

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT

FORM A Page 1 of 5
For use by Members, officers, and employees

Geoffrey C. Davis
(Full Name)

202-225-3465
(Daytime Telephone)

LEGISLATIVE RESOURCE CENTER

2009 MAY 13 AM 9:51

MC

(Office Use Only)

Filer Status

Member of the U.S. House of Representative

State: KY
District: 4

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 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 \$335 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 \$335 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 type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input 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? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE I - EARNED INCOMEName *Geoffrey C. Davis*

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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) 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.

Source	Type	Amount
Republic Consulting, Inc.	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Geoffrey C. Davis

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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 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.</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>Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA". For all other assets including all IRAs, indicate the type of income by checking the appropriate box below. Dividends and Interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during the calendar year.</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, including all IRAs, indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
JT	FERS Thrift Savings Plan	\$50,001 - \$100,000	None	NONE	
JT	Pentagon Federal CU	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
JT	Republic Consulting, Inc.	\$15,001 - \$50,000	None	NONE	
JT	USAA Federal Savings Bank	\$15,001 - \$50,000	INTEREST	\$1 - \$200	

SCHEDULE V - LIABILITIES

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	Creditor	Type of Liability	Amount of Liability
JT	Heritage Bank, Burlington, KY	Campaign Loan	\$50,001 - \$100,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Geoffrey C. Davis

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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 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
Aspen Institute Islamic Politics Conference	May 25-31	CVG-Rome-CVG	Y	Y	Y	None

HAND DELIVERED

Page 1 of 11 LEGISLATIVE RESOURCE CENTER

**UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT**

FORM A
For use by Members, officers, and employees

2008 MAY 14 PM 4:44

Susan A. Davis
(Full Name)

2022252040
(Daytime Telephone)

U.S. HOUSE OF REPRESENTATIVES

MC

(Office Use Only)

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representative	State: <u>CA</u> District: <u>53</u>	<input type="checkbox"/> Officer Or Employee	Employing Office: _____	A \$200 penalty shall be assessed against anyone who files more than 30 days late.
	Report Type	<input checked="" type="checkbox"/> Annual (May 15)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	

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? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule I.	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule VI.
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? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule II.	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule VII.
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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? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule IV.	IX. Did you have any reportable agreement or arrangement with an outside entity? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule IX.
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SCHEDULE I - EARNED INCOME

Name Susan A. Davis

Page 2 of 11

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.

Source	Type	Amount
Self Employment	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Susan A. Davis

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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 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.</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>Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA". For all other assets including all IRAs, indicate the type of income by checking the appropriate box below. Dividends and Interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during the calendar year.</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, including all IRAs, indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
JT	4113-15 Arbor Vitae San Diego, CA	\$250,001 - \$500,000	R/RENT	\$15,001 - \$50,000	
JT	American International Group	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Ariel Fund	None	None	NONE	S
JT	Ariel Growth FD	None	None	NONE	S
	Artio FDS Intl Equity FD CL A	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
JT	Call-Amer Inc. Prop IV	\$15,001 - \$50,000	CAPITAL GAINS	\$1,001 - \$2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Susan A. Davis

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JT	Cisco Systems, Inc.	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Costco Wholesale Corp	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	Dreyfus Fund Class Z (Frmly Dreyfus GNMA Fund)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Dreyfus Funds GNMA Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Fidelity Canada	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	PS(part)
SP	Fidelity Cash Reserves	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	
SP	Fidelity Contrafund	\$50,001 - \$100,000	DIVIDENDS	\$201 - \$1,000	P
SP	Fidelity Emerging Markets	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Fidelity Invt Tr Cda Fd	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	P
JT	Fidelity Select Portfolios	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	Fidelity Southeast Asia	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	S(part)
JT	General Electric	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	
SP	ICON Energy Fund	\$1,001 - \$15,000	DIVIDENDS	\$2,501 - \$5,000	P
JT	Icon Funds Energy	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Susan A. Davis

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SP	ICON Healthcare	None	None	NONE	S
SP	Janus Contrarian Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	P
SP	Janus Invt Fd	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	P
	Julius Baer Invt Funds	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
	NRS Bond Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	NRS Large Cap Fd (Frmly Svgs Pls LrgCp Bind Fd)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	NRS Large Cap Fund (Frmly Svgs Pls LrgCp Bind Fd)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	NRS Mid Cap Fund (Frmly SPP MD Cap Mgf Fd)	\$1,001 - \$15,000	None	NONE	
	NRS Mid Cap Fund (Frmly SPP MD Cap Mgf Growth)	\$15,001 - \$50,000	None	NONE	
	NRS Short Term Inv Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	NRS Small Cap Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Parnassus FD Equity Income	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Pimco Low Duration Fd (Fmrly Pimco FDS PAC Invst Mgmt)	\$100,001 - \$250,000	DIVIDENDS	\$5,001 - \$15,000	P
	Pimco Real Return Fd	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Susan A. Davis

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JT	Procter & Gamble	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	Rowe T Price Equity (Fmrly T Rowe Price Equity Income)	\$50,001 - \$100,000	DIVIDENDS	\$5,001 - \$15,000	P
	Rowe T Price Mid Cap Growth	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
SP	Rowe T Price Mid-Cap (Fmrly T Rowe Price Mid Cap Gr)	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	P
SP	Selected American Shares	\$50,001 - \$100,000	DIVIDENDS	\$201 - \$1,000	
SP	T Rowe Price Emerging Euro	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
JT	T Rowe Price Intl Energ Euro	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	S(part)
SP	TD Ameritrade Money Market	\$100,001 - \$250,000	INTEREST	\$2,501 - \$5,000	
SP	TD Ameritrade Money Market	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	TD Ameritrade Money Market	\$1 - \$1,000	INTEREST	\$1 - \$200	
	Third Avenue Tr Value Fd	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Vanguard 500 Index Fd	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	Vanguard 500 Index Fd (Fmrly Vanguard Index Trust 500)	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	P
JT	Vanguard Limited Term Tax Exempt Fund	None	None	NONE	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Susan A. Davis

Page 7 of 11

SP	Vanguard Shr Trm Investment (Fmrly Vanguard Fixed Income)	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	P
JT	Washington Mutual	\$1,001 - \$15,000	None	NONE	
SP	Wells Fargo Small Cap	\$1,001 - \$15,000	None	NONE	S(part)

SCHEDULE IV - TRANSACTIONS

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 exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. 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. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Ariel Fund	S	5-19-08	\$15,001 - \$50,000
JT	Ariel Growth FD	S	5-19-08	\$1,001 - \$15,000
SP	Fidelity Canada	P	5-19-08	\$1,001 - \$15,000
SP	Fidelity Canada	S(part)	12-23-08	\$1,001 - \$15,000
SP	Fidelity Contrafund	P	4-9-08	\$1,001 - \$15,000
SP	Fidelity Contrafund	P	5-19-08	\$1,001 - \$15,000
SP	Fidelity Contrafund	P	1-28-08	\$1,001 - \$15,000
SP	Fidelity Invt Tr Cda Fd	P	5-19-08	\$15,001 - \$50,000
SP	Fidelity Southeast Asia	S(part)	12-23-08	\$1,001 - \$15,000
SP	ICON Energy Fund	P	11-10-08	\$1,001 - \$15,000
SP	ICON Healthcare	S	3-19-08	\$15,001 - \$50,000

SCHEDULE IV - TRANSACTIONS

Name Susan A. Davis

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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 exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. 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. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	ICON Healthcare	S	5-28-08	\$1,001 - \$15,000
SP	Janus Contrarian Fund	P	2-5-08	\$1,001 - \$15,000
SP	Janus Invt Fd	P	12-15-08	\$1,001 - \$15,000
SP	Pimco Low Duration Fd (Fmrly Pimco FDS PAC Invst Mgmt)	P	12-11-08	\$1,001 - \$15,000
SP	Rowe T Price Equity (Fmrly T Rowe Price Equity Income)	P	3-31-08	\$1,001 - \$15,000
SP	Rowe T Price Mid-Cap (Fmrly T Rowe Price Mid Cap Gr)	P	12-16-08	\$1,001 - \$15,000
JT	T Rowe Price Intl Energ Euro	S(part)	12-26-08	\$1,001 - \$15,000
SP	Vanguard 500 Index Fd (Fmrly Vanguard Index Trust 500)	P	12-30-08	\$1,001 - \$15,000
SP	Vanguard Shr Trm Investment (Fmrly Vanguard Fixed Income)	P	12-1-08	\$1,001 - \$15,000
SP	Wells Fargo Small Cap	S(part)	3-24-08	\$15,001 - \$50,000

SCHEDULE V - LIABILITIES

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SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Washington Mutual	Mortgage on 4112-15 Arbor Vitae	\$50,001 - \$100,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Susan A. Davis

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 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
Aspen Institute	May 26 - June 1	San Diego - Rome, Italy - San Diego	Y	Y	Y	None