

**UNITED STATES HOUSE OF REPRESENTATIVES  
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007**

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

**HAND DELIVERED**

Robert Edward Latta

(Full Name)

202-225-6405

(Daytime Telephone)

2008 MAY 12 PM 1:21

RECORDED CENTER

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Filer Status  Member of the U.S. House of Representatives

State: OH District: 05

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?	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)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. If yes, complete and attach Schedule I. 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"/>	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)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
III. If yes, complete and attach Schedule II. 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?	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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
IV. If yes, complete and attach Schedule III. 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 type="checkbox"/> No <input checked="" type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
V. If yes, complete and attach Schedule IV. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	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  No

**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  No

**SCHEDULE I - EARNED INCOME**

Name Robert Edward Latta

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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
Ohio House of Representatives, Columbus, Ohio	Legislative Salary	\$53,605.41
Robert E. Latta, Attorney at Law, Bowling Green, Ohio	Attorney fees	\$5,571
Bowling Green State University, Bowling Green, Ohio	Salary-Spouse	n/a
Bowling Green State University Foundation, Inc., Bowling Green, Ohio	Salary-Spouse	n/a

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

Name Robert Edward Latta

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. Check "None" if asset did not generate any income during the calendar year. 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. Check "None" if no income was earned.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
JT	Fidelity Asset Manager 50%	\$50,001 - \$100,000	DIVIDENDS/CAPITAL GAINS	\$2,501 - \$5,000	
SP	Fidelity Blue Chip Growth	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
JT	Fidelity Contrafund	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	
JT	Fidelity Equity Income II	\$100,001 - \$250,000	DIVIDENDS/CAPITAL GAINS	\$5,001 - \$15,000	
JT	Fidelity Equity Income II	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	
JT	Fidelity Fund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	

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

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JT	Fidelity Growth and Income	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
JT	Fidelity Low Priced Stock	\$100,001 - \$250,000	DIVIDENDS/CAPITAL GAINS	\$2,501 - \$5,000	
DC	Fidelity Puritan	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	
	Fidelity Puritan	\$50,001 - \$100,000	DIVIDENDS/CAPITAL GAINS	\$2,501 - \$5,000	
JT	Fidelity Puritan	\$50,001 - \$100,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	
DC	Fidelity Puritan	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	
	Fidelity Value	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
SP	Fidelity VIP Equity Income Portfolio-Init	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
SP	Fidelity VIP Growth Portfolio-Init	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
	FirstMent Bank, Wayne, Ohio	None	INTEREST	\$201 - \$1,000	
	Huntington National Bank, fka Sky Bank, Bowling Green, Ohio	\$100,001 - \$250,000	INTEREST	\$2,501 - \$5,000	
SP	ING MFS Total Return Portfolio-S	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1 - \$200	
SP	ING T Rowe Price Diver Mid Cap GR-1	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	NONE	
SP	ING VP Index Plus MidCap Portfolio-1	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	NONE	

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

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JT	Manor Care Inc., Toledo, Ohio	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200		
SP	Ohio Public Employees Retirement System-deferred benefit plan not self directed	\$100,001 - \$250,000	Other: Pension	n/a		
	Ohio Public Employees Retirement System-deferred benefits plan not self directed	\$100,001 - \$250,000	Other: Pension	n/a		
DC	Refcorp Zero	\$15,001 - \$50,000	INTEREST	\$1 - \$200		
DC	Resolution Funding Corporation	None	INTEREST	NONE		
DC	United States Treasury Bonds and Notes	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500		
JT	Vanguard 500 Index Fund	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500		