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U.S. HOUSE OF REPRESENTATIVES

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

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

Paul E. Gillmor

(Full Name)

7750 North County Road 51 Old Fort, OH 44861

(Mailing Address)

202-225-6405

Daytime Telephone:

<b>Filer Status</b>	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: OH	<input type="checkbox"/> Officer Or Employee	Employing Office:
<b>Report Type</b>	<input checked="" type="checkbox"/> Annual (May 15)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Termination Date:

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? If yes, complete and attach Schedule I.	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)? 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 checked="" type="checkbox"/> No <input 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 <i>Paul E. Gillmor</i>	Date (Month, Day, Year) MAY 15 2006
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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.

# SCHEDULE I - EARNED INCOME

Name Paul E. Gillmor

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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) 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
State of Ohio	Spouse salary	N/A
Public Employees Retirement System of Ohio	Pension for service prior to entering Congress	\$48,165
Gillmor Financial Services	Pension for service prior to entering Congress	\$50,000

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

Name Paul E. Gillmor

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BLOCK A		BLOCK B	BLOCK C	BLOCK D	BLOCK E
<b>Asset and/or Income Source</b> 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.  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.		<b>Year-End Value of Asset</b> 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."	<b>Type of Income</b> 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)	<b>Amount of Income</b> 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.	<b>Transaction</b> Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
SP	AIG - stock	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
	American Movil - stock	\$50,001 - \$100,000	DIVIDENDS	\$1 - \$200	
	Berkshire Hathaway	\$15,001 - \$50,000	DIVIDENDS	NONE	
	Charles Schwab & Co margin account	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
	Comfort Systems - stock	\$15,001 - \$50,000	DIVIDENDS	NONE	
	David Phillips note	\$1,001 - \$15,000	INTEREST	\$1,001 - \$2,500	

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

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DeNovo Corporation - stock	\$1,001 - \$15,000	DIVIDENDS	NONE	
Dodge & Cox Stock Fund - mutual fund	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	
Emerald Bank - stock	\$15,001 - \$50,000	DIVIDENDS	NONE	
EZ Color - note	\$250,001 - \$500,000	INTEREST	\$15,001 - \$50,000	
Fidelity Spartan Money Market - mutual fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
First Federal account	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
First Service - stock	\$15,001 - \$50,000	DIVIDENDS	NONE	
First Solar - stock	\$1 - \$1,000	DIVIDENDS	NONE	
Gillmor Family Partnership	\$50,001 - \$100,000	Other: (Please specify)	\$1,001 - \$2,500	
Gillmor Financial Services - stock	\$5,000,001 - \$25,000,000	DIVIDENDS	\$100,001 - \$1,000,000	
Icon Energy Fund - mutual fund	\$15,001 - \$50,000	DIVIDENDS	NONE	S
Inter-Tel - stock	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
Max & Erma's Restaurants - stock	None	DIVIDENDS	NONE	S
National Research Corporation - stock	\$15,001 - \$50,000	DIVIDENDS	NONE	

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

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SP	Northwest Natural Gas - stock	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	Oakmark Select - mutual fund	\$50,001 - \$100,000	DIVIDENDS	\$201 - \$1,000	
	Ohio Legacy	\$1,001 - \$15,000	DIVIDENDS	NONE	
SP	Ohio Public Employees Comp Program	\$50,001 - \$100,000	INTEREST	\$1,001 - \$2,500	
	Old Fort Bank account	\$50,001 - \$100,000	INTEREST	\$201 - \$1,000	
SP	Old Fort Bank account	\$1 - \$1,000	INTEREST	\$1 - \$200	
	Old Fort Bank IRA account	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	
SP	Old Fort Bank IRA account	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	
	Omnicare - stock	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	P
	Paul M. Gillmor Company - stock	\$250,001 - \$500,000	DIVIDENDS	\$5,001 - \$15,000	
	Popular, Inc - stock	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	Southwest Natural Gas - stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Sprint-Nextel - stock	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
SP	T. Rowe Price funds	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	

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

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	Universal Electronics - stock	\$15,001 - \$50,000	DIVIDENDS	NONE	
SP	US Bank - savings account	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	
	Vanguard Short Term Bond Fund - mutual fund	\$15,001 - \$50,000	DIVIDENDS	\$5,001 - \$15,000	S
	Vanguard Total Stock Market Fund - mutual fund	\$100,001 - \$250,000	DIVIDENDS	\$1,001 - \$2,500	
	Wright-Patman Congressional Credit Union	\$1,001 - \$15,000	INTEREST	\$1 - \$200	

# SCHEDULE IV - TRANSACTIONS

Name Paul E. Gillmor

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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 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
	Max & Erma's Restaurants	S	02-07-2005	\$15,001 - \$50,000
	Icon Energy Fund	S	11-11-2005	\$15,001 - \$50,000
	Omnicare	P	05-18-2005	\$15,001 - \$50,000
	Vanguard Short Term Bond Fund	S	04-11-2005	\$100,001 - \$250,000

**SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS**

Name Paul E. Gillmor

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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
Consumer Electronics Association	Jan 6-9	Columbus OH - Las Vegas NV - Columbus OH	Y	Y	Y	N/A

# SCHEDULE VIII - POSITIONS

Name Paul E. Gillmor

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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
Director	Gillmor Financial Services
Director	Old Fort Banking Company
Director	DeNovo Corporation
Director	Paul M. & Lucy J. Gillmor Foundation
Director	Paul M. Gillmor Company

# FOOTNOTES

Name Paul E. Gillmor

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Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule III	Stock increased in value	American Movil - stock
2	Schedule III	Decreased balance in account	Charles Schwab margin account
3	Schedule III	Reduction due to partial payment received	David Phillips note
4	Schedule III	Change due to increase in stock value	Vanguard Total Stock Market Fund - mutual fund