

UNITED STATES HOUSE OF REPRESENTATIVES

2007 FINANCIAL DISCLOSURE STATEMENT

FORM A

For use by Members, officers, and employees

HAND DELIVERED

Barbara Cubin

(Full Name)

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(Mailing Address)

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2007 MAY -9 PM 5:11
OFFICE USE ONLY
MC

Filer Status

Member of the U.S. House of Representatives

State: WY
District: AL

Officer or Employee

Employing Office:

Report Type

Annual (May 15)

Amendment

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 No

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

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 No

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

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 No

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

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 No

IX. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX.

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.

Yes No

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 No

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?

Yes No

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 18 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.

Barbara Cubin

5-8-07

SCHEDULE III — ASSETS AND “UNEARNED” INCOME

Continuation Sheet (if needed)

Name

Cubin

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SP, DC, JT	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	
	A	B	C	D	E	F	G	H	I	J	K	L	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	Other Type of Income (Specify)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	P, S, M	
	Universal Display Corp		X											X						X												
	Cascade Int	X												X						X												
	Monsanto	X												X						X												
	SB Total Return Fund	X												X			X			X												
	Investment Co. of Amer.			X										X			X			X												
	Lincoln Legacy Annuity				X									X			X			X												
	SB Money Fund		X												X					X												
	State Street Money Fund			X										X						X												
	Casper Mtn Land				X															X												
	Garfield Peak Land					X														X												
	TSP					X														X												
	CFCU Savings		X												X					X												

SCHEDULE VIII — POSITIONS

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 other 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
Board of Directors	National Rifle Association

SCHEDULE IX — AGREEMENTS

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