⊗	hild because Yes	sactions, or liabilities of a spouse or dependent ch	" income, trans	EXEMPTION —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?
] No ⊠	rusts" need not Yes	of Official Conduct and certain other "excepted trusts" need not pouse, or dependent child?	on standards	TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependen
SNC	THESE QUESTIC	MATION — ANSWER EACH OF THESE QUESTIONS	TINFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
and the sponse.	nust be answered a d for each "Yes" re	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	□ N _S	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.
 ⊗ ⊠	rrangement with Yes	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	∑ S	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.
<u>₹</u>	before the date Yes	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.		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.
≥ 	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.	□ S	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 No	eceive 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	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 If yes, complete and attach Schedule I.
		E QUESTIONS	OF THES	PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS
be assessed es more than	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	Employing Office: Termination Date:	Officer or Employee	Filer Member of the U.S. State: N3 Status House of Representatives District: 12 Report Annual (May 15) Amendment
* Ro	14 PH 3: 48	609.737.2343700 14 PN 3: 48 (Daytime Telephone)		Rush D. Holt
uir		Form A For use by Members, officers, and employees		UNITED STATES HOUSE OF REPRESENTATIVES 2008 FINANCIAL DISCLOSURE STATEMENT For 2007 Calendar Year Reporting Period

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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 hay (such as National Guard or Beserve hay), tederal retirement programs, and bene	benefits received under the Social Security Act	curity Act
	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
	Legislative Pension	\$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
University Medical Center at Conceton	spouso salary	NA

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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.

	-		
Source	Activity	Date	Amount
	Speech	Feb. 2, 2007	\$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2007	\$500
New Jusey Council for The Humanoton	speech	40	11000
0 0		-	

Rental Cabins (Ausable Forts	IT Rental House (Pennington W)	IT Congres Credit Union	JT Citizens Bank	IT Bank Amorica Act	IT Wachovia Bank Acts	JT 1st Bank of Paducah, KY Accounts	1 —	SP, SP Mega Corp. Stock	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 publicity 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 you or your spouse's child, parent, or sibling; any deposits totalling \$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 optional column on the far left.	BLOCK A 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 asset 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 IFAs 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).
2	<u>S</u>	<u>`</u>		0		ळ			None Sparing S	
	×	× .	×		×	×	Indefinite	×	\$1 - \$1,000	BLOCK B Value of Asset Indicate 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 during the reporting year and is included only because it generated income, the value should be "None."
×									\$250,001 ~ \$500,000	BLOCK B Value of Asset value of asset at close of year. If you use a valuation other than fair market value, pecify the method used. et was sold during the reporting is included only because it d income, the value should be
X	X	×	×	×	×	×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	BLOCK C Type of Income Check all columns that apply. For retirement plans or accounts that do not allow you to choose experific 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 calendar year.
		×	×	×		-	ies		None –	
X	×				X	×	×	×	\$1 - \$200 = \$201 - \$1,000	BLOCK D 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 received.
								S (partial)	\$1,000,001 - \$5,000,000	BLOCK E Transaction Indicate if the asset had for income. for income income below. Transaction Indicate if the asset had purchases (P), or below. The saincome exceeding as received. \$1000 in reporting year.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Name Rush D. Holt

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9		SP,	DC,					50	9.8	98	SP	95	93	5 P	93							
Asset and/or Income Source				Varioused Windsor Returned		CREF Stock Fund	h Lan	Fidelity Hagellan FRA		#1	u Contradund		_	hal h		(Some all			Shar on	International County I	- China yang hang in	
		A	None									_	-	_	_	\vdash	 	+-	+	=		
		8	\$1 - \$1,000		T	T											1	_	1	\neg	Ī	
		C	\$1,001 - \$15,000		_	†—										†			\neg	1	1	
<	<	0	\$15,001 - \$50,000			†		×		-				×	-			_	十	\dashv	1	
≅ ≺	Value of Asset	ш	\$50,001 - \$100,000			 						×				 	1	1-		_	1	_
BLOCK B Year-End	0	711	\$100,001 - \$250,000	X	X	×	. ×		×		×		×					1	7	\exists	7	
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nd B	SS	I.	\$500,001 - \$1,000,000															\top		1		_
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1			\$25,000,001 - \$50,000,000				7									1		1			Ī	
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BLOCK of Incol	줎	IST	EXCEPTED/BLIND TRUST		├─	 						-				+-	+		$\neg \uparrow$		\dashv	
C	ome		Other Type of Income (Specify)												Farm	Mance						
			None														$\prod_{i=1}^{n}$					
			\$1 - \$200											<u> </u>								
		≡	\$201 \$1,000		<u> </u>	<u> </u>		<u> </u>		<u> </u>				×.			<u> </u>					
<u> </u>			\$1,001 - \$2,500				×					X										
큐		<	\$2,501 - \$5,000	1	<u> </u>	<u> </u>		X			<u> </u>	<u></u>			<u> </u>	<u> </u>						
BLOCK D		≤	\$5,001 - \$15,000	100	×	×			X					<u> </u>	X							
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BLOCK D Amount of Income		≦	\$50,001 \$100,000	!	<u>L</u>	<u> </u>																
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- 11		×	\$1,000,001 - \$5,000,000		_	<u> </u>				_												ĺ
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BLOCK E		g, p	m oo :																			•

Name Rush D. Holt Page of G

SCHEDULE IV— TRANSACTIONS				<u></u>	6			8					
Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting year of any real property,	of Tr	Type of Transaction	ion	Date	}		Amount		of Tra	Transaction	tion	}	
stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions				(MO/DAY/YR)	w	0	0		ار	I	-		⊼
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.	PURCHASE	SALE	EXCHANGE	Quarterly, Monthly, or Bi-weekly, if applicable	\$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 \$25,000,001- \$50,000,000	Over \$50,000,000
SP, DC, JT Asset											+-		
Example: Mega Coporation C		×		10-12-07		×	-			-	┞	<u> </u>	
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SCHEDULE V- LIABILITIES

Name Rush D. +lalt

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Report lit during th business cards) or	Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured business in which you own an interest; and liabilities owed to a spouse, or the child, parent, or sibling of your cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.	eduring the reporting period by you, your spouse, or dependent child. Mark the highest amount owed inless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a period, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit ceeded \$10,000.	use, or nobiles, spous	depe , hous e. Rep	ehold oort re	child. furnit ivolvi	. Mark ure, o <i>ng ch</i>	the harapple	nighes liances <i>accou</i>	it amo s; liabi <i>ints</i> (i	ilities (wed of a edit
						Amo	Amount of Liability	Liab	ility			
SP,			8	ဂ	0	т	75	ຸ ດ	, =	00	77-6	o ×
J DC	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	\$25,000,00 \$50,000,00	Over \$50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				×					v	
IT	Wells Fargo Bank	Mortupage 89 A Old Hawkey Rd				×						
JT	Wells Fango Bank	Hortgage 273 Pennington A.H.A.	4) 			×					
17	Wachovia Bank	Home equity Logar prince to M		ļ		}	×					
				}		ļ ļ	-					
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SCHEDULE VI — GIFTS

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. 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.

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
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SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. 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 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 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

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

								Aspen Institute		Examples: Chicago Chamber of Commerce	Source
							5/28-6/5	2/21-425	Aug. 6–11	Mar. 2	Date(s)
_							Newbork, Slovenia	Newatk. Son Tuan Priort	DC—Los Angeles—Cleveland	DC—Chicago—DC	City of Departure—Destination— City of Return
						,	· Y	γ	Υ	Z	Lodging? (Y/N
							~	7	~	z	Food?
						,	\	γ	Υ	Z	Was a Family Member Included? (Y/N)
						(2 days	None	2 Days	None	Number of days not at sponsor's expense

SCHEDULE VIII—POSITIONS

Name RUSH D. 401+

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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

	11	ll lt	sartant to proof	Position
	Planned Parenthood of Mercer Area	Family & Childrens Services of Central NJ	Mc Couter Theater	Name of Organization

SCHEDULE IX—AGREEMENTS

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
			na	Parties To
				Terms of Agreement