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 ₹	Yes	abilities of a spouse or dependent child consulted with the Committee on	" income "yes" u	ssets, "unearned 1? Do not answei	Have you excluded from this report any other assets, "unearned" income, transactions, or lidecause they meet all three tests for exemption? Do not answer "yes" unless you have first Standards of Official Conduct.	Exemptions Have you excluded from this re because they meet all three tes Standards of Official Conduct.	Ex
□ No €	Yes	al Conduct and certain other "excepted nefiting you, your spouse, or dependent	nittee or ort detail	oved by the Com ded from this rep	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Offici trusts" need not be disclosed. Have you excluded from this report details of such a trust be child?	Trusts Details regardin trusts" need no child?	Trı
	Š	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS	MATIC	UST INFOR	DEPENDENT, OR TR	USION OF SPOUSE,	EXCL
		schedule attached for each "Yes" response.			ile V.	If yes, complete and attach Schedule V	lf ye
propriate	the ap	Each question in this part must be answered and the appropriate		Yes No V	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	Did you, your spouse, or a dependent chilo than \$10,000) during the reporting period?	V. than
		If yes, complete and attach Schedule IX.			ile IV.	If yes, complete and attach Schedule IV	If yes,
No C	Yes	Did you have any reportable agreement or arrangement with an outside entity?	<u> </u>	Yes 🗸 No	d purchase, sell, or exchange any ing \$1,000 during the reporting	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting	N Did repo
		If yes, complete and attach Schedule VIII.		•	d≎ He III.	more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	mor If ye
No C	ਜ਼ Yes	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?		Yes V No	nild receive "unearned" income of ar hold any reportable asset worth	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	III. mor
		If yes, complete and attach Schedule VII.			ile II.	If yes, complete and attach Schedule II.	lf ye
	or Yes	Did you, your spouse, or a dependent child receive any reportable travel or relimbursements for travel in the reporting period (worth more than \$335 from one source)?	¥	yes ☐ No ☑	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?	Did any individual or organization make a donation to charity in you for a speech, appearance, or article in the reporting period?	II. you
		If yes, complete and attach Schedule VI.			ile.	If yes, complete and attach Schedule I.	If ye
□ No ✓	Yes	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)?		Yes 🗸 No	Did you or your spouse have "earned" Income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	Did you or your spouse have "earned" Income (e. or more from any source in the reporting period?	l. Did
		QUESTIONS		H OF THESE	ION ANSWER EACH	PRELIMINARY INFORMATION	PREL
,		late.	Termination	☐ Termi	5) Amendment	e Annual (May 15)	Type
more than 30 days	e than	Termination Date: more than 30 day					Report
be assessed against	ISSESS(Employee		esentatives District: 28		Status
A \$200 penalty shall	100 per	Employing Office:	ງ Officer Or		U.S. State: NY	< .	Filer
(Office Use Only)	Office ((Daytime Telephone)			(Full Name)		
111111111111111111111111111111111111111	-7 #	585 223 7519 2009 MAY - 7 AM II: 44			Louise M Slaughter	_	
ATIVE RESOURCE CENTU	E 25301	SAGA BESS.					
		For use by Members, officers, and employees		MENT	CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT	NDAR YEAR 2008 FINANC	CALE
		FORM A Page 1 of 6	\dashv	TATIVES	UNITED STATES HOUSE OF REPRESENTATIVES	ED STATES HOU	

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SCHEDULE I - EARNED INCOME

Name Louise M Slaughter

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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.

Source	Туре	Amount
NY State Legislative Pension	Legislative Pension	\$8,810

		_	I			
(IRA)Vanguard Growth & Income Fund	(IRA)Fidelity Independence Fund	(IRA)Fidelity Growth & Income Fund	JT Congressional Federal Credit Union	JT Eastman Savings and Loan (CD's & Savings)	JT Fidelity Cash Reserves	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 assets or sources of income which generated more than \$200 in "unearned" income during the year. For rental property or land, provide a complete address. Provide full 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 and income information on each asset in the account that exceeds the reporting threshold. For retirement plans that are not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For additional information, see the instruction booklet. Exclude: Your personal residence(s) (unless there is rental income); any deposits totaling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.
\$15,001 - \$50,000	\$15,001 - \$50,000	\$1,001 - \$15,000	\$1 - \$1,000	\$50,001 - \$100,000	\$100,001 - \$250,000	Year-End Value of Asset at close of reporting year. If you use a valuation method other 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 "Nome."
DIVIDENDS/CAPI TAL GAINS	DIVIDENDS/CAPI TAL GAINS	DIVIDENDS/CAPI TAL GAINS	INTEREST	INTEREST	INTEREST	Type of income Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA". For all other assets including all IRAs, indicate the type of income by checking the appropriate box below. Dividends and Interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during the calendar year.
\$1,001 - \$2,500	\$201 - \$1,000	\$1 - \$200	\$1 - \$200	\$15,001 - \$50,000	\$2,501 - \$5,000	Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, including all IRAs, indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.
	S(part)					Transaction Iransaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.

SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Louise M Slaughter	Slaughter		Page 4 of 6
SP	(IRA)Fidelity Growth& Income	\$100,001 - \$250,000	DIVIDENDS/CAPI TAL GAINS	\$2,501 - \$5,000	
SP	(IRA)Fidelity Growth Company Fund	\$100,001 - \$250,000	DIVIDENDS/CAPI TAL GAINS	\$1 - \$200	
SP	(IRA) Fidelity Independence Fund	\$15,001 - \$50,000	DIVIDENDS/CAPI TAL GAINS	\$1,001 - \$2,500	
SP	(IRA) Fidelity Magellan Fund	\$15,001 - \$50,000	DIVIDENDS/CAPI TAL GAINS	\$2,501 - \$5,000	·
SP	(IRA)Mutual Qualified Class Z Fund	\$250,001 - \$500,000	DIVIDENDS/CAPI TAL GAINS	\$15,001 - \$50,000	
SP	401K Eastman Kodak SIP	None	INTEREST	\$15,001 - \$50,000	တ
SP	(IRA)CD 400 Eastman Savings & Loan	\$250,001 - \$500,000	INTEREST	\$5,001 - \$15,000	PS(part)
JT	Citigroup	\$1,001 - \$15,000	None	NONE	
TT	Oppenheimer Growth Fund A	\$1,001 - \$15,000	None	NONE	;
TL	Fidelity Independence Fund	\$1,001 - \$15,000	None	NONE	סי
	Procter & Gamble	\$100,001 - \$250,000	DIVIDENDS/CAPI TAL GAINS	\$5,001 - \$15,000	
	Clorox	\$1,001 - \$15,000	DIVIDENDS/CAPI TAL GAINS	\$201 - \$1,000	
	JM Smucker	\$1,001 - \$15,000	DIVIDENDS/CAPI TAL GAINS	\$201 - \$1,000	

SCHEDULE IV - TRANSACTIONS

Name Louise M Slaughter

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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. 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 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,

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
ЯР	(IRA)CD 400 Eastman Savings & Loan	P	12-9=08	\$250,001 - \$500,000
Sp	(IRA)CD 400 Eastman Savings & Loan	S(part)	12-31-08	\$50,001 - \$100,000
- "] 	(IRA)Fidelity Independence Fund	S(part)	12-26-08	\$1,001 - \$15,000
Ţ	Fidelity Independence Fund	ס	12-26-08	\$1,001 - \$15,000
SP	401K Eastman Kodak SIP	S(part)	12-9-08	\$250,001 - \$500,000
SP	401K Eastman Kodak SIP	S(part)	12-9-08	\$15,001 - \$50,000

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FOOTNOTES	ËS	Name Louise M Slaughter	Page 6 of 6
Number	Section / Schedule	Footnote	This note refers to the following item
	Schedule IV	Rqd Min Dist from IRA	401K Eastman Kodak SIP