| | late. | | ☐ Termination | ☐ Amendment | Annual (May 15) | Type |
|--------------|-------------------------|---|---------------|--------------------|---|--------|
| | more than 30 days | Termination Date: | | | | Donna |
| | anyone who files | | ciripioyee | tives District: 07 | House of Representatives | Status |
| | A \$200 penalty shall | Employing Office: | ☐ Officer Or | State: NJ | Member of the U.S. | Filer |
| | U(Office-Use Only) | (Daytime Telephone) | | (Full Name) | (Fu | |
| 7% | | 732-248-4178 | | LEONARD LANCE | LEONA | .= |
|)// 85 :1 | 2010 JUN 17 PM 3:58 | | | | | |
| 1 | TO STATE BESOURCE PURCH | For use by Members, officers, and employees | | SCLOSURE STATE | CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT | CALEND |
| | | FORM A Page 1 of 8 | TATIVES | F REPRESEN | INITED STATES HOUSE OF REPRESENTATIVES | TINITE |
| リカカフ | ロボーと行び行う | | | | | , |

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PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS If yes, complete and attach Schedule V. Did you, your spouse, or a dependent child have any reportable Hability (more than \$10,000) during the reporting period? Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting 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 you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Exemptions-If yes, complete and attach Schedule IV. If yes, complete and attach Schedule 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 If yes, complete and attach Schedule II. If yes, complete and attach Schedule I. nore than \$1,000 at the end of the period? 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 Standards of Official Conduct. 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 ěs S Yes ¥es □ ¥es ₹8 3 Š S <u>z</u> 2 3 <u>S</u> ≤ VIII. current calendar year? **≦** ᆽ 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)? Old you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335) Each question in this part must be answered and the appropriate If yes, complete and attach Schedule IX. Did you have any reportable agreement or arrangement with an outside If yes, complete and attach Schedule VIII. schedule attached for each "Yes" response. Did you hold any reportable positions on or before the date of filing in the If yes, complete and attach Schedule VII. If yes, complete and attach Schedule VI. from one source) Yes Yes Yes. Yes Yes <u>S</u>

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SCHEDULE I - EARNED INCOME

Name LEONARD LANCE

Page 2 of 6

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.

| 41,000 | | |
|-------------|---------------------|----------|
| Source | Туре | Amount |
| State of NJ | Legislative Pension | \$21,187 |
| | | |

SCHEDULE II - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Name

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. A green envelope for transmitting the list is included in each Member's filing package. Employees may request a green envelope from the Clerk or use a plain envelope that is appropriately labeled.

| Source | |
|----------|--|
| Activity | |
| Date | |
| Amount | |

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| SCHEDUL | SCHEDULE III - ASSETS AND "UNEARNED" INCOME | Name LEONARD LANCE | DLANCE | Pege | 3 cf 6 |
|---|---|---|--|--|---|
| | BLOCK A | BLOCK B | вгоск с | ВГОСК D | BLOCK E |
| Identify (a) ea a fair market and (b) any o than \$200 in land, provide mutual funds retirements bin which you investments) in the accour that are not a lits value at the not publicly the activities, and information, activities, and information, according according according according according according according activities and information. | 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 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. 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. | 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." | 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. | 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, inctuding 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. | Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year. |
| If you so cho that of your s the optional | ose, you may indicate that an asset or income source is pouse (SP) or dependent child (DC) or is jointly held (JT), in column on the far left. | | | | |
| ĽI | Bank of America | \$1 - \$1,000 | INTEREST | \$1 - \$200 | |
| | Bank of America MMA | \$50,001 - \$100,000 | INTEREST | \$1,001 - \$2,500 | |
| | Bank fo America Common Stock (BAC) | \$15,001 - \$50,000 | DIVIDENDS | \$1 - \$200 | |
| SP | Fidelity Investments | \$1 - \$1,000 | DIVIDENDS | \$1 - \$200 | |
| SP | JP Morgan Retirement Plan | \$250,001 - \$500,000 | INTEREST | \$15,001 - \$50,000 | |
| SP | JP Morgan Chase 401k | \$500,001 - \$1,000,000 | DIVIDENDS/Capit at Gains | \$50,001 - \$100,000 | |

| SCHEDUL | SCHEDULE III - ASSETS AND "UNEARNED" INCOME | Name LEONARD LANCE | D LANCE | Peg | Pege 4 of 6 |
|---------|---|----------------------------|------------|---------------------|-------------|
| SP | Vanguard IRA | \$50,001 - \$100,000 | DIVIDENDS | \$15,001 - \$50,000 | |
| | Scottrade MMA | \$15,001 - \$50,000 | DIVIDENDS | \$1 - \$200 | |
| | UBS Financial Services | \$500,001 - \$1,000,000 | DIVIDENDS | \$5,001 - \$15,000 | PS(part) |
| | Vanguard IRA | \$100,001 - \$250,000 | SDIVIDENDS | \$15,001 - \$50,000 | |
| | Bank of America Checking | \$1,001 - \$15,000 | None | NONE | |
| | Office Building- 36 Center St Clinton NJ - 50% ownership | \$100,001 - \$250,000 | None | NONE | |
| | Estate of Mae Anderson | \$50,001 - \$100,000 | None | NONE | |
| | Estate of Wesley Lance | \$15,001 - \$50,000 | None | NONE | |

SCHEDULE IV - TRANSACTIONS

Name LEONARD LANCE

Page 5 of 6

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 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.

| SP, DC, | Asset | Type of Transaction | Capital Gain in Excess of \$200? | Date | Amount of Transaction |
|------------|---------------------------------------|---------------------|----------------------------------|----------|-----------------------|
| | UBS Financial Services - Capital Loss | S(part) | No | 12/29/09 | \$0 |

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Name

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.

| Creditor Type of Liability |
|----------------------------|
|----------------------------|

T F F F Name

| Source Description Value | Report the source, a brief description, and the value of all gifts totaling more than \$335 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule. | TRANSIC |
|--------------------------|---|---------|
| ₹D | urce during ly ift rule | |

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name LEONARD LANCE Page 6 of 6

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 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 Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you, 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 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

| | Date(s) | in | Lodging? (Y/N) | Food? (Y/N) | Was a Family Lodging? Food? Member included? (Y/N) (Y/N) (Y/N) | sponsor's expense |
|--------------------------------------|-------------------|--------------------------|-------------------|----------------|--|-------------------|
| American Israel 8/Education Fund 8/9 | 8/1/09- 8/9/09 | EWR-Tel Aviv, Israel-EWR | Y | ~ | Y | None |

SCHEDULE VIII - POSITIONS

Name

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor,

| - | |
|----------------------|--|
| Position | representative, employee, or consultant of any corporeducational or other institution other than the United honorary nature; and positions listed on Schedule I. |
| Name of Organization | 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. |

SCHEDULE IX - AGREEMENTS

Name

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

| Date | Date Parties To | |
|------|-----------------|--------------------|
| Date | Parties To | Terms of Agreement |
| | | |

Hon. Leonard Lance - NJ-07 Statement of Underlying Assets Calendar Year 2009 Financial Disclosure Statement

| Candidate - UBS Financial Services - Underlying Assets | Asset Range |
|--|---------------------|
| American Funds Euro Pacific Growth | \$50,001-\$100,000 |
| FT Templeton Foreign Sm Co A | \$15,001-\$50,000 |
| FT Templeton Global Bond | \$15,001-\$50,000 |
| Ivy Global Natural Resources Fund | \$15,001-\$50,000 |
| JP Morgan Mid Cap Value | \$15,001-\$50,000 |
| Oppenheimer Developing Markets | \$15,001-\$50,000 |
| UBS Pace Intl Emerging Markets | \$1,001-\$15,000 |
| Alliance Bernstein Growth Fund of America | \$50,001-\$100,000 |
| American Funds Growth Fund of America | \$15,001-\$50,000 |
| American Funds Fundamental Investors | \$50,001-\$100,000 |
| American Funds Washington Mutual Investors | \$15,001-\$50,000 |
| Van Kempen Mid Growth Fund | \$15,001-\$50,000 |
| Keeley Small Cap Value Fund | \$15,001-\$50,000 |
| Eton Vance Large Cap Value Fund Class A | \$15,001-\$50,000 |
| Candidate - Vanguard IRA | Asset Range |
| Capital Opportunity Investment | \$15,001-\$50,000 |
| Emerging Markets Stock Index | \$1,001-\$15,000 |
| Energy Fund Admiral | \$50,001-\$100,000 |
| Precious Metals and Mining | \$15,001-\$50,000 |
| Primecap Fund Investor | \$1,001-\$15,000 |
| Windsor II Fund Investment | \$1,001-\$15,000 |
| Spouse - JP MorganChase 401(k) | Asset Range |
| JP Morgan Chase Common Stock | \$250,001-\$500,000 |
| JPMC ST Fixed Income Fund | \$100,001-\$250,000 |
| JPMC Stable Value Fund | \$50,001-\$100,000 |
| JPMC Growth and Income Fund | \$50,001-\$100,000 |
| JPMC S&P 500 Index Fund | \$50,001-\$100,000 |
| JPMC Small Cap Core Fund | \$50,001-\$100,000 |
| JPMC Inti Large Cap Core Fund | \$15,001-\$50,000 |

Hon. Leonard Lance - NJ-07 Statement of Underlying Assets - Page 2 Calendar Year 2009 Financial Disclosure Statement

| Contident Frank of Modern Land | Candidate Share |
|--|-------------------|
| Candidate - Estate of Wesley L. Lance | Asset Range |
| Candidate has 50% share in all underlying assets still | |
| undistributed at this time | |
| MetLife Inc Stock | \$1-\$1,000 |
| Bank of America Stock | \$15,001-\$50,000 |
| CorTS Trust for First Union Intl Capital I | \$1,001-\$15,000 |
| | Candidate Share |
| Candidate - Estate of Mae Anderson | Asset Range |
| Candidate has 50% share in all underlying assets still | |
| undistributed at this time, less fees dues Executor. | |
| Candidate is not the executor nor administrator. | |
| Scudder Mutual Fund | \$1,001-\$15,000 |
| Dreyfus Mutual Fund | \$1,001-\$15,000 |
| Putnam Mutual Fund | \$1,001-\$15,000 |
| Nuveen Mutual Fund | \$1,001-\$15,000 |
| ATT Common Stock | \$15,001-\$50,000 |
| Comcast Common Stock | \$1,001-\$15,000 |
| Qwest Common Stock | \$1-\$1,000 |
| Verizon Common Stock | \$1,001-\$15,000 |
| Vodaphone Common Stock | \$1,001-\$15,000 |
| Xcel Common Stock | \$1,001-\$15,000 |
| Fairpoint Communications | \$1-\$1,000 |