Yes 🗌 No 🗸	ed" income, transactions, or liabilities of a spouse or dependent child wer "yes" unless you have first consulted with the Committee on	Exemptions— Have you excluded from this report any other assets, "unearned" income, transactions, or libecause they meet all three tests for exemption? Do not answer "yes" unless you have first Standards of Official Conduct.
Yes No 🗸	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 Details regarding "Qualified Blind Trusts" approved by the C trusts" need not be disclosed. Have you excluded from this child?
SN	RMATION ANSWER EACH OF THESE QUESTIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWE
	schedule attached for each "Yes" response.	If yes, complete and attach Schedule V.
the appropriate	☐ Each question in this part must be answered and the appropriate	Did you, your spouse, or a dependent child have any reportable liability (more V. than \$10,000) during the reporting period?
	If yes, complete and attach Schedule IX.	If yes, complete and attach Schedule IV.
Yes ✓ No	Did you have any reportable agreement or arrangement with an outside IX. entity?	Did you, your spouse, or dependent child purchase, sell, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting Yes No
	If yes, complete and attach Schedule VIII.	If yes, complete and attach Schedule III.
1e Yes □ No ☑	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	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 Yes No more than \$1 000 at the end of the period?
	If yes, complete and attach Schedule VII.	If yes, complete and attach Schedule II.
Yes V No	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$335 from one source)?	Did any individual or organization make a donation to charity in lieu of paying ll. you for a speech, appearance, or article in the reporting period? Yes No
	If yes, complete and attach Schedule VI.	If yes, complete and attach Schedule I.
Yes 🗌 No 🗸	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)?	Did you or your spouse have "eamed" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?
	SE QUESTIONS	PRELIMINARY INFORMATION ANSWER EACH OF THESE
,	Termination late.	Annual (May 15) Amendment
more than 30 days	Termination Date: more	Report
be assessed against		
A \$200 penalty shall	Employing Office:	File: Wember of the U.S. State: MS
(Office Use Only)	(Daytime Telephone)	(Full Name)
2010 MAY 13 PM 2:	(202)225-5031	Gregg Harper
EGISI ATIVE RESOURCE CH	reasi	
DELIVER	S FORM A Page 1 of 6 For use by Members, officers, and employees	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT

AND VERED

URCE CENT:

PH 2: 42

Only): 8

shall
shall

SCHEDULE I - EARNED INCOME

Name Gregg Harper

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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.

4,3444		
Source	Туре	Amount
Sanford & Harper (Law Firm)	Fee for Legal Services for 2008 paid in 2009	\$300,332

		Walle Glegginalper	ָּיַבֶּיבְּי		
	BLOCK A	вгоск в	вгоск с	BLOCK D	BLOCK E
Ass Identify (a) es a fair market and (b) any contain \$200 in land, provide mutual funds retirement plin which you investments; in the accouplans that are and its value that is not puits activities, information, Exclude: You debt owed to parent or sits savings accouplants are and its value that is not puits activities, information, if you so che that of your: in the option	Asset and/or Income Source 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 assets 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 income); any debt owed to you by your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$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.	Year-End 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 and is included only because it is generated income, the value should be "None."	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 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 the calendar year.	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, indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
If you so che that of your a in the option	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.				
	3 Country Place Pearl, MS 39208	\$250,001 - \$500,000	Rent	\$15,001 - \$50,000	
SP	50% of 1/4 undivided interest 400 Acre Tract - Bentonia, MS	\$50,001 - \$100,000	Farm Income	\$2,501 - \$5,000	
	State of MS Def. Comp. Plan	\$50,001 - \$100,000	Deferred	NONE	
	State of MS State Retirement	\$1,001 - \$15,000	None	NONE	

SCHEDULE V - LIABILITIES

Name Gregg Harper

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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.

		SP, DC, JT
BancorpSouth Bank	Citizens National Bank	Creditor
Business Loan	Mortgage on 3 Country Place, Pearl, MS 39208	Type of Liability
\$15,001 ~ \$50,000	\$250,001 - \$500,000	Amount of Liability

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Gregg Harper Page 5 of 6

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 sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under 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, 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 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

SourceDate(s)Point of Departure DestinationPoint of ReturnLodging? Food? (Y/N)Food? Member Included? (Y/N)Was a Family Sponsor?Days not Sponsor?American Israel Education FoundationAug. 1-9 Israel - Jackson, MSJackson, MS - Tel Aviv, Israel - Jackson, MSYYYYNoneMS Poultry Association Annual ConferenceSept. 18- Pearl, MSPearl, MS - Destin, FL -YNYNone		,	. ,				
Date(s) DestinationPoint of Return (Y/N) (Y/N) (Y/N) Aug. 1-9 Jackson, MS - Tel Aviv, dation Y Y Y Y N Destination Sept. 18- pearl, MS - Destin, FL - 20 Y N Y N Y N			Point of Departure	Lodging?	Food?	Was a Family Member Included?	Days not at sponsor's
Aug. 1-9 dation Aug. 1-9 lsrael - Jackson, MS lsrael - Jackson, MS Sept. 18- Pearl, MS - Destin, FL - Pearl, MS	Source	Date(s)	DestinationPoint of Return	(Y/N)	(Y/N)	(Y/N)	expense
tion Sept. 18- Pearl, MS - Destin, FL - Y N Y	American Israel Education Foundation	Aug. 1-9	Jackson, MS - Tel Aviv, Israel - Jackson, MS	Υ	~	~	None
	MS Poultry Association Annual Conference	Sept. 18- 20	Pearl, MS - Destin, FL - Pearl, MS	~	z	~	None

SCHEDULE IX - AGREEMENTS

Name Gregg Harper

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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 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.

Date Parties To Terms of Agreement
Gregg Harper and Whitney Adams Buyout by Whitney Adams of law firm of Gregg Harper, payable over 10 years at a predetermined monthly payment beginning 02/01/2009 with balance due at the end of that 10 year period