Š	ecause Yes	sactions, or liabilities of a spouse or dependent child because	" income, trans	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities they meet all three tests for exemption?
₹ X	need not Yes	of Official Conduct and certain other "excepted trusts" pouse, or dependent child?	on standards	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?
S	IESE QUESTION	MATION — ANSWER EACH OF THESE QUESTIONS	TINFORI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
the onse.	be answered and reach "Yes" response	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	₹	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.
X	ement with	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	NS NS	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>	re 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.
S S	e any sporting 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.	No 🗶	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	e any g 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.	No No	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
		E QUESTIONS	OF THESE	PRELIMINARY INFORMATION — ANSWER EACH
assessed nore than	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	Employing Office: Termination Date:	Officer or Employee	Status Member of the U.S. State: 54 House of Representatives District: 54 Type Annual (May 15) Amendment
	2000 DEC 12 RV 10: 17	203/333-5779 (Daytime Telephone)		OKISTOPICK SHAYS
	HAND DELIVERED	Form A For use by Members, officers, and employees		2008 FINANCIAL DISCLOSURE STATEMENT For The Calendar Year Reporting Period 3008
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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 pay (such as National Guard or Reserve pay), federal retirement programs, and henefits received under the Social Security Act.

Source Am	Type	Amount
Vann Ohan	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
U.S. Department of Education	Spoose Salary	r/a
Connection Teachers Refiguent Persion	Upprint seconds	Na
Connecticut State Employee Retirement	State 9014 Rest. 2 039,2	2039,28

	ST Schit Patrian	57 Roples Bank	51 HSBC ,	ST Wills Forgo Eschow			SP SP Mega Corp. Stock	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 spouse's child, parent, or sibling; any deposits totalling \$5,000 or less in personal savings accounts; any financial interest in or income acrived 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.	(i.e., plans in which you have the power, even if not exercised, to select the specific investments).		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"	Asset and/or Income Source	BLOCK A
中国 (日本) (日本) (日本) (日本) (日本) (日本) (日本) (日本)	では、 では、 では、 では、 では、 では、 では、 では、	2	本をかける。 本をかける。 では、またのでは、 は、またのでは、 は、またのでは、 できた。 できたた。 できたた。 できた。 できたた。 できたた。 できた。 できたた。 をきた。	で で で で で で で で で で で で で で で で で で で		Indefinite	Web	None \$1-\$1,000 \$1,001 - \$15,000 \$50,001 - \$50,000 \$250,001 - \$500,000 \$1,000,001 - \$5,000,000 \$1,000,001 - \$5,000,000	"None."	If an asset was sold during the reporting year and is included only because it	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.	Value of Asset	вгоск в
		2		2 4 7 4 7 4 7 4 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	・	RO,	***	\$25,000,001 – \$50,000,000 NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income	ate any income during	ing the appropriate Dividends and interes vested, should be list Check "None" if asset	Check all columns that an retirement plans or accounts not allow you to choose investments, you may write all other assets including		BLOCK C
	10年の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の		本 · · · · · · · · · · · · · · · · · · ·			Royalties	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	None	calendar year.	Dividends vested, s Check "No	hat apply. For left retirement plans or accounts that do not allow you to choose specific investments, you may write "NA." for income. write "NA." For all other assets, <i>including all IRAs</i> , indicate the category of income by checking the appropriate box below.	Ато	BLOCK D
が、 できない できない できない できない できない できない できない できない	・ 一		東京日本 東京日本 東京日本 東京日本 東京日本 東京日本 東京日本 東京日本	を受ける。 を対する。 できたる。 できたる。 できたる。 できたた。 とをたた。 できたた。 とをたた。 とをたる。 できたた。 とをたた。 できたた。 とをたる。 とをたる。 とをたる。 とをたる。 とをたる。 とをたる。 とをたる。 とをたる。 とをたる。 とをたる。 とをたる。 とをたる。 とをたる。 とをたる。 とをたる。 とをたる。 とをたる。 とを、 とをとた。 とを、 とを、 とを、 とを、 とを、 とを、 とを、 とを、	を はん と を はん と ながな と ながな と ながな と ながな と ながま と しゅうしゅう こうしゅう こう こうしゅう こう こう こうしゅう こう	ない ウスルギ	S (partial)	\$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 P, See below for example.	reporting year.	sted as income. me was received. \$1000 in	accounts that do see specific investing. "NA" for income. cluding all IRAs, purchases (P), y of income by sales (S), or		D BLOCK E

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SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

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

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 or were paid by you and reimbursed by the sponsor.

Source	Date(s)	City of Departure—Destination— City of Return	Lodging?	Food? (Y/N	Was a Family Member Included? (Y/N)	Number of days not at sponsor's expense
Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	z	z	z	None
Roycroft Corporation	Aug. 611	DC—Los Angeles—Cleveland	Υ	Υ	γ	2 Days
NAMP Convention	15-15 Way	Yoly 13-15 NY-Xiraman > 12	Υ	<u>ر</u>	Z	Q
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