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				DESTINATION AND THE THE PROPERTY OF THE PROPER	UNITED MATERIAL	
	late.		☐ Termination	☐ Amendment	Annual (May 15)	Type
	more than 30 days	Termination Date:				Report
	be assessed against anvone who files		Employee	entative District: 53	House of Representative	Status
€	A \$200 penalty shall	Employing Office:	☐ Officer Or	S. State: CA	✓ Member of the U.S.	Filer
i	(Office Use Only)	(Daytime Telephone)		(Full Name)		
		202-225-2040		Susan A. Davis	Su	
	008 MAY 15 PM 4: 52					
. \$	officers, and employees fall After States of Call 19	For use by Members, officers, and employees		FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007	L DISCLOSURE STATE	FINANCIA
. (FORM A Page 1 of 10		UNITED STATES HOUSE OF REPRESENTATIVES	STATES HOUSE	UNITEL
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EXCLUSION OF SPOUSE DEPENDENT OR TRUST INFORMATION ANSWER E	If yes, complete and attach Schedule V.	Did you, your spouse, or a dependent child have any reportable liability V. (more than \$10,000) during the reporting period?	if yes, complete and attach Schedule IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting period?	If yes, complete and attach Schedule III.	Did you, your spouse, or a dependent child receive "unearned" income of III. 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 II.	Did any individual or organization make a donation to charity in lieu of il. paying you for a speech, appearance, or article in the reporting period?	If yes, complete and attach Schedule 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?	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS
DR TRUST INFORMA		ability Yes ✓ No		ny Yes ☑ No ☐		et worth Yes V No		eu of erfod? Yes ☐ No 🗸		es) of Yes 🗸 No 🗌	REACH OF THESE C
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N ANSWER EACH OF THESE QUESTIONS	schedule attached for each "Yes" response.	Each question in this part must be answered and the appropriate	If yes, complete and attach Schedule IX.	Did you have any reportable agreement or arrangement with an outside IX. entity?	If yes, complete and attach Schedule VIII.	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	If yes, complete and attach Schedule VII.	Did you, your spouse, or a dependent child receive any reportable travel VII. or reimbursements for travel in the reporting period (worth more than \$306 from one source)?	if yes, complete and attach Schedule VI.	our spouse, or a dependent child receive any reportable gift in ing period (i.e., aggregating more than \$305 and not otherwise	STIONS
		appropri		Yes No 🗸		Yes No V		Yes No		Yes No [2]	
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Exemptions— 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?

Yes

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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?

Trusts-

SCHEDULE I - EARNED INCOME

SCHEDOLE I - EARNED INCOME	Name Susan A. Davis	Page 2 of 10
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.	r than the filer's current employmen unt of any honoraria; list only the s	ment by the U.S. Government) totaling \$200 or more ne source for other spouse earned income exceeding
Source	Туре	Amount
Self Employment Spouse Salary	,	N/A

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ထူ 긐 ဌ ٦ \exists 드 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. Government retirement programs. accounts; any financial interest in or income derived from U.S. parent or sibling; any deposits totaling \$5,000 or less in personal savings debt owed to you by your spouse, or by your or your spouse's child, Exclude: Your personal residence(s) (unless there is rental income); any activities, and its geographic location in Block A. For additional not publicly traded, state the name of the business, the nature of its its value at the end of the reporting period. For an active business that is the account that exceeds the reporting threshold. For retirement plans that are not self-directed, name the institution holding the account and plans (such as 401(k) plans) that are self directed (i.e., plans in which investments), provide the value and income information on each asset in you have the power, even if not exercised, to select the specific \$200 in "unearned" income during the year. For rental property or land information, see the instruction booklet. funds (do not use ticker symbols). For all IRAs and other retirement fair market value exceeding \$1,000 at the end of the reporting period, and provide a complete address. Provide full names of stocks and mutual (b) any other assets or sources of income which generated more than Identify (a) each asset held for investment or production of income with a Asset and/or Income Source <u>A</u>G Ariel Fund Ariel Fund Fund ADVXX 4113-15 Arbor Vitae Sar American International Group American Beacon FDS American Advantage Mileage Diego, CA \$50,000 \$15,001 -None \$1,001 - \$15,000 \$1,001 - \$15,000 \$1,001 - \$15,000 \$500,000 \$250,001 the value should be year. If you use a at close of reporting it is generated income, included only because asset was sold and is method used. If an please specify the than fair market value, valuation method other "None." Value of Asset Year-End BLOCK B Name Susan A. Davis DIVIDENDS DIVIDENDS DIVIDENDS None RENT TAL GAINS DIVIDENDS/CAPI apply. Check "None" if Check all columns that Farm Income) Partnership income or block. (For example: a brief description in this type of income by writing categories, specify the than one of the listed calendar year. If other asset did not generate any income during the Type of Income BLOCKC \$1,001 - \$2,500 NONE NONE category of income by \$1 - \$200 \$201 - \$1,000 \$15,001 - \$50,000 if reinvested, should be box below. Dividends, even checking the appropriate other assets, indicate the investments, you may write you to choose specific accounts that do not allow For retirement plans or "None" if no income was listed as income. Check "NA" for income. For all Amount of Income ഗ exceeding Transaction reporting year. \$1,000 in exchanges (E) (P), sales (S), or had purchases Indicate if asset Page 3 of 10 BLOCK E

SCHEDULE III	
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- ASSETS A	
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UNEARNED"	
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SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Susan A Davis	Povie		Page 4 of 10
JT	Cal-Amer inc. Prop IV	\$15,001 - \$50,000	CAPITAL GAINS	\$2,501 - \$5,000	
JT	Cisco Systems, Inc CSCO	\$1,001 - \$15,000	DIVIDENDS	NONE	
JT	Costco Wholesale Corp	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
	Dreyfus GNMA Fund	None	DIVIDENDS	\$201 - \$1,000	
SP	Dreyfus GNMA Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	Dwight Asset Mgt Stb Val	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Fidelity Canada	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	ס
SP	Fidelity Cash Reserves (FDRXX)	\$50,001 - \$100,000	DIVIDENDS	\$2,501 - \$5,000	
SP	Fidelity Contrafund	\$15,001 - \$50,000	DIVIDENDS	\$2,501 - \$5,000	
SP	Fidelity Emerging Markets	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	S(part)
JT	Fidelity Select Portfolios FSLBX	\$15,001 - \$50,000	DIVIDENDS/CAPI TAL GAINS	\$201 - \$1,000	
SP	Fidelity Southeast Asia	\$15,001 - \$50,000	DIVIDENDS/CAPI TAL GAINS	\$2,501 - \$5,000	יס
JT	General Electric	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	
JT	Home Depot	None	DIVIDENDS/CAPI TAL GAINS	\$201 - \$1,000	S

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SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	IE Name Susan A. Davis	Davis		Page 5 of 10
SP	ICON Energy Fund	\$1,001 - \$15,000	CAPITAL GAINS/DIVIDEN DS	\$1,001 - \$2,500	
JT	ICON Funds ICENX	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
SΡ	ICON Healthcare (ICHCX)	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
SP	Janus Invt Fund Mid Cap Value Fund JMCVX	\$50,001 - \$100,000	DIVIDENDS	\$201 - \$1,000	
	Julius Baer Invt Funds BJBIX	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
	Pamassus Income Trust Equity Income Fund PRBLX	\$1,001 - \$15,000	DIVIDENDS	\$1,001 - \$2,500	
SP	PIMCO FDS PAC Invst mgmt SER PRRDX	\$100,001 - \$250,000	DIVIDENDS	\$5,001 - \$15,000	
	Pimco Fds Pac Invt Mgmt Ser	\$1,001 - \$15,000	DIVIDENDS	\$2,501 - \$5,000	
JT	Procter & Gamble	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	Selected American Shares, Inc. SLASX	\$50,001 - \$100,000	DIVIDENDS	\$201 - \$1,000	
	SPP MD CAP MGFD Growth	\$15,001 - \$50,000	DIVIDENDS	NONE	
SP	SPP MD CAP MGFD Growth	\$1,001 - \$15,000	DIVIDENDS	NONE	
SP	Svgs Pls LrgCp Bind Fd	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Svgs Pls LrgCp Bind Fund	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Susan A. Davis	Davis		Page 6 of 10
	Svgs Pls SmCp Value Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	T. Rowe Price Emerg Euro \$ Mediterranean TREMX	\$15,001 - \$50,000	CAPITAL GAINS	\$201 - \$1,000	
SP	T. Rowe Price Emerg Euro \$ Mediterranean TREMX	\$15,001 - \$50,000	DIVIDENDS/CAPI TAL GAINS	\$2,501 - \$5,000	S(part)
SP	T. Rowe Price Equity Income	\$100,001 - \$250,000	DIVIDENDS	\$2,501 - \$5,000	
JT	T. Rowe Price Intl Funds TREMX	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	T. Rowe Price Mid Cap GR PAMCX	\$50,001 - \$100,000	DIVIDENDS	NONE	
	T. Rowe Price Mid Cap GR PAMCX	\$15,001 - \$50,000	DIVIDENDS	NONE	
SP	TD Waterhouse MMF US Govt Portfolio SWEEP CMRUZ	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	TD Waterhouse Money Market	\$1 - \$1,000	DIVIDENDS	NONE	
SP	TD Waterhouse Money Market CMFMZ	\$100,001 - \$250,000	DIVIDENDS	\$2,501 - \$5,000	
	TDAM Money Market Portfolio Sweep	\$1 - \$1,000	DIVIDENDS	\$201 - \$1,000	
	Third Avenue Value Fund, Inc TAVFX	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
JT	Vanguard Fixed Income SEC FD VFINX	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	Vanguard Fixed Income SEC VFSTX	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME Name Susan A. Davis Page 7 of 10 SP Vanguard Index Trust 500 VFINX \$50,001 - \$1,000 DIVIDENDS \$1,001 - \$2,500 JT Vanguard Limited Term Tax Exempt Fund VMLTX \$1 - \$1,000 DIVIDENDS \$1 - \$200 JT Washington Mutual \$1,001 - \$15,000 INTEREST \$1 - \$200 SP Wells Fargo Advantage Small Cap Opptty \$15,001 - \$15,000 TAL GAINS \$201 - \$1,000 SP Wells Fargo Small Cap Opptty \$15,001 - \$15,000 TAL GAINS \$2,501 - \$5,000)):::::::::::::::::::::::::::::::::::::					
Vanguard Index Trust 500 VFINX\$50,001 - \$100,000DIVIDENDS \$100,000Vanguard Limited Term Tax Exempt Fund VMLTX\$1 - \$1,000DIVIDENDSWashington Mutual\$1,001 - \$15,000INTERESTWells Fargo Advantage Small Cap Value Fund Class Z SSMVX\$15,001 - \$50,000DIVIDENDS/CAPI TAL GAINSWells Fargo Small Cap Opptty Admin NVSOX\$15,001 - \$50,000DIVIDENDS	SCHEDU	LE III - ASSETS AND "UNEARNED" INCOME		Davis		Page 7 of 10
Vanguard Limited Term Tax Exempt Fund VMLTX\$1 - \$1,000DIVIDENDSWashington Mutual\$1,001 - \$15,000INTERESTWells Fargo Advantage Small Cap Value Fund Class Z SSMVX\$15,001 - \$50,000DIVIDENDS/CAPI TAL GAINSWells Fargo Small Cap Opptty Admin NVSOX\$15,001 - \$50,000DIVIDENDS	Sp		\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	
Wells Fargo Advantage Small Cap Value Fund Class Z SSMVX Wells Fargo Small \$15,001 - DIVIDENDS/CAPI \$50,000 Wells Fargo Small Cap Opptty Admin NVSOX \$15,001 - DIVIDENDS \$50,000 DIVIDENDS	JT	m Tax	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
Wells Fargo Advantage Small Cap Value Fund Class Z SSMVX Wells Fargo Small Cap Opptty Admin NVSOX \$15,001 - DIVIDENDS/CAPI \$50,000 TAL GAINS \$15,001 - DIVIDENDS	JT		\$1,001 - \$15,000	INTEREST	\$1 - \$200	
Wells Fargo Small Cap Opptty \$15,001 - DIVIDENDS Admin NVSOX	d S		\$15,001 - \$50,000	DIVIDENDS/CAPI TAL GAINS	\$201 - \$1,000	
	SP	i	\$15,001 - \$50,000	DIVIDENDS	\$2,501 - \$5,000	

SCHEL	SCHEDULE IV - TRANSACTIONS	Name Susan A. Davis		Page 8 of 10
Report and or other set transaction	Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of or other securities when the amount of the transaction or series of transactions exceeded \$1,000. Include transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal res	t child during the reporting tions exceeded \$1,000. Incl rchase or sale of your perso		f any real property, stocks, bonds, commodities futures, ansactions that resulted in a loss. Do not report a sidence, unless it is rented out. Provide a brief
SP,		Type of		Amount of Transaction
JT	Asset	Transaction	Date	Amount of Transaction
SP	T. Rowe Price Emerg Euro \$ Mediterranean TREMX	S	8-1-07	\$15,001 - \$50,000
SP	Fidelity Emerging Markets	S	8-1-07	\$15,001 - \$50,000
JT	Home Depot	S	11-5-07	\$15,001 - \$50,000
SP	Fidelity Canada	v	10-9-07	\$15,001 - \$50,000
SP	Fidelity Southeast Asia	T	10-9-07	\$15,001 - \$50,000
JT	American Beacon FDS	S	5-1-07	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

Name Susan A. Davis

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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 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.

JΤ	SP, DC,
Washington Mutual	Creditor
Mortgage on 4112-15 Arbor Vitae	Type of Liability
\$50,001 - \$100,000	Amount of Liability

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Susan A. Davis

spouse or dependent child that is totally independent of his or her relationship to you. identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling 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 the 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 sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be asparately 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

Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Food? Member included? (Y/N) (Y/N)	Days not at sponsor's expense
The Aspen Institute	Mar. 31 - Apr. 8	San Diego-China-San Diego	Υ	Υ	Υ	None
The Aspen Institute	May 28 - June 3	San Diego-Slovenía-Dulles- San Diego	Υ	Υ	~	None
The Aspen Institute	Feb. 20 - 25	Dulles-Puerto Rico-Dulles	4	Υ	~	None