epted Yes No 🗸	income, transactions, or liabilities of a spouse or dependent child	Exemptions Have you excluded from this report any other assets, "unearned" income, transactions, or
	regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent	Trusts— 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?
STIONS	IATION ANSWER EACH OF THESE QUE	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS
	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	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?	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting Yes V No period?
Yes V No	VIII. current calendar year? If yes, complete and attach Schedule VIII.	more than \$200 in the reporting period or hold any reportable asset worth Yes V No If yes, complete and attach Schedule III.
	If yes, complete and attach Schedule VII.	If yes, complete and attach Schedule II.
than \$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)?	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? Yes No 💟
	omplete a	If yes, complete and attach Schedule I.
otherwise Yes No	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)?	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?
	OF THESE QUESTIONS	IJæ,
late.	ation	Type Annual (May 15) Amendment
more than 30 days	Termination Date:	
A \$200 penalty shall VES be assessed against anyone who files	Officer Or Employing Office: Employee	Filer Member of the U.S. State: MO Status District: 09
(Office Use Only)	(Daytime Telephone)	(Full Name)
2008 MAY 15 AM 10: 05 AVA	202-225-2956	Kenny Charles Hulshof
EGISLATIVE SESSIBLE CENTES		
AND DELIVERE	FORM A Page 1 of 10 HAND DELIVERED For use by Members, officers, and employees	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007

. SCHEDULE I - EARNED INCOME

Name Kenny Charles Hulshof

Page 2 of 10

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.

Dave Weldon for Congress Source Music Performance Type \$1,000 **Amount**

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SP A	SP A	SP A	SP S	SP A	SP A	If you so choose that of your spou in the optional co	Exclude: Your podebt owed to you parent or sibling savings accounts	Asset Identify (a) each a fair market vall and (b) any other than \$200 in "un land, provide a comutual funds (do retirement plans in which you have investments), provide a count that is not public that is not public its activities, and its value at it that is not public its activities, and in see.	SCHEDULE
American Century, KC, MO Value	American Century, KC, MO Ultra	American Century, KC, MO Prime Money Market	American Century, KC, MO Life Sciences	American Century, KC, MO Growth	American Century, KC, MO Global Growth	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.	Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent or sibling: any deposits totaling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.	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.	SCHEDULE III - ASSETS AND "UNEARNED" INCOME
\$15,001 - \$50,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000 DIVIDENDS	\$1,001 - \$15,000 DIVIDENDS	\$1,001 - \$15,000			Year-End 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 "None."	Name Kenny Charles Hulsho
DIVIDENDS	DIVIDENDS	DIVIDENDS	DIVIDENDS	DIVIDENDS	DIVIDENDS			BLOCK C Type of Income Check all columns that apply. Check "None" if asset did not generate any income during the calendar year. If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	arles Hulshof
NONE	\$1,001 - \$2,500	\$201 - \$1,000	\$201 - \$1,000	\$1,001 - \$2,500	\$1,001 - \$2,500			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, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income. Check "None" if no income was earned.	
							-	BLOCK E Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.	Page 3 of 10

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SCHEDL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name	Kenny Charles Hulshof		Page 5 of 10
TL	Great River Soy Processing Coop, Sikeston, MO	\$1,050	DIVIDENDS	NONE	
J]	IRA, Citizens Bank, Charleston, MO	\$1,001 - \$15,000	INTEREST; Other - Mandatory Distribution	\$1,001 - \$2,500	
J	KCH Hulshof Farms Real Property: Equipment	\$1,000,001 - \$5,000,000	RENT - Other- Farm Income	\$100,001 - \$1,000,000	
JT	KCH Hulshof Farms, 3550 W. 220th Road, Charleston, MO - Rental House	\$50,001 - \$100,000	RENT	\$2,501 - \$5,000	
JT	MFA Oil Company, East Prarie, MO	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
ΤL	MO States Employees Retirement System	\$15,001 - \$50,000	DIVIDENDS	NONE	
J	Progressive Farm Credit, Charleston, MO	\$15,001 - \$50,000	INTEREST	\$2,501 - \$5,000	
JT	Prudential Financial	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
7	Savings Bonds	\$1 - \$1,000	INTEREST	NONE	
dS dS	Vanguard (Formerly Citistreet), Valley Forge, PA Explorer Fund (Formerly AIM Small Cap Growth)	\$1 - \$1,000	DIVIDENDS	NONE	
Sp i	Vanguard (Formerly Citistreet), Valley Forge, PA Market Index (Formerly SSGA Money Market)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Vanguard (Formerly Citistreet), Valley Forge, PA Pimco Total Return Admin	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	

Sp
Vanguard (Formerly Citistreet), Valley Forge, PA Stable Value (Formerly Dreyfus S&P Index)
Vanguard (Formerly Citistreet), Valley Forge, PA Stable Value (Formerly Dreyfus S&P Index)
Formerly Citistreet), e, PA Stable Value reyfus S&P Index)
"INCOME
*1 - \$1,000
Name Kenny Charles Hulshof \$1,000 DIVIDENDS
\$1 - \$200
Page 6 of 10

, SCHEDULE IV - TRANSACTIONS

Name Kenny Charles Hulshof

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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 or series of transactions exceeded \$1,000. Include transactions that resulted in a loss. 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. Provide a brief SP 는 D 유 Primevest Financial, St. Cloud, MN Asset S **Transaction** Type of 10-28-07 Date \$1-\$1,000 **Amount of Transaction**

· SCHEDULE V - LIABILITIES

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

Name Kenny Charles Hulshof

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SP, DC,			
JT	Creditor	Type of Liability	Amount of Liability
JT P	Progressive Farm Credit, Charleston, MO	Real Estate, Equipment Debt, Operating Loan	\$100,001 - \$250,000
JT C	Chase Visa Card	Credit Card	\$10,001 - \$15,000

. SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Kenny Charles Hulshof

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spouse or dependent child that is totally independent of his or her relationship to you. sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under 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, 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 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

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Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family g? Food? Member Included? (Y/N) (Y/N)	Days not at sponsor's expense
National Biodiesel Conference	Feb. 4-5	St. Louis - San Antonio - DC	Y	Υ	Z	2 Days
National Ethanol Conference	Feb. 20-21	Feb. 20-21 St. Louis - Tuscon - St. Louis	~	≺	Z	2 Days
National Farmers Union Conference	Mar. 2-3	DC - Orlando - St. Louis	~	~	Z	2 Days
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SCHEDULE VIII - POSITIONS

Name Kenny Charles Hulshof

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

	Owner	Position	
	KCH Hulshof Farms	Name of Organization	