	more than 30 days late.	Termination Date:	Terr Termination	Amendment	Annual (May 15)	Report Type
Ø	A \$200 penalty shall be assessed against anvone who files	Employing Office:	Officer Or Employee	State: ME District: 02	Member of the U.S. House of Representatives	Filer Status
[N	2010 11.27 1 1 Pr 2: 1.5	202-225-6306 (Daytime Telephone)		ICHAUD e)	MICHAEL H. MICHAUD (Full Name)	
	DELIVERED	FORM A Page 1 of 7 For use by Members, officers, and employees		REPRESENTATIVO SURE STATEMENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT	UNITED
	JAZC					

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

	₹ <	Yes		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.	incom "yes" u	arned" answer	, "unc not a	19 Do	Exemptions— Have you excluded from this report any other a because they meet all three tests for exemption Standards of Official Conduct.	
ζ.	No 🗸	Yes		n Standards of Official Conduct and certain other "excepted ils of such a trust benefiting you, your spouse, or dependent	ıittee o rt detai	e Comr ห่ร repo	by the	oved	Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Of trusts" need not be disclosed. Have you excluded from this report details of such a trust child?	
		S	UESTION	ON ANSWER EACH OF THESE QUESTIONS	MTA!	FORN	Z	USI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSW	贝
			nse.	schedule attached for each "Yes" response.					If yes, complete and attach Schedule V.	
ਰ e	opria	e appro	ered and the	Each question in this part must be answered and the appropriate		No No		re Yes	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	<u>.</u> <
				If yes, complete and attach Schedule IX.					If yes, complete and attach Schedule IV.	
₹ <	Z	Yes	th an outside	Did you have any reportable agreement or arrangement with an outside entity?	≅	N _O	Yes ✔ No	Yes		₹
				If yes, complete and attach Schedule VIII.					If yes, complete and attach Schedule III.	
8 ⟨	z	Yes	e of filing in the	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	S	o O	Yes ✔ No	Yes	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 \$400 at the code state period?	≓
				from one source)? If yes, complete and attach Schedule VII.		•			If yes, complete and attach Schedule II.	
J	、 No	Yes	ortable travel or ore than \$335	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335	≨	e S		g Yes	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?	=
			: : : :	exempt)? If yes, complete and attach Schedule VI.		; 			If yes, complete and attach Schedule I.	
<u> </u>	No	Yes	ortable gift in not otherwise	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	.≤	No <		Yes	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	-

HAND

Ameriprise One Financial Accounts as follows: Money Market	6.5 Acres of Land, Medway, ME	111 Main Street, East Millinocket, ME	109 Main Street, East Millinocket, ME	Michaud & Michaud Partnership, 50% interest, properties as follows:	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.
\$1,001 - \$15,000	\$1,001 - \$15,000	\$50,001 - \$100,000	\$50,001 - \$100,000				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 "None."
INTEREST	None	RENT	RENT				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 - \$200	NONE	\$5,001 - \$15,000	\$5,001 - \$15,000				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.
	74						BLOCK E Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.

SCHEDULE III - ASSETS AND "UNEARNED" INCOME	
Name MICHAEL H. MICHAUD	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name MICHAEL H. MICHAUD	. H. MICHAUD		Page 3 of 7
PIMCO Total Return	\$15,001 - \$50,000	DIVIDENDS/CAPI TAL GAINS	\$1,001 - \$2,500	
RVS Cash Management - A (previously shown as Allianz Global Investors)	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
Ameriprise Variable Universal Life as follows:				
Fixed Account	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
RVS VP Div Eq Inc Fd	\$1 - \$1,000	DIVIDENDS/CAPI TAL GAINS	\$201 - \$1,000	S(part)
RVS PART VE SM CP V	\$1 - \$1,000	CAPITAL GAINS	\$201 - \$1,000	S(part)
Fidelity VIP III MCP 2	\$1 - \$1,000	CAPITAL GAINS	\$201 - \$1,000	S(part)
Fidelity VIP Oversea2	\$1 - \$1,000	CAPITAL GAINS	\$201 - \$1,000	S(part)
Lazard Ret Intl Eq	\$1 - \$1,000	CAPITAL GAINS	\$201 - \$1,000	S(part)
MFS Investors Growth	\$1 - \$1,000	CAPITAL GAINS	\$201 - \$1,000	S(part)
MFS VIT New Discovery	\$1 - \$1,000	CAPITAL GAINS	\$201 - \$1,000	S(part)
Pioneer Equity Income	\$1 - \$1,000	CAPITAL GAINS	\$201 - \$1,000	S(part)
WFAdv VT Opportunity	\$1 - \$1,000	CAPITAL GAINS	\$201 - \$1,000	S(part)
All Bern VPS Intl Va	\$1 - \$1,000	CAPITAL GAINS	\$201 - \$1,000	PS(part)

SCHEDULE III - ASSETS AND "UNEARNED" INCOME Name MICHAEL H. MICHAUD Page 4 of 7

East Mill Federal Credit Union	Maine State Retirement (not self-directed)	M&M Partnership, 26 Greenwood, Augusta, ME (50% interest)	J Hancock High Yield - A	Tem Global Bond - A	PIMCO Total Return - D	John Hancock GLB OPPS - A	Fid Adv High Inc Adv - A	Col Value & Restruct - A	Col Marsico 21st Cent - A	Midcap Value A	IRA Ameriprise as follows:	Disc Alloc Port Md A
Credit Union	ement (not	, 26 usta, ME	Yield - A	nd - A	eturn - D	3LB OPPS - A	c Adv - A	struct - A	st Cent - A		s follows:	Md A
\$1,001	\$15,001 - \$50,000	\$50,001 - \$100,000	\$1,001	\$1,001	\$1,001	\$1,001	\$1,001	\$1,001	\$15,001 \$50,000	\$1,001		\$15,001 \$50,000
\$1,001 - \$15,000	67)1 -)00	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	37 -	\$1,001 - \$15,000		00 -
INTEREST	Retirement/N/A	RENT	DIVIDENDS	DIVIDENDS	CAPITAL GAINS	DIVIDENDS	DIVIDENDS/CAPI TAL GAINS	DIVIDENDS	None	DIVIDENDS/CAPI TAL GAINS		DIVIDENDS
\$201 - \$1,000	N/A	\$2,501 - \$5,000	\$1,001 - \$2,500	\$1 - \$200	\$201 - \$1,000	\$1 - \$200	\$201 - \$1,000	\$1 - \$200	NONE	\$1 - \$200		\$201 - \$1,000
									ס			ס

SCHEDULE IV - TRANSACTIONS

Name MICHAEL H. MICHAUD

Page 5 of 7

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.

CB			Canital		
DC,	Asset	Type of Transaction	Gain in Excess of \$200?	Date	Amount of Transaction
	RVS VP Div Eq Inc Fd	S(part)	Yes	8-20-09	\$1,001 - \$15,000
	RVS PART VE SM CP V	S(part)	Yes	8-20-09	\$1,001 - \$15,000
	Fidelity VIP III MCP 2	S(part)	Yes	8-20-09	\$1,001 - \$15,000
	Fidelity VIP Oversea2	S(part)	Yes	8-20-09	\$1,001 - \$15,000
	Lazard Ret Intl Eq	S(part)	Yes	2-3-09	\$1,001 - \$15,000
	MFS investors Growth	S(part)	Yes	2-20-09	\$1,001 - \$15,000
	MFS VIT New Discovery	S(part)	Yes	2-20-29	\$1,001 - \$15,000
-	Pioneer Equity Income	S(part)	Yes	2-13-09	\$1,001 - \$15,000
i	WFAdv VT Opportunity	S(part)	Yes	8-20-09	\$1,001 - \$15,000
	All Bern VPS Intl Va	ס ר :	N/A	2-13-09	\$1,001 - \$15,000
	All Bern VPS Intl VA	S(part)	Yes	8-20-09	\$1,001 - \$15,000

SCHEDULE IV - TRANSACTIONS

Name MICHAEL H. MICHAUD

Page 6 of 7

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.

Type of Capital Gain in Excess of \$200?
8-21-09

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name MICHAEL H. MICHAUD

Page 7 of 7

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

None	Z	~	Y	Mar 14-15 Portland, ME - Hilton Head, SC - Washington, DC	Mar 14-15	Forest Resorces Association
Days not at sponsor's expense	Was a Family ng? Food? Member Included? (Y/N) (Y/N)	Food? (Y/N)	Lodgir (Y/N	Point of Departure DestinationPoint of Return	Date(s)	Source