

DAVID G. REICHERT
8TH DISTRICT, WASHINGTON

COMMITTEE ON WAYS AND MEANS
SUBCOMMITTEE ON TRADE
SUBCOMMITTEE ON HEALTH



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Congress of the United States
House of Representatives
Washington, DC 20515-4708

June 13, 2011

U.S. House of Representatives
Office of the Clerk
U.S. Capitol, Room H154
Washington, DC 20515

To whom it may concern:

I attended a conference last year on May 16-17, 2010 sponsored by the National Association of Police Athletic/Activities Leagues, Inc.

The conference took place in New Orleans, LA. I flew on U.S. Airways on Sunday, May 16th out of Reagan National at 11:45am and into New Orleans at 1:27pm. I flew out of New Orleans on Monday, May 17th at 4:40pm arriving at Reagan National at 8:10pm. The flight cost was \$379.40

The lodging was at the Marriott New Orleans Riverfront where the conference was held. The cost for the room was \$120.

There was no allowance for food given.

If you have any questions please feel free to contact my executive assistant, Nichole Robison at 202-225-7761. Thank you for your help in this matter.

Sincerely,


Rep. Dave Reichert
Member of Congress

HAND DELIVERED
MC

LEGISLATIVE RESOURCE CENTER
2011 JUN 13 PM 2:03
U.S. HOUSE OF REPRESENTATIVES

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENTFORM A
For use by Members, officers, and employees

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HOUSE OF REPRESENTATIVES

DAVID GEORGE REICHERT

(Full Name)

202-225-7761

(Daytime Telephone)

HAND DELIVERED
(Office Use Only)

Filer Status	☒ Member of the U.S. House of Representatives	State: WA District: 08	☐ 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 ☒ No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$200 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 \$200 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 Ethics 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? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes ☐ No ☒

SCHEDULE I - EARNED INCOMEName **DAVID GEORGE REICHERT**

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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
DEPT OF RETIREMENT SYSTEMS	PENSION/RETIREMENT	\$105,627

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name DAVID GEORGE REICHERT

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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
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 reportable asset or source of income which generated more than \$200 in "unearned" income during the year. Provide complete 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 for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any other assets excluded from the FARA or FARA in a subsequent administration or		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."	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
BANK OF AMERICA		\$1,001 - \$15,000	INTEREST	\$1 - \$200	
FEDERAL CREDIT UNION		\$1,001 - \$15,000	INTEREST	\$1 - \$200	
PIMCO TOTAL RETURN ADMIN		\$15,001 - \$50,000	None	NONE	
PREVAIL CREDIT UNION		\$1,001 - \$15,000	INTEREST	\$1 - \$200	
SP SNOQUALMIE CASINO (W-2G - GAMBLING WINNINGS)		None	Other: GAMBLING - GAME OF CHANCE	\$201 - \$1,000	
T. ROWE PRICE EQUITY INCOME		\$15,001 - \$50,000	None	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name **DAVID GEORGE REICHERT**

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	T. ROWE PRICE MIDCAP GROWTH	\$15,001 - \$50,000	None	NONE	
	T. ROWE PRICE PERSONAL STRATEGY GROWTH	\$15,001 - \$50,000	None	NONE	
SP	WA DEPT OF RETIREMENT SYSTEMS (NOT SELF DIRECTED)	\$15,001 - \$50,000	None	NONE	
	WA DEPT OF RETIREMENT SYSTEMS (NOT SELF DIRECTED)	\$100,001 - \$250,000	None	NONE	