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L ₹ X	child because Yes	sactions, or liabilities of a spouse or dependent child because	l" income, trans	other assets, "unearned	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of they meet all three tests for exemption?
No No	I trusts" need not Yes	of Official Conduct and certain other "excepted trusts" need not pouse, or dependent child?	on standards	proved by the Committees of such a trust benefiti	TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct and be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent chi
SNOI.	EACH OF THESE QUESTIONS	- ANSWER	T INFOR	ENT, OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
and the response.	tion in this part must be answered and the schedule attached for each "Yes" response.	Each question in this part i appropriate schedule attach	S	reportable Yes	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.
∐ ĕ ⊠	arrangement with Yes	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	\ <u>\$</u>	e, sell, eding yes	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.
∑	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.	₹	inearned" if any he period? Yes	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.
∑	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 \$305 from one source)? If yes, complete and attach Schedule VII.	₹	o charity in in the 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.
□ No X	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 \$305 and not otherwise exempt)? If yes, complete and attach Schedule VI.	N _S	salaries or period? Yes	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.
		E QUESTIONS	OF THESE	R EACH	PRELIMINARY INFORMATION — A
Il be assessed files more than	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	r Employing Office: e Termination Date:	Officer or Employee		Status House of Representatives District Report Annual (May 15)
So FA	2009 MAR 16 PM 3: 50 2009 MAR 16 PM 3: 50 CFFICH OF THE CLERK OFFICH OF REMRESSENTATIVES	814 - 589 - 5-2 41 (Daylime Telephone)		ekson Name)	JChN E Peter
ILLEGIBLE	POSTMARK ILLEGIBLE	Form A For use by Members, officers, and employees		SENTATIVES IENT	UNITED STATES HOUSE OF REPRESENTATIVES 2008 FINANCIAL DISCLOSURE STATEMENT For The Calendar Year Reporting Period

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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.

DC, Examples: ş 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 there is rental income); any debt owed to you by If you so choose, you may indicate that an asset Government retirement programs. parent, or sibling; any deposits totalling \$5,000 or your spouse, or by you or your spouse's child, Exclude: Your personal residence(s) (unless Block A. For additional information, of its activities, and its geographic location in account and its value at the end of the reporting provide the income during the year. For rental property or exceeding \$1,000 at the end of the reporting perinterest ess in personal savings accounts; any financial instruction booklet. traded, state the name of the business, the nature period. For an active business that is not publicly not selt-directed, name the institution holding the reporting threshold. For retirement plans that are each asset in the account that exceeds the not exercised, to select the specific investments) (i.e., plans in which you have the power, even if 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 which generated more than \$200 in "unearned" od, and (b) any other asset or sources of income dentify (a) each asset held for investment or pro-PRuden ra or YY **4401** Asset and/or Income Source ŝ or income derived value and income information on Simon & Schuster Mega Corp. Stock 1st Bank of Paducah, KY Accounts **BLOCK A** Fone fair market value rusor. rom ていり see the ⊳ None generated income, the value should be year and is included only because it If an asset was sold during the reporting please specify the method used method other than fair market value Indicate value of asset at close "None." reporting year. If you use a valuation \$1 - \$1,000 Ù Indefinite \$1,001 - \$15,000 Ö Ò \$15,001 - \$50,000 Value of Asset m \$50,001 - \$100,000 BLOCK B . **71**1. \$100,001 - \$250,000 Ø \$250,001 - \$500,000 Ť \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 ب \$5,000,001 - \$25,000,000 $\overline{}$ \$25,000,001 - \$50,000,000 <u>o</u> Over \$50,000,000 NONE Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA." For ate any income during calendar year Check "None" if asset did not gener vested, should be listed as income. Dividends and interest, even if reining the appropriate box below indicate the type of income by checkall other assets including all IRAs, DIVIDENDS × RENT Type of Income INTEREST BLOCK C CAPITAL GAINS EXCEPTED/BLIND TRUST Royalties Other Type of Income (Specify: For Example, Partnership Income or Farm Income) None checking the appropriate box below For all other assets, including all IRAs, Dividends and interest, even if reinindicate the category of income by ments, you may write "NA" for income. Check "None" if no income was received. vested, should be listed as income not allow you to choose specific invest-For retirement plans or accounts that do \$1 - \$200 ٠... \$201 ~ \$1,000 ≡ Amount of Income \$1,001 - \$2,500 \$ BLOCK D < \$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 × \succeq Over \$5,000,000 purchases (P) example. as follows: asset is sold, portion of an If only a \$1000 in exceeding exchanges (E) sales (S), or asset had Indicate if the fransaction See below for please indicate reporting year. (S) (partial) BLOCK E (partial) m io io

----- ASSETS AND "UNEARNED" INCOME

Name John & Petekson Page 3 of

Continuation Sheet (if needed)		Name C	Jenson a lei choor
BLOCK A Asset and/or Income Source	BLOCK B Year-End	вьоск с Туре	BLOCK D Amount of Income
	Vai	of Income	
S.P.			X X
DC,	00 000 0,000 00,000	<u></u>	
JT	00,000 00,000 250,00 500,00 1,000, \$5,00	INS BLINO	00 00 000 0,000 0,000 000,00
	31,000 1 - \$15 31 - \$5 31 - \$5 301 - \$1 301 - \$ 3001 - \$ 30,001 - \$ 30,001 - \$ 30,001 - \$ 30,001 - \$ 30,001 - \$	ENDS	200 - \$1,000 - \$2,50 1 - \$15,0 1 - \$15,0 1 - \$10,001 - \$1 0,001 - \$1
	\$1,00 \$15,0 \$50,0 \$100, \$250, \$500, \$1,00	NONE DIVID RENT INTEL CAPI' EXCE	\$1,00 \$2,50 \$5,00 \$15,00 \$100,0 \$1,00
prodential Merkin		×	×
لم	X		×
Yem Petton World	X	*	*
2	*	*	*
12 AN XAMPAN		*	X
AMOR OFFIC		×	×
THER CREEK	X	*	
AYA ENTERPRIS	X	×	*
AXA ENTER ORUS	X	X	
The top comment			
JC PNC C STock	X		2
TIPLY FAPM MEER			
oil control so			
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SCHEDULE VIII—POSITIONS

Name John E Peterson Page 4 of 4

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, camp or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities; and positions solely of an honorary nature.

		Two bisesso	Position	
		OIL COOKRY SOPPLY	Name of Organization	

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an 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	