	pted Yes No	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	Trusts- Details regarding "Qualified Blind Trusts" appro trusts" need not be disclosed. Have you exclud child?	
	STIONS	ATION ANSWER EACH OF THESE QUESTIONS	JST INFORMA	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	ا ـــ ا
		schedule attached for each "Yes" response		If yes, complete and attach Schedule V.	_
	d and the appropriate	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 V	Did you have any reportable agreement or arrangement with an outside IX. entity?	Yes V No	Did you, your spouse, or dependent child purchase, sell, or exchange any IV. 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.	
	iling in the Yes ✔ No ☐	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes 🗸 No	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 end of the period?	
		If yes, complete and attach Schedule VII.	· · ! -	If yes, complete and attach Schedule II.	1
	ble travel or han \$305 Yes 🗸 No 🗌	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 🗸	Did any individual or organization make a donation to charity in lieu of paying II. 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.	
	otherwise Yes No V	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., sataries or fees) of \$200 l. or more from any source in the reporting period?	
			OF THESE QUESTIONS	PRELIMINARY INFORMATION - ANSWER EACH	11
	late.	tion	☐ Termination	Type Annual (May 15)	
	more than 30 days	Termination Date:		Report	
	A \$200 penalty shall be assessed against anyone who files	Officer Or Employing Office: Employee		Filer Member of the U.S. State: NJ Status House of Representatives District: 10	
79((Office Use Only)	(Daytime Telephone)		(Full Name)	
5<	2108 JUN 18 AM 10: 16			Donald M. Payne	ı
	THE RESOURCE CENTER				—
		For use by Members, officers, and employees	YEAR 2007	FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007	
ב	ייליאט טררוארו	FORM A Page 1 of 8	TATIVES	SEVITATIVES HOUSE OF REPRESENTATIVES	
5					į

Exemptions— 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?

Yes

8 **⟨**

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name

Page 2 of 2

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 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 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 \$305 received by you,

opouse of appointment of many marketing in the principal many of the formation by the	county macpenaen					
					Was a Family	Days not at
1)	Point of Departure	Lodging?	Food?	ng? Food? Member Included?	sponsor's
Source	Date(s)	DestinationPoint of Return	(Y/N)	(Y/N)	(Y/N)	expense
The Aspen Institute	November	Newark-Liberia-Costa Rica-	~	~	~	none
	27-	Newark				
-	December				-	-
	2					