

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						2.2.2			Cotswalds Partnership	20	Ameritrade		_	$\sim$	٥	Pulaski Bank		BLOCK A  Asset and/or Income Source
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	L								 <u> </u>		$\times$	4				$\times$	\$1 – \$1,000	
										×		X	$\geq$	×	X		\$1,001 - \$15,000 O	
	<u> </u>																\$15,001 - \$50,000	\ <u>s</u>
																	\$50,001 ~ \$100,000 m	BLOCK B Year-End Value of Asset
																	\$100,001 - \$250,000 TI	BLOCK B Year-End
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	$\vdash$						 						<u> </u>	<del>                                     </del>			EXCEPTED/BLIND TRUST	Type Incor
									•	Z	7 **						Other Type of Income (Specify)	BLOCK C Type of Income
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																	\$1,001 - \$2,500 <	BLOCK D  Amount of Income
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	Γ	Π															\$5,001 <b>-</b> \$15,000 <b>S</b>	BLOCK D
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### **SCHEDULE IV— TRANSACTIONS**

Name John Poozman

Page, 2\_of\_

							JT ABB Equity Fund	JT ABG Equity Fund	JT ABG Equity Fund	JT ABG Equity Fund	Gov'T Band	JT ABG Gov't Bond Fund	Example: Mega Coporation C	SP, DC, JT Asset	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.	stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions	Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property,
															PURCHASE		of Tr
							X	X	X	X	×	X	×		SALE		Type of Transaction
															EXCHANGE	<del></del>	ction
							6-10-08	4-22-08	2-29-08	1-31-08	10-14-08	4-12-08	10-12-08		Quarterly, Quarterly, Monthly, or Bi-weekly, if applicable	(MO/DAY/YR)	Date
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#### **SCHEDULE V— LIABILITIES**

Name John Beozman

Page \_\_\_\_of\_\_

cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. 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 it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit

	JT		JT ,	)		
	ARVEST, Rogers, AR	Example: First Bank of Wilmington, Delaware	Creditor			
on Bawer Lake, AR	Share of partnership	Mortgage on 123 Main St., Dover, Del.	Type of Liability			
			\$15,000	8		
	×		\$50,000 <b>\$50,001</b> -	C D		
	• \	×	\$100,000	Ē	An	
			\$250,000 \$500,000	71	nount	
			\$500,001- \$1,000,000	ဝ	Amount of Liability	
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			\$25,000,001 \$50,000,000	<b>د</b>		
			Over \$50,000,000	ᄌ	L	

#### SCHEDULE VI— GIFTS

**Exclude:** Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$335 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	\$345

Name	
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Pageof	

## SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$335 received by the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor 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

**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 or were paid by you and reimbursed by the sponsor.

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

	Source	Date(s)	City of Departure—Destination— City of Return	Lodging? Food? (Y/N (Y/N		Was a Family Member Included?	Number of days not at sponsor's expense
Evamples	Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	Z	z	z	None
LAdinpics.	Roycroft Corporation	Aug. 6–11	DC—Los Angeles—Cleveland	Υ	~	Υ	2 Days
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organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any non profit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

zations); and positions solely of an honorary nature. Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organi-

Position

#### SCHEDULE IX—AGREEMENTS

government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of

Date	Parties To	Terms of Agreement