

**HAND DELIVERED**

**UNITED STATES HOUSE OF REPRESENTATIVES  
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2005**

**FORM A** Page 1 of 1  
For use by Members, officers, and employees

Frederick C. Boucher  
(Full Name)

LEGISLATIVE RESOURCE CENTER

2187 Rayburn House Office Building Washington, DC 20515  
(Mailing Address)

202-225-3861  
Daytime Telephone:

2006 MAY 11

PM 4:44

*MC*

OFFICE OF THE CLERK  
U.S. HOUSE OF REPRESENTATIVES  
(Office Use Only)

Filer Status

Member of the U.S. House of Representatives  
State: VA  
District: 09

Officer Or Employee

Employing Office:

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

Report Type

Annual (May 15)  Amendment  Termination

Termination Date:

**PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS**

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.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	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 <input type="checkbox"/> No <input checked="" type="checkbox"/>
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.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	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 <input checked="" type="checkbox"/> No <input type="checkbox"/>
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.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	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 <input type="checkbox"/> No <input checked="" type="checkbox"/>
IV. Did you, your spouse, or 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.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

**EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS**

<b>Trusts--</b> 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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Exemptions--</b> 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 <input type="checkbox"/> No <input checked="" type="checkbox"/>

**CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED**

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	<i>Frederick C. Boucher</i>	5/10/06

**SCHEDULE III - ASSETS AND "UNEARNED" INCOME**

Name Frederick C. Boucher

Page 2 of 5

BLOCK A		BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source		Year-End Value of Asset	Type of Income	Amount of Income	Transaction
<p>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 source of income which generated more than \$200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year.</p> <p>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.</p> <p>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.</p>		<p>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."</p>	<p>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)</p>	<p>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.</p>	<p>Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.</p>
1	Bank of America Checking Account	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
2	Nations Securities Savings Account	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	
3	BBT Common Stock	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
4	South Financial Group	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
5	Vanguard S&P 500 Index Mutual Fund	\$50,001 - \$100,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	P
6	Rydex Over the Counter Mutual Fund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$1 - \$200	

**SCHEDULE III - ASSETS AND "UNEARNED" INCOME**

Name Frederick C. Boucher

Page 3 of 5

7	New River Funds Mutual Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
8	Individual Retirement Account, Nations Securities	\$15,001 - \$50,000	DIVIDENDS/INTE REST	\$1,001 - \$2,500	
9	Individual Holdings in Retirement Account King Pharmaceuticals Common Stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	S
10	Jabil Circuit, Inc. Common Stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
11	General Motors Corporation Class H Common Stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	S
12	Echostar Communications Class A Common Stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	S
13	Fidelity Select Developing Communications Mutual Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	S
14	Rydex OTC Investor Class Mutual Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
15	Fidelity 4-in-1 Index Fund	\$15,001 - \$50,000	DIVIDENDS/INTE REST	\$201 - \$1,000	P
16	Harbor International Mutual Funds	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
17	Lot - Town of Damascus	\$1,001 - \$15,000		NONE	
18	Lot - Washington County	\$1,001 - \$15,000		NONE	

**SCHEDULE IV - TRANSACTIONS**

Name Frederick C. Boucher

Page 4 of 5

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.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
1	Vanguard S&P 500 Index Mutual Fund	P	10-04-05	\$1,001 - \$15,000
2	Individual Holdings in Retirement Account King Pharmaceuticals Common Stock	S	12-27-05	\$1,001 - \$15,000
3	General Motors Corporation Class H Common Stock	S	12-27-05	\$1,001 - \$15,000
4	Echostar Communications Class A Common Stock	S	12-27-05	\$1,001 - \$15,000
5	Fidelity Select Developing Communications Mutual Fund	S	12-27-05	\$1,001 - \$15,000
6	Fidelity 4-in-1 Index Fund	P	12-27-05	\$1,001 - \$15,000
7	Harbor International Mutual Funds	P	12-27-05	\$1,001 - \$15,000

**SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS**

Name Frederick C. Boucher

Page 5 of 5

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 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 sponsor. 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)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
please see attached Page 5A			N	N	N	

## SCHEDULE VII TRAVEL PAYMENTS AND REIMBURSEMENTS

Source	Dates	Point of Departure - Destination - Point of Return	Lodging	Food	Family Member Included	Any time not at Sponsor's Expense
Microsoft Corporation - Speech to Microsoft conference on elements of upcoming telecommunications law reform	4/15/05 - 4/18/05	Washington, DC - Seattle - Washington, DC	Yes	Yes	No	2 days
Salt River Project Electric Power Cooperative - Presentation to Executive Officers of Cooperative on treatment of public power entities in comprehensive energy legislation	1/05/05- 1/06/05	Washington, DC - Phoenix - Washington, DC	Yes	Yes	No	No
Large Public Power Council - Speech to conference on treatment of public power entities in comprehensive energy legislation	1/07/05- 1/09/05	Washington, DC - Phoenix - Tuscan - Washington, DC	Yes	Yes	No	No
Western Business Roundtable - Speech to Business Summit of the West on Federal Policies addressing global climate change	11/26/05 - 11/28/05	Abingdon, VA - Carefree, AZ - Abingdon, VA	Yes	Yes	No	No