EXE be d	or e \$1,0 V.D liabi	inco repo	fees If you lieu repo	ᇛ	70 (0		7 2 S
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — A TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct a be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent exemption—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities they meet all three tests for exemption?	or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?  If yes, complete and attach Schedule IV.  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.	If yes, complete and attach Schedule II.  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.  IV. Did you, your spouse, or a dependent child purchase, sell.	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?  If yes, complete and attach Schedule I.  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?	PRELIMINARY INFORMATION -	Filer  Member of the U.S.  Status  House of Representatives  Annual (May 15)	William T	UNITED STATES HOUSE OF REPRESENTATIVES 2008 FINANCIAL DISCLOSURE STATEMENT For 2007 Calendar Year Reporting Period
Sts" approved by the Committee or t details of such a trust benefiting or ort any other assets, "unearned" in	Yes Tes	Yes	Yes Yes Yes	ER EACH	State: Tdaho District: 1  Amendment	homas Sal.	PRESENTATIVES ATEMENT Period
n standards you, your s	X X		X X × ×	OF THESE	Officer or Employee		
nduct a sendent abilities	an outside entity?  If yes, complete and attach Schedule IX.  Pes No  Reach question in this part must be answered and the appropriate schedule attached for each "Yes" response		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.  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)?	QUESTIONS	Employing Office:  Termination Termination Date:	(202) 225- <u>L611</u> (Daytime Telephone)	Form A For use by Members, officers, and employees
NSWER EACH OF THESE QUESTIONS and certain other "excepted trusts" need not Yes Child?	No attach Schedule IX.  Stion in this part must be answered and the schedule attached for each "Yes" response.	before the date  Yes  Trangement with	eceive any sgating more  Yes  receive any the reporting  Yes		A \$200 penalty shall be assessed against anyone who files more than 30 days late.	2008 JUN 24 PM 2: 49 2008 JUN 24 PM 2: 49 USOMOWORED ONLY	JUN 1 6 2008
No.	No X	8	<b>8</b>		e assessed s more than	PM 2: 49	or of sites

JT Public Retirement System & II		SP SP Mega Corp. Stock DC. Examples: Simon & Schuster	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 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.	provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans that are	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 <i>all IRAs</i> and other retirement plans (such as 401(k) plans) that are self directed ( <i>i.e.</i> , plans in which you have the power, <i>even if not exercised</i> , 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
×	×	Indefinite	\$1 - \$1,000 \$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 - \$5,000,000	A B C D E F G H I J K L	If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	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	всоск в
×	X	X X Royalties	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST  Other Type of Income (Specify: For Example, Partnership Income or Farm Inco	ome)	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.	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 <i>including all IRAs</i> ,	Type of Income	BLOCK C
×	×	×	\$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000		checking the appropriate box below.  Dividends and interest, even if reinvested, should be listed as income.  Check "None" if no income was received.	For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, <i>including all IRAs</i> , indicate the category of income by	Amount of Income	BLOCK D
		S (partial)	portion of an asset is sold, please indicate as follows: (S) (partial) See below for example.  P, S, E	If only a	exchanges (E) exceeding \$1000 in reporting year	asset had purchases (P), sales (S), or	Transaction	BLOCK E

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	Page 3
	_of <u>4</u>

## SCHEDULE VII— TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed 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 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

**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

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

Source	Date(s)	City of Departure—Destination— City of Return	Lodging?	Food? (Y/N	Was a Family Member Included?	Number of days not at sponsor's expense
Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	z	z	Z	None
Roycroft Corporation	Aug. 6–11	DC—Los Angeles—Cleveland	У	Υ	Y	2 Days
Club for Growth	Feb 1-3	Feb 1-3 DC Miami - Boise	ک	2	ح	None
Club for Growth	Feb 1-3	Miam;	Y	2	2	NONE
Club for Growth	Feb 1-3	Man	ح	×	7	None
		200				

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## SCHEDULE VIII—POSITIONS

name William 1. Sali

Page 4 of 4

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 1; positions held in any religious, social, fraternal, or political entities; and positions solely of an honorary nature.

	Position President Executive Director	
	American Monorail Corporation  Idaho Family Defense Fund	

## SCHEDULE IX—AGREEMENTS

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. 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

Date				
Parties To				
Terms of A				
Terms of Agreement				
	:			