₹	child because Yes	nsactions, or liabilities of a spouse or dependent child because	d" income, tran	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities they meet all three tests for exemption?
× ×	trusts" need not Yes	s of Official Conduct and certain other "excepted to spouse, or dependent child?	e on standards ing you, your s	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?
NS	EACH OF THESE QUESTIONS	- ANSWER	T INFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
nd the ponse.	nust be answered an differ each "Yes" res	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	No No	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.
₹ <u>×</u>	irrangement with	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	No X	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.
8 ≿	r 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.	No	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.
No X	receive any the reporting Yes	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.	× ×	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	receive any egating 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 _O	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? Yes X
		SE QUESTIONS	OF THESE	PRELIMINARY INFORMATION — ANSWER EACH
e <i>assessed</i> s more than	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	or Employing Office: ee Termination JAN 2,2007	Officer or Employee	Status House of Representatives District: 22 Report Annual (May 15) Amendment
N. S.	2009 MAR - 6 PM 5: 20	7 (3/825 - 6783 (Daytime Telephone)		NICHOLAS V. LAMPSON
70	Vaisi ative resource certer			8008
HE	HAND DELIVERED	Form A For use by Members, officers, and employees		UNITED STATES HOUSE OF REPRESENTATIVES 2008 FINANCIAL DISCLOSURE STATEMENT For State Calendar Year Reporting Period

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Page 済	LAMBSON	~	Name NICHOLAS

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.

to put to come contain programme, and		Amount
Koon Otto	Approved Teaching Fee	\$6,000
	Legislative Pension	\$9,000
Examples: Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
BEAUMONT 1, S. D. BEAUMONT, TEXAS	SPOUSE SALARY	NA
TEXTS COUNTY & DISTRICT RETUREMENT SYSTEM	COUNTY PENSION	66,766

For payments to charity in lieu of honoraria, use Schedule II.

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SCHEDULE II—PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

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.

Conduct. A green envelope for transmitting the list is included in each Member's filing package.	filing package.		
Source	Activity	Daie	Amount
	Speech	Feb. 2, 2007	\$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2007	\$500
NONE			

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Asset and/or Income Source

으 instruction booklet. reporting threshold. For retirement plans that are provide the ticker symbols). For all IRAs and other retirement exceeding \$1,000 at the end of the reporting peri-od, and (b) any other asset or sources of income Block A. traded, state the name of the business, the nature period. For an active business that is not publicly account and its value at the end of the reporting not self-directed, name the institution holding the each asset in the account that exceeds the not exercised, to select the specific investments), plans (such as 401(k) plans) that are self directed names of stocks and mutual funds (do not use land, provide a complete address. Provide iuii income during the year. For rental property or which generated more than \$200 in "unearned" duction of income with a fair market value Identify (a) each asset held for investment or pro-(i.e., plans in which you have the power, even if its activities, and its geographic location For additional information, value and income information on see

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portion of an If only a reporting year.

ate any income during calendar year

parent, or sibling; any deposits totalling \$5,000 or Exclude: Your personal residence(s) Government retirement programs. interest in less in personal savings accounts; any financial your spouse, or by you or your spouse's child, there is rental income); any debt owed to you by or income derived trom (unless

or income source is that of your spouse (SP) optional column on the far left dependent child (DC) or is jointly held (JT), in the you so choose, you may indicate that an asset ٩

None

\$1 - \$1,000

\$1,001 - \$15,000

\$15,001 - \$50,000

\$50,001 - \$100,000

\$100,001 - \$250,000

\$250,001 - \$500,000

\$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000

\$25,000,001 - \$50,000,000

EXCEPTED/BLIND TRUST

Other Type of Income

* * 1

(Specify: For Example, Partnership Income or Farm Income)

example. See below for as follows: please indicate asset is sold,

(S) (partial)

Over \$50,000,000

NONE

RENT

None

\$1 - \$200

\$201 - \$1,000

\$1,001 - \$2,500

\$2,501 - \$5,000

\$5,001 - \$15,000

\$15,001 - \$50,000

\$50,001 + \$100,000

Over \$5,000,000

\$100,001 - \$1,000,000

\$1,000,001 - \$5,000,000

m w .a

DIVIDENDS

INTEREST

CAPITAL GAINS

Value of Asset **BLOCK B**

please specify the method used. method other than fair market value, reporting year. If you use a valuation Indicate value of asset at close 으

"None." generated income, the value should be If an asset was sold during the reporting year and is included only because it

Type of Income

investments, you may write "NA." For Check all columns that apply. For retirement plans or accounts that do Dividends and interest, even if relnall other assets including all IRAs, indicate the type of income by checknot allow you to choose specific appropriate how helow

BLOCK C

Check "None" if asset did not genervested, should be listed as income. Check "None" if no income was received vested, should be listed as income Dividends and interest, even if reinchecking the appropriate box below indicate the category of For all other assets, Including all IRAs, ments, you may write "NA" for income For retirement plans or accounts that do not allow you to choose specific investincome

BLOCK D

Amount of Income purchases (P), \$1000 in exceeding exchanges (E) sales (S), or asset had Transaction Indicate if the BLOCK E

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(partial)

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1st Bank of Paducah, KY Accounts

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7090 PRUTZMAN

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Examples

SP

Mega Corp. Stock Simon & Schuster

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MID-COUNTY TEACHERS

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Name NICHCLAS V. LAMPSON

Page 5 of 9

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Continuation Sheet (if needed)	BLOCK A Asset and/or Income Source						TEXAS COUNTY AND DISTACE	ALAMAS ELOBAL GARDITA	EXECON STOCK	LORD ASSEST	0, 6 \$ E STOCK	SMITH BARNEY MODEY MET														
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SCHEDULE IV— TRANSACTIONS

Name NICHCLAS V. LAMPSON

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Name HICHCIAS V. LAMBSON

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cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. 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 it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit

						Amou	nt of	Amount of Liability	Ţ		
S P			8	0	D	-CI	41			0	0
되 <u></u>	Creditor	Type of Liability	\$1,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,001- \$250,000	\$250,001- \$500,000	\$500,001- \$1,000,000	\$1,000,001- \$5,000,000	\$5,000,001- \$25,000,000	\$25,000,000 \$50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	*		·	×					_
	GMAS MORTERGE (PARKMERDOW)	MORTGREE ON 10.38 PARKAGE	₹							VI.	``
77	BEHLLMONT TEXAS	Denungui tx	>	-	_	-	-	_	_	-	-
	CAPITAL ONE BLUK	MORTGREE ON 7090 PRUTEME		<u> </u>							
47	BEAMMONT TEXAS	DE ALLANCHE TR		>	_	 	_		<u> </u>	-	_
}	AMERY BRUK OF TEXAS	249 LIFK ON PARKACERDOW	<u></u>								
7.0	foursand, reparts	BENGMONT, TERMS	>			_	_		_	-	-
}	MID COUNTY TEACHERS CRED. W.	PERSONAL LOAN SECURED	٧,				<u>.</u>				
7	SCOURTAND TOXAS	SPACE ALLES	>	<u> </u>	_	-		_	_	-	_
4	MONA MASTERICARD	CREDIT CARD	<	-							
	CAPITAL CHE BANK		1	_		_	_		L	_	_

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than \$305 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 \$122 or less need not be added towards the \$305 disclosure threshold.

 Note: The gift rule (House Rule 25, clause 5) prohibit	Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.	
 Source	Description	Value
 Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	\$325
 NoNE		
		*

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SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$305 received by the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor 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

Exclude: Travel-related expenses provided by tederal, 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

spouse or dependent child that is totally independent of his or her relationship to you.

					l	
Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N	Food? (Y/N	Was a Family Member Included? (Y/N)	Number of days not at sponsor's expense
	Mar. 2	DCChicagoDC	2	z	Z	None
Roycroft Corporation	Aug. 6–11	DC—Los Angeles—Cleveland	Υ	Υ	~	2 Days
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Name Vicholas V. Lawyson

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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, compensated 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.

Position	Name of Organization
	K)ONC

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
	NONE	