PLEASE RESPOND TO: PETER A. DEFAZIO 2134 RAYBURN HOUSE OFFICE BUILDING 4TH DISTRICT, OREGON WASHINGTON, DC 20515-3704 (202) 225-6416 TRANSPORTATION AND **INFRASTRUCTURE** 405 EAST 8TH AVENUE, #2030 EUGENE, OR 97401 (541) 465-6732 HIGHWAYS AND TRANSIT Congress of the United States 1-800-944-9603 CHAIRMAN CHAIRMAN 125 CFNTRAL AVENUE, #350 Coos Bay, OR 97420 (541) 269-2609 RAILROADS OF REPRESENTATIVES HOMELAND SECURITY House of Representatives 612 SE JACKSON STHEET, #9 ROSEBURG, OR 97470 (541) 440-3523 SUBCOMMITTEES TRANSPORTATION SECURITY AND defazio.house.gov INFRASTRUCTURE PROTECTION

September 15, 2009

MANAGEMENT, INVESTIGATION, AND OVERSIGHT

NATURAL RESOURCES
SUBCOMMITTEE

NATIONAL PARKS, FORESTS, AND PUBLIC LANDS
WATER AND POWER

Honorable Zoe Lofgren Chairwoman Committee on Standards and Official Conduct HT2 Capitol Washington, DC 20515

Dear Chairwoman Lofgren:

I am submitting the enclosed additional listings to my 2009 Financial Disclosure Form. I understand that these fall under the permissible exclusions. However, in keeping with full disclosure, I want to add them to schedule III & V for 2008 assets and liabilities.

I thank you in advance for your consideration. If you have any questions, please contact my Executive Assistant Jamie Harrell at 5-6416.

Sincerely,
PETER A. Del AZIO
Member of Congress

Enclosures (2) PAD\jch

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Name

e of	BLOCK E	ransaction	Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1000 in reporting year.	If only a portion of an asset is sold, please indicate as follows: (S) (partial) See below for example. P, S, S, S, E	S (partial)		Training (List V.			
Page				≅ 000,000, r\$ − 100,000, \$ × 000,000, 2\$ − 100,000, \$ ≥ 000,000, \$		×						
0,25/	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, inclicate the category of income by checking the appropriate box below. Dividends and interest, even if retirested, should be fisted as income. Check "None" if no income was earned or generated.	= 00\$ - 1\$ = 000,1\$ - 102\$ = 000,1\$ - 102\$ 5 000,2\$ - 100,1\$ > 000,2\$ - 100,2\$ > 000,2\$ - 100,2\$ = 000,00\$ - 100,0\$ = 000,00\$ - 100,0\$	×	×						
Name S				Other Type of Income (Specify: For Example, Partnership Income or Farm Income)		Royalties	X		×		×	
_	BLOCK C	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 check-ing 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.	NONE DIVIDENDS INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST	×	×	×		X		×	
"UNEARNED" INCOME	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."	α anol α 600, f \$ - f \$ σ 600, f \$ - f \$ σ 000, a f \$ - f 00, a f \$ π 000, 000 f \$ - f 00, a f \$ π 000, 000 f \$ - f 00, 00 f \$ π 000, 000 f \$ - f 00, 00 f \$ π 000, 000 f \$ - f 00, 00 f \$ π 000, 000, f \$ - f 00, 000, f \$ π 000, 000, f \$ - f 00, 000, f \$ π 000, 000, a f - f 00, 000, f \$ π 000, 000, a f - f 00, 000, a f \$ π 000, 000, a f - f 00, 000, a f \$ π 000, 000, a f - f 00, 000, a f + f 00, a f 00,	×	Indefinite X	×		X		×	
SCHEDULE III — ASSETS AND "UNEARNED" INCOME	BLOCK A	Asset and/or Income Source	Identify (a) each asset held for investment or production of income with a fair market vatue 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 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 incorne); 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 dependent child (DC) or is jointly held (JT), in the optional column on the far left.	SP Aeda Corn. Stock	Examples:	1083	DT STRINGFIPLY OR-ROSAPURP	37 53880 PME GROVE	74/116	756	

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SCHEDULE V— LIABILITIES

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 it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest; 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.

			Amount of Liability	T
SP, DC,	Creditor	Type of Liability	\$5,000,000- \$25,000,000 \$25,000,000 \$55,000,000 \$55,000,000	× 000'000'09\$
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		
77	Wells Fakeo	NAX1696P 1083 S. 12TH	X	
1	COUNTRY WIDE	MORTGGG & 3880 Pur GALLA		
X				

SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, focal 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 \$134 or less need not be added towards the \$335 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$335 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.

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	Value	\$345			
	Description	Silver Platter (determination on personal friendship received from Committee on Standards)			
	Source	Example: Mr. Joseph H. Smith, Anytown, Anystate			

Use additional sheets if more space is required.