₹ 	child because Yes	sactions, or liabilities of a spouse or dependent	ts, "unearned" income, tran	EXEMPTION —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?
No	trusts" need not Yes	of Official Conduct and certain other "excepted trusts" need not pouse, or dependent child?	ne Committee on standards trust benefiting you, your s	TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct and ce be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?
SNS	OF THESE QUESTIONS	- ANSWER EACH	DEPENDENT, OR TRUST INFORMATION	EXCLUSION OF SPOUSE, DEPENDENT, C
nd the sponse.	must be answered an ed for each "Yes" res	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	Yes No	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.
s S	arrangement with Yes	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes No	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.
s S	or before the date	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes No	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.
S S	d receive any n the reporting Yes	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)? If yes, complete and attach Schedule VII.	Yes No	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? If yes, complete and attach Schedule II.
S S	regating more Yes	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.	Yes No	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.
		E QUESTIONS	EACH OF THESE	PRELIMINARY INFORMATION — ANSWER
e assessed s more than	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	or Employing Office:	Officer or Employee Amendment	Status House of Representatives District: Report Type Annual (May 15) Ar
AH 9: 48	2019 MAY 14 AM 9: 48 (Office Use Only)	&とり、51フ. ユ& 9.8 (Daylime Telephone)		(506 Ing/s
) DELIVERED	HAND DELIVERED	Form A For use by Members, officers, and employees	IVES	UNITED STATES HOUSE OF REPRESENTATIVES 2008 FINANCIAL DISCLOSURE STATEMENT For 2007 Calendar Year Reporting Period

SCHEDULE I - EARNED INCOME

Name Bob Inglis

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.

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Inglis for Congress Committee, Inc.	Source	
Spouse Salary	Туре	
N/A	Amount	

Fidelity Advisor Intermed Bond CL T	Fidelity Advisor Equity Income CL T	Fidelity Advisor Equity Growth CL T	IRA with Fidelity Investments composed of the following:	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.	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.	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.	SCHEDULE III - ASSETS AND "UNEARNED" INCOME
\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$50,001 - \$100,000				Name Bob Inglis
DIVIDENDS/INTE REST/CAPITAL GAINS	DIVIDENDS/INTE REST/CAPITAL GAINS	DIVIDENDS/CAPI TAL GAINS/INTERES T	DIVIDENDS/INTE REST/CAPITAL GAINS			BLOCK C Type of Income Check all columns that apply. Check "None" if asset did not generate any income during the calendar year. If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	
\$201 - \$1,000	\$201 - \$1,000	\$2,501 - \$5,000	\$5,001 - \$15,000			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, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income. Check "None" if no income was earned.	
						BLOCK E Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.	

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Hotchkis & Wiley Fds Mid Cap Cl A	Harbor Mid Capital Growth	Harbor International Investor	HarborCapital Appreciation Fd	DWS Small Cap Val Fd Cl S	DWS Dreman High Retrn Eqty Fd Cl A	Davis N Y Venture Fd Inc	Columbia Marsico International Oppt	Columbia Marsico Focused Equity	AmCent Quant Inc & Grwth	IRA with AG Edwards composed of the following:	SCHEDULE III - ASSETS AND "UNEARNED" INCOME
\$1,001 - \$15,000	\$15,001 - \$50,000	Name Bob Inglis									
DIVIDENDS/INTE REST/CAPITAL GAINS	glis										
NONE	\$1 - \$200	\$201 - \$1,000	\$201 - \$1,000	\$1 - \$200	NONE	\$1 - \$200	\$201 - \$1,000	\$2,501 - \$5,000	NONE	\$2,501 - \$5,000	
	TO	 					PS(part)	- TO	 		

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME	
Name Bob Inglis	

SCHEDULI	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Bob Inglis	ob Inglis		
	T Rowe Price Growth Stck	None	DIVIDENDS/INTE \$1 - \$200 REST/CAPITAL GAINS	\$1 - \$200	S
	Templeton Foreign I	None	DIVIDENDS/INTE \$1 - \$200 REST/CAPITAL GAINS	\$1 - \$200	o
	Allick Wyllie Inglis, Jr. Qualified Personal Residence Trust and Helen McCullough Inglis Qualified Personal Residence Trust (1/5 interest in both)	\$250,001 - \$500,000	RENT	\$2,501 - \$5,000	

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Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded \$1,000. Include transactions that resulted in a loss. Do not report a SCHEDULE IV - TRANSACTIONS transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. Provide a brief SP, DC, Harbor Mid Capital Growth Alliance Bernstein Lg Cap Growth T Rowe Price Growth Stck Putnam Intl Equity Fd Cl A Oppenheimer Developing Mkts F Templeton Foreign I Harbor International Investor T. Rowe Price Intl Emerging Mrkts Stk DWS Dreman High Retrn Eqty Fd Cl A Columbia Marsico International Oppt T Rowe Price Blue Chip Columbia Marsico Focused Equity Asset S Ū S S ഗ S U Ū U T ס U Name Bob Inglis Transaction Type of 6-12-07 6-12-07 2-8-07 6-12-07 2-8-07 6-12-07 8-13-07 8-13-07 6-12-07 6-12-07 6-12-07 9-10-07 Date \$1,001 - \$15,000 \$1,001 - \$15,000 \$1,001 - \$15,000 \$1,001 - \$15,000 \$1,001 - \$15,000 \$1,001 - \$15,000 \$1,001 - \$15,000 \$1,001 - \$15,000 \$1,001 - \$15,000 \$1,001 - \$15,000 \$1,001 - \$15,000 \$1,001 - \$15,000 Amount of Transaction

SCHEDULE IV - TRANSACTIONS

Name Bob Inglis

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. Provide a brief SP, DC, T. Rowe Price Mid-Cap Gr Asset S(part) Transaction Type of 9-10-07 Date \$1,001 - \$15,000 **Amount of Transaction**

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SCHEDULE V - LIABILITIES

Name Bob Inglis

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	
Bank of Travelers Rest	Creditor	
Home Equity Loan	Type of Liability	
\$15,001 - \$50,000	Amount of Liability	

SCHEDULE VIII - POSITIONS

Name Bob Inglis

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Trustee	Allick Wyllie Inglis, Jr. Qualified Personal Residence Trust
Trustee	Helen McCullough Inglis Qualified Personal Residence Trust