

LEGISLATOR'S FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2006

NOTE: Before completing this Disclosure Statement, please carefully read the enclosed instructions. If additional space is needed, please duplicate this form as necessary and staple all pages together. An original signature is required on page 4; a facsimile, photocopy or stamp signature is not acceptable. Questions should be directed to Legislative Counsel at (609) 292-4625. The completed disclosure form is due May 15, 2007 and should be sent to: Joint Legislative Committee on Ethical Standards, 2nd Floor, State House Annex, Room 210, PO Box 068, Trenton, New Jersey 08625-0068.

WAYNE R. BRYANT

PRINT NAME

CHECK APPROPRIATE HOUSE: Senate General Assembly

Provide the following information for yourself, your spouse and minor children (unless otherwise indicated) for calendar year 2006. For each entry, check the box of the appropriate recipient. When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000 - \$24,999.99; 3=\$25,000 - \$49,999.99; 4=\$50,000 or more.

I. **EARNED INCOME:** List the name, address and amount for each source of earned income. (Earned income includes salaries, bonuses, royalties, commissions, profit sharing and fees.)

	Name	Address	Circle Amount Code	Self	Spouse	Child
1)	Zeller & Bryant	10 Melrose Ave., Cherry Hill, NJ	1 2 3 ④	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	NJ State Senate	State House, Trenton, NJ	1 2 ③ 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	GC Bd. of Social Services	Court House, Woodbury, NJ	1 2 3 ④	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)	Susquehanna/Patriot Bank (See Attachment A)	Marlton, NJ	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

II. **UNEARNED INCOME:** List the name, address and amount for each source of unearned income. (Unearned income includes rents, dividends and income from investments, trusts and estates.)

A. RENTS

	Property Address	Tenant Name	Circle Amount Code	Self	Spouse	Child
1)	5730 Midnight Pass Rd., #603B	Arranged through Condo Assoc.	1 ② 3 4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)	Siesta Key, FL		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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B. DIVIDENDS

Name	Address	Circle Amount Code	Self	Spouse	Child
1) See Attachment A		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. INCOME from investments, trusts and estates (including capital gains).

Name	Address	Circle Amount Code	Self	Spouse	Child
1) Susquehanna/Patriot Bank	Marlton, NJ	① 2 3 4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2) Commerce Bank	Cherry Hill, NJ	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Pennsylvania State Employ. Union		① 2 3 4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4) Wachovia Securities		① 2 3 4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5) State Farm Life (See Attachment A-Dividends)		① 2 3 4		<input checked="" type="checkbox"/>	

III. HONORARIA and FEES: List the name, address, nature and amount for each source of honorarium or fee received by you or your spouse for personal appearances, speeches or writings.

Name & Nature of Honorarium or Fee	Address	Circle Amount Code	Self	Spouse
1) None		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
2)		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
3)		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
4)		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>

IV. REIMBURSEMENTS or PREPAID EXPENSES for TRAVEL, LODGING or SUBSISTENCE: List the name, address, nature and amount for each source of reimbursement or prepaid expense and circle whether the source is a profit (P), nonprofit (N), or governmental (G) entity.

Name & Nature of Reimbursement or Prepaid Expense	Address	Circle Amount Code	Self	Spouse	Child	Circle P, N or G
1) Zeller & Bryant	10 Melrose Ave., Cherry Hill, NJ	1 ② 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	① P N G
2) State of New Jersey	State House, Trenton, NJ	① 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N ① G
3) DRPA	One Port Center, Camden, NJ	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N G
4)		① 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N ① G

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V. GIFTS: List the name, address, nature and amount for each source of gift in excess of \$250.

	Name & Nature of Gift	Address	Circle Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	None		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

VI. LIABILITIES: List the name and address of each creditor for you or your spouse and the nature and amount of each liability except for liabilities which are: (a) less than \$15,000 and owed to a relative; (b) less than \$3,000 and owed to any other person; (c) loans secured by a personal motor vehicle or household furniture or appliances; or (d) revolving charge accounts.

	Name & Nature of Liability	Address	Circle Amount Code				Self	Spouse
			1	2	3	4		
1)	Susquehanna Patriot Bank	Marlton, NJ	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

VII. FORGIVEN LIABILITIES: List the name and address of each former creditor for you or your spouse and the nature and amount of each forgiven liability which would have been required to be reported pursuant to VI above had it not been forgiven.

	Name & Nature of Forgiven Liability	Address	Circle Amount Code				Self	Spouse
			1	2	3	4		
1)	None		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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VIII. BUSINESS ORGANIZATIONS: List the name and address of all business organizations in which you or your spouse held an interest.

	Name	Address	Self	Spouse
1)	Zeller & Bryant, LLP	10 Melrose Ave., Cherry Hill, NJ	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
3)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
4)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

IX. OFFICES, TRUSTEESHIPS, OR DIRECTORSHIPS: List the title of each position held by you or your spouse in any firm, corporation, association, partnership or business and the name and address of the entity in which the position was held.

	Position Held	Name & Address of Entity	Self	Spouse
1)	Trustee	Susquehanna Patriot Bank, Marlton, NJ	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
3)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
4)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

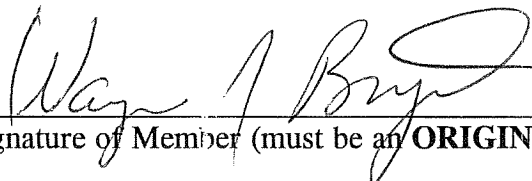
X. REAL ESTATE: Provide the address and a brief description for all real property in New Jersey in which you, your spouse, or minor child held an interest.

	Property Address	Description of Property	Self	Spouse	Child
1)	34 W. Fmlen Ave., Lawnside, NJ	Single Family Home	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	5 River Run, Lawnside, NJ	Single Family Home	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I certify that the above information is correct and complete to the best of my knowledge.

5/1/07

Date


 Signature of Member (must be an ORIGINAL signature, not a facsimile, stamp or photocopy)

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ATTACHMENT A

I. EARNED INCOME (continued)

5)	Rutgers University	5 th & Penn Sts., Camden, NJ	Code 2	Self
6)	Univ. of Medicine/Dentistry of NJ	Laurel Rd., Stratford, NJ	Code 2	Self
7)	DRPA	One Port Center, Camden, NJ	Code 4	Spouse

II. UNEARNED INCOME

B. DIVIDENDS

1)	McDonalds Corporation		Code 1	Self
2)	Exxon Mobile		Code 1	Self
3)	Wal-Mart		Code 1	Self
4)	AXA		Code 1	Self
5)	Home Depot		Code 1	Self
6)	Susquehanna Bancshares	Marlton, NJ	Code 1	Self
7)	GE		Code 1	Self
8)	Vanguard Group	PO Box 7800, Phila., PA	Code 1	Self
9)	Merck		Code 1	Self
10)	Dreyfus		Code 1	Self
11)	Agrere Systems		Code 1	Self
12)	AT&T		Code 1	Self
13)	AT&T Wireless		Code 1	Self
14)	Comcast Corp.		Code 1	Self
15)	Lucent Technologies		Code 1	Self
16)	Sun Bancorp		Code 1	Self
17)	Viacom Inc.		Code 1	Self
18)	Franklin Tax Free	Trenton, NJ	Code 1	Self
19)	Seligman Communications		Code 1	Self
20)	First Trust Insured Muns. 230		Code 1	Self
21)	NJ Insd. Muns. Inc. TR80, TR91, TR109, TR98, TR127, TR142, TR63		Code 1	Self
22)	Nuveen Tax Free 253, 273, 260, 217 State House, Trenton, NJ		Code 1	Self
23)	Tax Exempt Secs NJ. 176		Code 1	Self
24)	Essex County NJ Impt. A&H		Code 1	Self
25)	Tobacco Settlement	State House, Trenton, NJ	Code 1	Self
26)	Union Co. NJ Util. Author.	State House, Trenton, NJ	Code 1	Self
27)	NJ Economic Dev. Auth.	State House, Trenton, NJ	Code 1	Self
28)	NJ Sports & Expo Auth.	State House, Trenton, NJ	Code 1	Self
29)	Mercer County INMBIA	Trenton, NJ	Code 1	Self
30)	Somerset Hills Scho. Dist.	Trenton, NJ	Code 1	Self
31)	Woodbridge Twp. NJ Board of Ed.		Code 1	Self
32)	Delaware River Port Author. PA & NJ		Code 1	Self
33)	NJ State House & Mortg. Finan. Agency	Trenton, NJ	Code 1	Self

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