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" in ? Do not answer "y	Exemptions— Have you excluded from this report any other as because they meet all three tests for exemption Standards of Official Conduct.	
Yes No 🗸		tee on Standards of Official Conduct and certain other "excepted details of such a trust benefiting you, your spouse, or dependent	ved by the Committed from this report	Trusts Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Officitrusts" need not be disclosed. Have you excluded from this report details of such a trust be child?	
S	STION	ATION ANSWER EACH OF THESE QUESTIONS	JST INFORMA	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWEI	Œ
		schedule attached for each "Yes" response		If yes, complete and attach Schedule V.	
ne appropriate	d and the	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.	
Yes No V	outside	It you have any reportable agreement or arrangement with an outside IX. entity?	Yes No 🗸	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?	-₹
Yes No S	lling in the	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes No	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 you complete and affacts Schedulle III	Ę
[from one source)? If yes, complete and attach Schedule VII.	ĺ	If yes, complete and attach Schedule II.	
Yes V	ble travel or han \$335	Old you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335)	Yes No C	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 VI.		If yes, complete and attach Schedule I.	
Yes No	ble gift in therwise	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 exempt)?	Yes No	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	-
		DUESTIONS	OF THESE G	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	무
more than 30 days late.	more t late.	Termination Date:	Termination	Report Type Annual (May 15) Amendment	
A \$200 penalty shall be assessed against anyone who files	A \$200 be ass	Officer Or Employing Office: Employee		Filer Member of the U.S. State: GA Status House of Representatives District: 02	
(Office Hee Any) CLERK	(Off	(Daytime Telephone)		(Full Name)	
2010 MAY 13 AM 9: 34 MC	26	(202) 225-3631		Sanford D. Bishop, Jr.	
LEGISI ATIVE RESOURCE CLICE					
DELIVERED	<u> </u>	FORM A Page 1 of 6 For use by Members, officers, and employees	TATIVES MENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT	છ ⊏
HAND]

SCHEDULE I - EARNED INCOME

Name Sanford D. Bishop, Jr.

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$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.

Source	Туре	Amount
Consolidated Government of Columbus, Georgia	Spouse Salary	N/A

SCHEDU
ILE III - A
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AND "UN
EARNE
O" INCOM

Name Sanford D. Bishop, Jr.

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SP 7 in the optional column on the far left. that of your spouse (SP) or dependent child (DC) or is jointly held (JT), If you so choose, you may indicate that an asset or income source is Government retirement programs. savings accounts; any financial interest in or income derived from U.S. parent or sibling; any deposits totaling \$5,000 or less in personal 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, that is not publicly traded, state the name of the business, the nature of and its value at the end of the reporting period. For an active business in the account that exceeds the reporting threshold. For retirement mutual funds (do not use ticker symbols). For all IRAs and other than \$200 in "unearned" income during the year. For rental property or a fair market value exceeding \$1,000 at the end of the reporting period, information, see the instruction booklet. its activities, and its geographic location in Block A. For additional plans that are not self-directed, name the institution holding the account in which you have the power, even if not exercised, to select the specific retirement plans (such as 401(k) plans) that are self directed (i.e., plans land, provide a complete address. Provide full names of stocks and and (b) any other assets or sources of income which generated more Identify (a) each asset held for investment or production of income with investments), provide the value and income information on each asset Asset and/or Income Source of Ga., 2 Northside 75, Atlanta Columbus, Ga. St.(Lot 3 City Block 51; Lot 15 Congressional Federal Credit Georgia Certificate Sun Trust Bank, NA Columbus House and lot at 908 Illges Rd. City Block 49) Starkville, Ms. House and lot at 311 Yates Hartwell, Ga. Ga. 30318 (Not self-directed) Legislative Retirement System Lot 24A Lakemont Heights \$250,000 \$100,001 -\$1,001 - \$15,000 None \$1,001 - \$15,000 N/A \$100,000 \$1,001 - \$15,000 None at close of reporting \$50,001 -\$1,001 - \$15,000 | INTEREST than fair market value, valuation method other year. If you use a the value should be asset was sold and is method used. If an please specify the it is generated income, included only because Value of Asset Year-End **BLOCK B** RENT even if reinvested, should Dividends and Interest, other assets including all specific investments, you not allow you to choose INTEREST during the calendar year not generate any income Check "None" if asset did be listed as income. appropriate box below. income by checking the IRAs, indicate the type of plans or accounts that do apply. For retirement Check all columns that may write "NA". For all Type of Income BLOCK C NONE \$2,501 - \$5,000 NONE NA \$5,001 - \$15,000 earned or generated. of income by checking the \$1 - \$200 other assets, including all you to choose specific Dividends and interest, even IRAs, indicate the category accounts that do not allow "None" if no income was listed as income. Check if reinvested, should be appropriate box below. "NA" for income. For all investments, you may write For retirement plans or Amount of Income BLOCK D exceeding reporting year. \$1,000 in exchanges (E) Transaction (P), sales (S), or Indicate if asset had purchases BLOCK E

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Sanford D. Bishop, Jr.	Bishop, Jr.		Page 4 of 6
Sun Trust Bank, NA Columbus, \$1 Georgia Savings	\$1 - \$1,000	INTEREST	\$1 - \$200	N/A
Sun Trust Bank, NA, Columbus, Georgia Money Market	\$1,001 - \$15,000 INTEREST	INTEREST	\$1 - \$200	N/A
Wachovia Securities/Dryden \$50 Municipal Bonds	\$50,001 - \$100,000	Dividends/Interest \$201 - \$1,000	\$201 - \$1,000	N/A
Wells Fargo (Formerly Merrill Lynch) CMA Account (Black Rock Govt. Fund) \$50	\$50,001 - \$100,000	DIVIDENDS	\$201 - \$1,000	N/A

	SCHEDULE V - LIABILITIES
-	Name
	e Sanford D. Bishop, Jr.
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\$250,001 - \$500,000	Attorney Fees	Greenberg Traurig,LLP, Attorneys at Law	
\$50,001 - \$100,000	Mortgage on 908 Illges Rd.< Columbus, Georgia	Household Finance	SP
Amount of Liability	Type of Liability	Creditor	JŢ
			SP, DC,
dependent child. Mark the highest oans secured by automobiles, household yolving charge accounts" (i.e., credit	ring the reporting period by you, your spouse, or residence (unless all or part of it is rented out); <i>la</i> rent, or sibling of you or your spouse. Report "re seeded \$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 montgage 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.	Report I amount furniture cards) o

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Sanford D. Bishop, Jr.

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

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70	Was a Family g? Food? Member Included? (Y/N)