	more than 30 days	Termination Date:				Report
	be assessed against		Employee	District: 05	House of Representative	Status
	U.S. HOUSE OF REPRESENTATIVES A \$200 penalty shall	Employing Office: U.S	Officer Or	State: OH		Filer
Du	Office Use Only)	(Daytime Telephone)			(Full Name)	
	2012 HAY 15 AM 9: 24	202-225-6405			Robert Edward Latta	
	LEGISLATIVE RESOURCE CENTER	; <del>-</del>				
C	IANU UELIVEX	For use by Members, officers, and employees HAND DELIVERED	For use by I	RE STATEMENT	CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT	CALEN
7		FORM A Page 1 of 8	FOR	RESENTATIVES	UNITED STATES HOUSE OF REPRESENTATIVES	UNITE

Type

Annual (May 15)

Amendment

Termination

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	schedule attached for each "Yes" response.				If yes, complete and attach Schedule V.	
appropriate	Each question in this part must be answered and the appropriate		Yes   No 🗸	Yes	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	Did you have any reportable agreement or arrangement with an outside IX. entity?		Yes No	Yes ✓	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting	₹ .
	If yes, complete and attach Schedule VIII.				If yes, complete and attach Schedule III.	
Yes   No	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	~	Yes 🗸 No 🗌	Yes 🗸	Did you, your spouse, or a dependent child receive "unearned" income of III. more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the and of the period?	≡
	If yes, complete and attach Schedule VII.				If yes, complete and attach Schedule II.	
Yes 🗸 No	Did you, your spouse, or a dependent child receive any reportable travel VII. or relimbursements for travel in the reporting period (worth more than		Yes No	Yes	Did any individual or organization make a donation to charity in lieu of II. paying 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	Old you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise		Yes 🗸 No 🗌	Yes ⊌	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	
	UESTIONS	E Q	THES	유	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	פ

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EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics 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?

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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 Ethics.

Exemptions-

Trusts-

## **SCHEDULE I - EARNED INCOME**

Name Robert Edward Latta

Page 2 of 8

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

<b>\$7,000.</b>		
Source	Туре	Amount
Bowling Green State University	Spouse Salary	N/A
Bowling Green State University Foundation Spouse Salary	Spouse Salary	N/A
Depauw University	Spouse Salary	N/A
Farmers and Merchants State Bank	Spouse Salary	N/A

SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Robert Edward Latta	dward Latta		Page 3 of 8
	BLOCK A	BLOCK B	вгоск с	BLOCK D	BLOCK E
ASS Identify (a) es a fair market and (b) any o generated m	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 reportable asset or sources of income which generated more than \$200 in "unearmed" income during the year.	Year-End Value of Asset at close of reporting year. If you use a valuation method other	Type of income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that	Amount of income For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income forces as Afrika plans or	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E)
Provide com symbols.) For all IRAs a self-directed exercised, to asset held in retirement ac	Provide complete 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), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the inestitution halding the account and its value at the end of the	than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	generate tax-deferred income (such as 401(k)) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset	"None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check	reporting year.
For rental or other address.	For rental or other real property held for investment, provide a complete address.		period.	earned or generated.	
For an owner publically tra	For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A.				
Exclude: Yo	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting				
JT	Fidelity Asset Manager 50%	\$50,001 - \$100,000	DIVIDENDS/CAPI TAL GAINS	\$1,001 - \$2,500	יד
JT	Fidelity Equity Income II	\$100,001 - \$250,000	DIVIDENDS	\$2,500 - \$5,000	ס
JT	Fidelity Contrafund	\$15,001 - \$50,000	DIVIDENDS/INTE REST	\$1 - \$200	
JT	Fidelity Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Fidelity Puritan	\$50,001 - \$100,000	DIVIDENDS/CAPI TAL GAINS	\$1,001 - \$2,500	ס
JT	Fidelity Low Priced Stock	\$100,001 - \$250,000	DIVIDENDS/CAPI TAL GAINS	\$1,001 - \$2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME <u>ا</u> SP SP SP SP SP SP  $\exists$ DC2 DC1 SP Fidelity VIP Equity Income Port I SVC Bank, Inc. Stock Vanguard 500 Index Fund Fidelity VIP Growth Portfolio Farmers and Merchants State Fidelity Puritan Fidelity Puritan Fidelity Growth and Income ING TrowePrc Divrsd MdCp Gr Portfolio I ING Index Plus MidCap ING MFS Total Return Portfolic Admiral Fidelity Blue Chip Fidelity Value Fidelity Puritan Fidelity Equity Income II \$1,001 -\$15,000 \$15,001 -\$50,000 \$15,001 -\$50,000 \$1,001 -\$15,000 \$1,001 -\$15,000 \$15,001 -\$50,000 \$1,001 -\$15,000 \$1,001 -\$15,000 \$1,001 -\$15,000 \$15,001 -\$50,000 \$15,001 -\$50,000 \$100,000 \$100,000 \$100,001 -\$50,001 -\$50,001 -\$250,000 Name Robert Edward Latta DIVIDENDS DIVIDENDS DIVIDENDS DIVIDENDS DIVIDENDS DIVIDENDS DIVIDENDS **DIVIDENDS/CAPI** TAL GAINS **DIVIDENDS/CAPI** DIVIDENDS/CAPI DIVIDENDS/CAPI DIVIDENDS DIVIDENDS DIVIDENDS TAL GAINS TAL GAINS TAL GAINS \$1 - \$200 \$1 - \$200 \$201 - \$1,000 \$201 - \$1,000 \$201 - \$1,000 \$1,001 - \$2,500 \$201 - \$1,000 \$201 - \$1,000 \$201 - \$1,000 \$1,001 - \$2,500 \$1 - \$200 \$201 - \$1,000 \$201 - \$1,000 \$201 - \$1,000 σ T ס U Page 4 of 8

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<b>EARNED</b> "
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SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name	Robert Edward Latta		Page 5 of 8
DC1	REFCORP ZERO	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	S(part)
DC2	US Treasury Bonds and Notes	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	
JT	Huntington National Bank account	\$50,001 - \$100,000	INTEREST	\$1,001 - \$2,500	
JT	Huntington National Bank	\$50,001 - \$100,000	INTEREST	\$1,001 - \$2,500	
	Huntington National Bank	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
JT	Fifth Third Bank account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
JT	Fifth Third Bank account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
7	Fifth Third Bank account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
JT	Fifth Third Bank account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
JT	Fifth Third Bank account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
JT	Fifth Third Bank account	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
JT	Farmers and Merchants State Bank account	\$15,001 - \$50,000	INTEREST	NONE	
TL	Farmers and Merchants State Bank account	\$15,001 - \$50,000	INTEREST	NONE	
JT	First Federal Bank account	\$15,001 - \$50,000	INTEREST	NONE	

SCHEDL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME		Name Robert Edward Latta		Page 6 of 8
JT	First Federal Bank account	\$15,001 - \$50,000	INTEREST	NONE	
Ţ	PNC Bank account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
T	PNC Bank account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
SP	Huntington National Bank account	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	Ohio Public Employees Retirement System-deferred benefits plan not self-directed	\$100,001 - \$250,000	other-pension	NONE	
<del>Q</del> P	Ohio Public Employees Retirement System-deferred benefits plan not self-directed	\$250,001 - \$500,000	other-pension	NONE	

## **SCHEDULE IV - TRANSACTIONS**

Name Robert Edward Latta

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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. 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

SP,	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
JT	Fidelity Asset Manager 50%	ס	A/N	monthly	\$1,001 - \$15,000
JT	Fidelity Equity Income II	ס	N/A	monthly	\$1,001 - \$15,000
JT	Fidelity Puritan	ס	N/A	monthly	\$1,001 - \$15,000
	Fidelity Puritan	ס	N/A	monthly	\$1,001 - \$15,000
DC1	Fidelity Puritan	ס	N/A	monthly	\$1,001 - \$15,000
DC2	Fidelity Puritan	ס	N/A	monthly	\$1,001 - \$15,000
SP	ING Index Plus MidCap Portfolio I	ס	N/A	monthly	\$1,001 - \$15,000
DC1	REFCORP ZERO	S(part)	No	October 15, 2011	\$1,001 - \$15,000

## SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Robert Edward Latta

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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 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 Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 received by you, 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

Foundation January 27-29, 2011 of Alberta, October of Canada 17-18,	Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family ng? Food? Member Included? N) (Y/N) (Y/N)	Days not at sponsor's expense
October Detroit, MI-Edmonton, Y Y N 17-18, Alberta, Fort McMurray,	Heritage Foundation	January 27-29, 2011	Washington, DC-Los Angeles, CA	٧	Υ	Z	none
2011	Province of Alberta, Embassy of Canada (MECEA)	October 17-18, 2011	Detroit, MI-Edmonton, Alberta, Fort McMurray, Alberta	~	~	Z	none