Yes No 🗸		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.	sets, "unearned" ir Do not answer "y	Exemptions Have you excluded from this report any other assets, "unearned" income, transactions, or libecause they meet all three tests for exemption? Do not answer "yes" unless you have first Standards of Official Conduct.	
No C	oted Yes	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?	ved by the Commit		T
	STIONS	ATION - ANSWER EACH OF THESE QUESTIONS	ST INFORM	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWE	اس [
				If yes, complete and attach Schedule V.	Γ
ppropriate	and the ap	Each question in this part must be answered and the appropriate	Yes No	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.	Τ
88 No	outside Yes	Did you have any reportable agreement or arrangement with an outside IX. entity?	Yes No	Did you, your spouse, or dependent child purchase, selt, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?	.⋜
		if yes, complete and attach Schedule VIII.		If yes, complete and attach Schedule III.	Т
* * * *	ling in the Yes	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Y98	Did you, your spouse, or a dependent child receive "unearmed" 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 VII.	<i>!</i>	If yes, complete and attach Schedule II.	
8 	He travel or Han \$335 Yes	Vit. you, your spouse, or a dependent critic receive any reportable travel or Vit. reimbursements for travel in the reporting period (worth more than \$335 from one source)?	Yes No	you for a speech, appearance, or article in the reporting period?	<u>;=</u>
		If yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.	
S No	le gift in therwise Yes	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$335 and not otherwise exempts)	Yes □ No ✓	Did you or your spouse have "earmed" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	-
		THESE QUESTIONS	유	PRELIMINARY INFORMATION ANSWER EACH	70
more than 30 days	more than	_	☐ Termination	Type (Annual (May 15) Amendment	
VIIO IIIes	anyone who mes	Termination Date:			
A \$200 penalty shall be assessed against	A \$200 pe	Employee		ntatives District:	
STRUCTURE OF NETWESTAL WILLIAM	0 6. 1.000	Officer Or Complexing Office:			T
Use Only) STAR MC	(Office	(Daytime Telephone)		(Full Name)	
7009 AUG 13 PM 1: 04	¥ 5007	202-225-5901	JR.	LEON (LYNN) ACTON WESTMORELAND, JR.	
THE SPURCE CENTER					
HAND BELLYERED		FORM A Page 1 of 3 For use by Members, officers, and employees	TATIVES MENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT	
777					7

Ass identify (a) e	BLOCK A Asset and/or income Source (a) each asset held for investment or production	n of Income with	Var.	BLOCK B Year-End Value of Asset
t value a tother asset t value a tother asset to value a complex (do no lians (su have the), providing that a rent see the at the a set the a set the see the ublichy to ubling; and its see the ur perso o you by bling; an ounts; and ounts; an ounts; an ounts; and ounts; an	ASSOT ANG/OF 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 sibiling; 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),		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."	e should be be listed as Check "Nor not generated in come by a control of the con
IRA Fidelity Growth Fund	vth Fund	\$1,001 - \$15,000		DIVIDENDS
IRA F	IRA Fidelity International	\$1,001 - \$15,000		DIVIDENDS
	Glengrove Development, Inc. (at 50% ownership)	\$250,001 \$500,000		1 - INTEREST
SP	165 Partners LLC (at 20% ownership)	\$1,000,001 \$5,000,000	8 -)01 - Partnership
	State of Georgia (not self- directed)	\$15,001 - \$50,000	,	_

SCHEDULE V - LIABILITIES

Name LEON (LYNN) ACTON WESTMORELAND, JR.

Page 3 of 3

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.

ŞP	စ္	SP,
Bank of Coweta, GA	Bank of Coweta, GA	Creditor
Mortgage on 165 Partners LLC, acreage in Russell, Co., AL (at 20% ownership	Mortgage on Glengrove Development, Inc. Lots in Hamilton Lakes Subdivision - LaGrange, GA (at 50% ownership)	Type of Liability
\$1,000,001 - \$5,000,000	\$100,001 - \$250,000	Amount of Liability