

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

FORM A
For use by Members, officers, and employees

NOT DELIVERED

Michael Richard Pence

(Full Name)

202-225-3021

(Daytime Telephone)

15 PM 5:16

(Office Use Only)

MC

Filer Status: Member of the U.S. House of Representatives
State: IN District: 06

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 <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 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 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

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? 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"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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SCHEDULE I - EARNED INCOME

Name Michael Richard Pence

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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
Immanuel Christian School	Spouse salary	N/A
self-employed artist	spouse salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael Richard Pence

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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>					
JT	Central Indiana School Employees Federal Credit Union	\$1 - \$1,000	INTEREST	\$1 - \$200	
DC	American Funds-UTMA	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
DC	American Funds-UTMA	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
DC	US Federal Savings Bonds	\$1,001 - \$15,000	None	NONE	
SP	College Choice-529 Investment Plan	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$1 - \$200	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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	CB&T custodial IRA Capital World Growth and Income Fund	\$1 - \$1,000	CAPITAL GAINS/DIVIDEN DS	NONE	P
SP	American Funds 529 EuroPacific Growth Fund	\$1,001 - \$15,000	DIVIDENDS/CAPI TAL GAINS	\$1,001 - \$2,500	
SP	American Funds 529 Capital World Growth and Income	\$1,001 - \$15,000	DIVIDENDS/CAPI TAL GAINS	\$1,001 - \$2,500	
SP	American Funds 529 Growth Fund of America	\$1,001 - \$15,000	DIVIDENDS/CAPI TAL GAINS	\$201 - \$1,000	
SP	American Funds 529 Fundamental Investors	\$1,001 - \$15,000	DIVIDENDS/CAPI TAL GAINS	\$1 - \$200	
SP	American Funds 529 Washington Mutual Fund Investors	\$1,001 - \$15,000	DIVIDENDS/CAPI TAL GAINS	\$201 - \$1,000	
SP	American Funds 529 Capital Income Builder	\$1,001 - \$15,000	DIVIDENDS/CAPI TAL GAINS	\$1,001 - \$2,500	E(part)
	CB&T Custodial IRA Growth Fund of America	\$1 - \$1,000	CAPITAL GAINS/DIVIDEN DS	NONE	P
	CB&T Custodial IRA Capital World Growth and Income	\$1 - \$1,000	DIVIDENDS/CAPI TAL GAINS	\$1 - \$200	P
	CB&T Custodial IRA Capital Income Builder	\$1 - \$1,000	DIVIDENDS/CAPI TAL GAINS	\$1 - \$200	P

SCHEDULE IV - TRANSACTIONS

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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. Provide a brief

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Merrill Lynch as Custodian IRA Merrill Lynch Bank USA RASP	E (Rolled Into New CB&T Custodial IRA)	9-28-07	\$1,001 - \$15,000
SP	American Funds-529 Educational Plan Capital Income Builder	E(part) (Rolled Portion Into New College (Investment Plan))	12-13-07	\$1,001 - \$15,000
SP	College Choice-529 Investment Plan	P	12-13-07	\$1,001 - \$15,000
	CB&T custodial IRA Capital World Growth and Income Fund	P	10-03-07	\$284.88
	CB&T Custodial IRA Growth Fund of America	P	10-03-07	\$256.74
	CB&T Custodial IRA Capital World Growth and Income	P	10-03-07	\$284.88
	CB&T Custodial IRA Capital Income Builder	P	10-03-07	\$281.21

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

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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
The Heritage Foundation	2/1-2	Dc-Baltimore-DC	Y	Y	N	None

MICHAEL R. PENCE
SIXTH DISTRICT, INDIANA

COMMITTEES:
JUDICIARY
SUBCOMMITTEES:
CONSTITUTION, CIVIL RIGHTS, AND CIVIL LIBERTIES
COURTS, THE INTERNET, AND
INTELLECTUAL PROPERTY
FOREIGN AFFAIRS
SUBCOMMITTEE:
MIDDLE EAST AND SOUTH ASIA—RANKING MEMBER

Congress of the United States
House of Representatives
Washington, DC 20515-1406

WASHINGTON OFFICE:
1317 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-3021
FAX: (202) 225-3382

DISTRICT OFFICES:
1134 MERIDIAN PLAZA 204 SOUTH WALNUT STREET
ANDERSON, IN 46016 MUNCIE, IN 47305
(765) 640-2919 (765) 747-5566
FAX: (765) 640-2922 FAX: (765) 747-5586

50 NORTH 5TH STREET
RICHMOND, IN 47374
(765) 962-2883
FAX: (765) 962-3225

May 15, 2008

The Honorable Lorraine C. Miller
The Clerk, U.S. House of Representatives
B-106 Cannon House Office Building
Washington, DC 20515

To Whom It May Concern:

During the 2001-2006 calendar years, I inadvertently did not report a Merrill Lynch Custodian IRA, Merrill Lynch Bank USA RASP that should have been listed the previous years on Schedule III. I became aware of the asset invested years ago when an account statement was mailed to our home last year at which point I then rolled it into a new account with the purchase of a CB&T Custodial IRA correctly reported as a transaction on Schedule IV. The previous years it should have been listed on Schedule III as a Merrill Lynch Custodian IRA, Merrill Lynch Bank USA RASP. It was valued between \$1,001-\$15,000 and earned interest between \$1-200.

These assets have been correctly reported on my 2007 disclosure filed on May 15, 2007. Thank you for your help in this matter.

Sincerely,



Mike Pence
Member of Congress