∑	nduct.	you have first consulted with the Committee on Standards of Official Conduct.	first consulted	they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on
₹	d trusts" need not Yes	spouse, or dependent child?	e on Standard	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?
S	ANSWER EACH OF THESE QUESTIONS))	T INFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
the onse.	stion in this part must be answered and the schedule attached for each "Yes" response.	Each question in this part must be answered and the appropriate schedule attached for each "Yes" respons	\ <u>\s</u>	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 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.
Ş ⊠	or before the date	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.	No No	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 No	d receive any in the reporting Yes e)?	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	No No	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.
× 5	d receive any gregating more Yes	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	₹	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.
		SE QUESTIONS	OF THESE	PRELIMINARY INFORMATION - ANSWER EACH
assessed les more	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	ree Termination Date:	Employee	Status House of Representatives District: Report Annual (May 17, 2010) Amendment
] M	2010 HAY I 4 PM 3: 38 OFFICE OF THE CONTY J.S. HOUSE LA PEDERESCRIP	elephone: 242 225 4872	Daytime	Michael 1
Page 1 of	HAND Pag DELIVERED	Form A For use by Members, officers, and employees	MENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT

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Identify (a) each asset held for investment or pro-Asset and/or Income Source BLOCK A

exceeding \$1,000 at the end of the reporting peri-Block A. For additional information, see the of its activities, and its geographic location in od, and (b) any other asset or sources of income duction of income with a fair market value instruction booklet. traded, state the name of the business, the nature period. For an active business that is not publicly account and its value at the end of the reporting not self-directed, name the institution holding the reporting threshold. For retirement plans that are each asset in the account that exceeds the provide the value and income information on plans (such as 401(k) plans) that are self directed ticker symbols). For **all IRAs** and other retirement names of stocks and mutual funds (do not use land, provide a complete address. Provide full income during the year. For rental property or which generated more than \$200 in "unearned" *not exercised*, to select the specific investments) (i.e., plans in which you have the power, even if Þ

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It only a

asset is sold, portion of an

please indicate

there is rental income); any debt owed to you by If you so choose, you may indicate that an asset Government retirement programs. cial interest in or income derived from U.S less in personal savings accounts; and any finanparent, or sibling; any deposits totalling \$5,000 or your spouse, or by you or your spouse's child

Exclude: Your personal residence(s) (unless

optional column on the far left dependent child (DC) or is jointly held (JT), in the or income source is that of your spouse (SP) or 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

EXCEPTED/BLIND TRUST

(Specify: For Example, Partnership Income or Farm Income)

example. See below for as follows:

(S) (partial)

Other Type of Income

Over \$50,000,000

NONE

RENT

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

Over \$5,000,000

\$100,001 - \$1,000,000

\$1,000,001 - \$5,000,000

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DIVIDENDS

INTEREST

CAPITAL GAINS

SP,

SP

Mega Corp. Stock Simon & Schuster

1st Bank of Paducah, KY Accounts

Indefinite

 \times

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Royalties

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(partial)

X

Amorica

X

×

DC, |Examples

Value of Asset BLOCK B

reporting year. If you use a valuation please specify the method used method other than fair market value, Indicate value of asset at close of

"None generated income, the value should be year and is included only because it If an asset was sold during the reporting

ate any income during calendar year

Dividends and interest, even if reinnot allow you to choose specific investments, you may write "NA." For retirement plans or accounts that do Check all columns that apply. For Check "None" if asset did not genervested, should be listed as income. ing the appropriate box below. indicate the type of income by checkall other assets including all IRAs,

Type of Income BLOCK C

or generated Check "None" if no income was earned vested, should be listed as income Dividends and interest, even if reinchecking the appropriate box below. indicate the category of income by For all other assets, including all IRAs, ments, you may write "NA" for income. not allow you to choose specific invest-For retirement plans or accounts that do

Amount of Income

BLOCK D exceeding Transaction \$1,000 in exchanges (E) purchases (P) Indicate if the reporting year. sales (S), or asset had BLOCK E

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Contribution

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