Yes No	hild	ome, transactions, or liabilities of a spouse or dependent child	sets, "unearned" inc	Exemptions Have you excluded from this report any other assets, "unearned" income, transactions, or because they meet all three tests for exemption?	
Yes No 🗸	pted dent	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?	wed by the Committe led from this report d	Trusts- Details regarding "Qualified Blind Trusts" approunds trusts need not be disclosed. Have you exclude thild?	
SNC	STIO	TION - ANSWER EACH OF THESE QUE	JST INFORMA	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS	ī
		schedule attached for each "Yes" response		If yes, complete and attach Schedule V.	
the appropriate	d and t	Each question in this part must be answered and the appropriate	Yes V No	Did you, your spouse, or a dependent child have any reportable liability V. (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 V		7
	,	If yes, complete and attach Schedule VIII.		If yes, complete and attach Schedule III.	
the Yes No V	ling in th	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes No		
		If yes, complete and attach Schedule VII.		If yes, complete and attach Schedule II.	}
el or Yes No	ble travel	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$305 from one source)?	Yes No V	Did any individual or organization make a donation to charity in lieu of paying li. 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.	
e Yes No	xle gift in therwise	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$305 and not otherwise exempt)?	Yes 🗌 No 🗸	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 in more from any source in the reporting period?	-,
		QUESTIONS	OF THESE	PRELIMINARY INFORMATION ANSWER EACH	اح
	iate.	on	Termination	Type ( ) Annual (May 15)	
more than 30 days	more	Termination Date:		Report	7
be assessed against	be as	Employee		<i>(</i> 0	
A \$200 penalty shall IV	A \$2	Officer Or Employing Office:	0 0	Filer Member of the U.S. State: FL	
(Office Use Only)	) (C	(Daytime Telephone)		(Full Name)	
2008 MAY 15 PH 2: 10	2008 M	202-225-4035		John L. Mica	
EGISLATIVE RESOURCE CENTLS	EGISLA				
		nbers, officers, and	YEAR 2007	FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007	TI /
Page 1 of 4 TANU UELIVERE		FORM A Page 1 of 4	TATIVES	INITED STATES HOUSE OF BEDDESENTATIVES	_7

The

SCHEDULE III
- ASSETS A
ND "UNEAR
NED" INCOME

that of your spouse (SP) or dependent child (DC) or is jointly held (JT) in the optional column on the far left. 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 that is not publicly traded, state the name of the business, the nature of and its value at the end of the reporting period. For an active business plans that are not self-directed, name the institution holding the account in the account that exceeds the reporting threshold. For retirement 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 than \$200 in "unearned" income during the year. For rental property or and (b) any other assets or sources of income which generated more f 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. information, see the instruction booklet. 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 mutual funds (do not use ticker symbols). For all IRAs and other land, provide a complete address. Provide full names of stocks and Identify (a) each asset held for investment or production of income with Asset and/or Income Source Park, FL 305 E Capitol St SE, Wash. 2195 Via Tuscany, Winter Park First Commercial Bank, Winter Commerce National Bank & 1305 S Atlantic Ave, Unit 130 Trust, Winter Park, FL DC, 50% interest rental unit Cocoa Beach, Fl Units 2, 4, 5 & two garage units 15 3rd Street NE Wash. DC, \$1,000,000 \$500,001 -\$15,000 \$1,001 -\$500,000 \$250,001 \$5,000,000 \$1,000,001 \$1,000,000 \$500,000 \$250,001 -\$500,001 the method used. If an value, please specify other than fair market valuation method year. If you use a at close of reporting the value should be it is generated income Included only because asset was sold and is Value of Asset Year-End BLOCK B Name John L. Mica RENT RENT None, personal block. (For example: apply. Check "None" if Check all columns that INTEREST INTEREST residence None, personal residence Partnership income or a brief description in this categories, specify the than one of the listed calendar year. If other any income during the asset did not generate type of income by writing Type of Income BLOCK C NONE \$15,001 - \$50,000 \$15,001 - \$50,000 \$201 - \$1,000 \$5,001 - \$15,000 NONE category of income by other assets, indicate the For retirement plans or "None" if no income was listed as income. Check if reinvested, should be box below. Dividends, even checking the appropriate "NA" for income. For all investments, you may write you to choose specific accounts that do not allow Amount of Income BLOCK D exceeding \$1,000 in exchanges (E) (P), sales (S), or Indicate if asset Transaction reporting year. had purchases BLOCK E Page 2 of 4

SCHEDULE III - ASSETS AND "UNEARNED" INCOME  $\vdash$ Fed Credit Union Wright Patman Congressional FL, Time Deposit (IRA) Wachovia Bank, Winter Park, Rental, units 8B, 9B, Maitland, Park Lake Woods Condo Metropolitan Life Annuity Blowing Rock, NC Lot 21 & 22, Chetola Estates, \$500,001 -\$1,000,000 \$50,001 -\$100,000 \$100,001 -\$250,000 \$1 - \$1,000 \$250,000 \$100,001 -Name John L. Mica RENT None reinvested residence None, personal INTEREST INTEREST NONE NONE \$1 - \$200 \$5,001 - \$15,000 \$2,501 - \$5,000 Page 3 of 4

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Name John L. Mica

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 cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. 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

	SP, DC,
Washington Mutual Savings	Creditor
Mortgage on Units 8B&9B, Park Lake Woods Condominium, Maitland FL	Type of Liability
\$15,001 - \$50,000	Amount of Liability