

ELIOT L. ENGEL  
17TH DISTRICT, NEW YORK

COMMITTEE ON  
ENERGY AND COMMERCE

SUBCOMMITTEES:  
ENERGY AND AIR QUALITY  
TELECOMMUNICATIONS AND THE INTERNET

COMMITTEE ON  
INTERNATIONAL RELATIONS

SUBCOMMITTEES:  
EUROPE AND EMERGING THREATS  
MIDDLE EAST AND CENTRAL ASIA

VICE CHAIRMAN, DEMOCRATIC  
TASK FORCE ON HOMELAND SECURITY

**INSIDE MAIL**

2151 RAYBURN HOUSE OFFICE BUILDING  
WASHINGTON, DC 20515-3217  
(202) 225-2464

Congress of the United States

House of Representatives

Washington, DC 20515-3217

LEGISLATIVE RESOURCE CENTER

2006 JUN -8 AM 10:30

OFFICE OF THE CLERK  
U.S. HOUSE OF REPRESENTATIVES

DISTRICT OFFICES:  
3655 JOHNSON AVENUE  
BRONX, NY 10463  
(718) 796-9700

6 GRAMATAN AVENUE  
SUITE 205  
MOUNT VERNON, NY 10550  
(914) 699-4100

361 WEST NYACK ROAD  
WEST NYACK, NY 10994  
(845) 735-1000

Website: [www.house.gov/engel](http://www.house.gov/engel)

June 8, 2006

The Honorable Karen L. Haas  
Office of the Clerk  
H-154 The Capitol  
Washington DC 20515-6601

Dear Ms. Haas:

I write to correct a typographical error in my 2005 Annual Financial Disclosure Report submitted to your office on May 15, 2006. On Schedule 7, the dates of travel for my trip to Las Vegas with the National Association of Broadcasters should have been listed as April 16-19, 2005 rather than April 16-29, 2005.

Thank you for your attention to this matter. I appreciate your assistance. Please call me if you have any questions regarding this matter.

Sincerely,



Eliot L. Engel  
Member of Congress

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

**FORM A**  
For use by Members, officers, and employees

Page 1 of 5  
2006 MAY 15 PM 12:01  
OFFICE OF THE CLERK  
U.S. HOUSE OF REPRESENTATIVES

2161 Rayburn House Office Building Washington, DC 20515  
(Full Name)  
Eliot L. Engel

Daytime Telephone:  
202-225-2464

Filer Status:  Member of the U.S. House of Representatives  
State: NY District: 17

Officer Or Employee  
Employing Office:

Report Type:  Annual (May 15)  Amendment  Termination

Termination Date:

**HAND DELIVERED**  
(Office Use Only)  
A \$200 penalty shall be assessed against anyone who files more than 30 days late.

**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? <b>If yes, complete and attach Schedule I.</b>	Yes <input checked="" type="checkbox"/> No <input 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)? <b>If yes, complete and attach Schedule VI.</b>	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? <b>If yes, complete and attach Schedule II.</b>	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)? <b>If yes, complete and attach Schedule VII.</b>	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? <b>If yes, complete and attach Schedule III.</b>	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? <b>If yes, complete and attach Schedule VIII.</b>	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? <b>If yes, complete and attach Schedule IV.</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? <b>If yes, complete and attach Schedule IX.</b>	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? <b>If yes, complete and attach Schedule V.</b>	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**

Trusts-- 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"/>
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 <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>Eliot L. Engel</i>	5-11-06

**SCHEDULE I - EARNED INCOME**

Name Eliot L. Engel

Page 2 of 5

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$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.

Source	Type	Amount
Issue Dynamic Inc	Spouse Salary	n/a

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

Name Eliot L. Engel

Page 3 of 5

BLOCK A <b>Asset and/or Income Source</b>	BLOCK B <b>Year-End Value of Asset</b>	BLOCK C <b>Type of Income</b>	BLOCK D <b>Amount of Income</b>	BLOCK E <b>Transaction</b>
<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>Congressional Federal Credit Union</p>	<p>\$15,001 - \$50,000</p>	<p>Interest</p>	<p>\$201 - \$1,000</p>	
<p>Israeli Bonds</p>	<p>\$1,001 - \$15,000</p>	<p>Interest</p>	<p>\$1 - \$200</p>	
<p>US Bonds</p>	<p>\$1,001 - \$15,000</p>	<p>Interest</p>	<p>\$201 - \$1,000</p>	
<p>State of New York</p>	<p>\$1,001 - \$15,000</p>	<p>Other: Retirement Pension</p>	<p>NONE</p>	

**SCHEDULE V - LIABILITIES**

Name Eliot L. Engel

Page 4 of 5

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 your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded \$10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Congressional Federal Credit Union	credit card	\$10,001 - \$15,000

**SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS**

Name Eliot L. Engel

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
National Albanian American Council	July 1-10	DC-Albania-Montenegro- Kosova-New York	Y	Y	Y	n/a
National Association of Broadcasters	April 16-29	DC-Las Vegas-DC	Y	Y	Y	n/a
Museum of the History of Polish Jews	March 21- 24	DC-Krakow-Warsaw-DC	Y	Y	N	n/a
Association of American Railroads	February 18-22	DC-Florida-DC	Y	Y	Y	2 days