

Benjamin E. Giacchino  
Name

80  
District

Democrat  
Party Affiliation

# HOUSE OF REPRESENTATIVES OF THE STATE OF INDIANA

STATE HOUSE  
INDIANAPOLIS, INDIANA 46204

## STATEMENT OF ECONOMIC INTERESTS FOR THE CALENDAR YEAR 2005

This statement shall be filed by members not later than seven days following the first session day in January of each year and covers only activity occurring in the preceding calendar year. Non-incumbent candidates for the General Assembly must file this statement before filing a declaration of candidacy. All statements shall be filed with the Principal Clerk of the House, Room 3A-8, 3rd Floor State House, Indianapolis.

Additional pages may be inserted, if necessary, See IC 2-2.1-3, for any clarification of the questions.

Incumbent legislator (x)

Legislative candidate (x)

1. List the name of your employer(s) and the employer(s) of your spouse and the nature of the employer's business. "Employer" means any person or entity from whom the member or candidate for the Indiana General Assembly or his spouse received more than 33% of his non-legislative income.

NAME OF EMPLOYER	NATURE OF BUSINESS	Your Employer (x)	Spouse's Employer (x)
<u>eb. Roth Wehrly</u> <u>Graber Realtors</u>	<u>Real Estate</u>	<input checked="" type="checkbox"/>	<u>Housewife</u>

2. List the name of every sole proprietorship or professional practice operated by you or your spouse and the nature of the business.

<i>NAME OF BUSINESS</i>	<i>NATURE OF BUSINESS</i>	<i>Your Business (x)</i>	<i>Spouse's Business (x)</i>
None			

3. List the name of every partnership and limited liability company of which you or your spouse are a member and the nature of the business.

<i>NAME OF BUSINESS</i>	<i>NATURE OF BUSINESS</i>	<i>Your Business (x)</i>	<i>Spouse's Business (x)</i>
None			

4. List the name of any corporation of which you or your spouse are an officer or director and the nature of the corporation's business. Churches need not be listed.

<i>NAME OF BUSINESS</i>	<i>NATURE OF BUSINESS</i>	<i>Your Business (x)</i>	<i>Spouse's Business (x)</i>
None			

5. List the name of any corporation in which you, your spouse or unemancipated child own stock or stock options having a fair market value in excess of \$10,000. No time or demand deposit in a financial institution or an insurance policy need be listed.

<i>NAME OF BUSINESS</i>	<i>Your Stock (x)</i>	<i>Spouse's Stock (x)</i>	<i>Children's Stock (x)</i>
See Attached Portfolio statement	x	x	

6. List the name of any state agency or the supreme court of Indiana which licenses or regulates any of the following: (a) your profession or occupation, (b) your spouse's profession or occupation or (c) any proprietorship, partnership, corporation or limited liability company listed under items 2, 3, or 4. Also list the nature of the licensure or regulation. The requirement to file certain parts with the secretary of state or to register with the department of revenue as a retail merchant, manufacturer or wholesaler shall not be considered as licensure or regulation.

NAME OF STATE AGENCY	NATURE OF LICENSURE	Profession or Occupation (x)		Business listed under No. 2, 3, 4 (x)	
		You	Spouse	You	Spouse
Indiana Real Estate Commission	Real Estate	X			

7. List the name of any person whom you know to have been a lobbyist in the previous calendar year and whom you know to have purchased the following: (a) from you, your sole proprietorship or family business, goods or services for which the lobbyist paid in excess of \$100 or (b) from you partner, goods or services for which the lobbyist paid in excess of \$1,000. This subdivision does not apply to purchases made after December 31, 1998, by a lobbyist from a legislator's retail business made in the ordinary course of business at prices that are available to the general public. For purposes of this subdivision, a legislator's business is considered a retail business if the business is a retail merchant as defined by IC 6-2.5-1-8. "Lobbyist" means any person, firm, corporation or association registered under IC 2-7-2. "Family business" means a corporation in which you and your spouse own at least 80% of the voting stock, regardless of whether all or a portion is owned jointly or severally.

NAME OF LOBBYIST	Purchased over \$100 from you or your business (x)	Purchased over \$1,000 from your partner (x)
None		

8. List the name of any person or entity from whom you received any of the following: (a) any gift of cash from a lobbyist, (b) any single gift other than cash having a fair market value in excess of \$100 or (c) any gifts other than cash having a fair market value in the aggregate in excess of \$250. Gifts from a spouse or close relative need not be listed unless the donor has a substantial economic interest in a legislative matter. Campaign contributions need not be listed.

NAME OF DONOR	Any gift of cash from a lobbyist (x)	Any single gift over \$100 (x)	Total gifts over \$250 (x)
Indianapolis Motor Speedway		X	
Theater Owners		X	
		X	

9. List the name of any lobbyist: (a) who is a member of a partnership or limited liability company of which you are a partner or member or employee or (b) who is an officer or director of a corporation of which you are an officer, director or employee or (c) who is a manager of a limited liability company of which you are a member or employee. Describe the legislative matters which are the object of the lobbyist's activity.

NAME OF LOBBYIST	LEGISLATIVE MATTERS WHICH ARE THE OBJECT OF THE LOBBYIST'S ACTIVITY	Your Connection
None		

10. List the name of any person or entity on whose behalf you have appeared before, contacted or transacted business with any state agency or official thereof. List also the name of the state agency, the nature of the appearance and the cause number, if any. This does not apply when the services are rendered without compensation. "State agency" does not include state-supported colleges or universities or the agencies of any municipality or political subdivision of the state.

NAME OF PERSON	NAME OF STATE AGENCY	Nature of Contact, Appearance, Etc.	Cause Number
None			

I certify that the foregoing information is true, accurate and complete, as I am verily informed and believe.

Rep. Benjamin E. Gerwitz  
Signature

Filed with the Clerk of the Indiana House of Representatives this 4 day of January, 2006.

4442 Rembrandt  
Address  
Fort Wayne, IN 46804  
City

Sam Kuff, Deputy Clerk  
Name, Title

(260) 745-7861  
Area Code / Telephone

6510 CONSTITUTION DRIVE  
FORT WAYNE, IN 46804

PHONE: 260.436.2051  
FAX: 260.436.2536

**Dickmeyer-Boyce**  
FINANCIAL MANAGEMENT, INC.

# FAX

To: **Attn: State Representative - Ben Giaquinta** FROM: **Ian D. Boyce, CFP®**

FAX 317-233-5540

PAGES: 2 including this cover

PHONE

DATE: January 4, 2006

RE: Investment Asset Disclosure

CC: Client file

URGENT     FOR REVIEW     PLEASE COMMENT     PLEASE REPLY     PLEASE RECYCLE

REPRESENTATIVE GIAQUINTA:

Per our discussions please find below a summary of your stocks and mutual funds with balance in excess of \$10,000. I hope the summary will suffice.

If you need additional information, please do not hesitate to contact us!

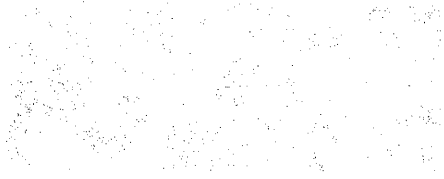
Sincerely,



Ian D. Boyce, CFP®

SECURITY	SYMBOL	AMOUNT
FPA NEW INCOME	FPA	\$19,768.48
TURNER ULTRA	TSDOX	\$22,415.15
WELLS FARGO - PREFERRED	GWF	\$11,112
LINDSAY MANUFACTURING	LNN	\$11,670

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Faint, illegible text or markings in the upper right quadrant, possibly bleed-through from the reverse side of the page.



The main body of the page contains several paragraphs of extremely faint text, which is illegible due to the low contrast and quality of the scan. The text appears to be organized into a structured format, possibly a list or a series of entries, but the specific details cannot be discerned.

January 4, 2006

NOBILITY HOMES	NOBH	\$11,090.75
FIRST EAGLE GLOBAL	SGENX	\$19,971.66
MERIDIAN VALUE	MVALX	\$13,750.32
MUHLENKAMP	MUHLX	\$12,151.37
BANK OF AMERICA	BAC	\$22,786.72
BP	BP	\$13,284
DTE ENERGY	DTE	\$35,107.16
FEDEX	FDX	\$12,429.96
FIFTH THIRD	FTB	\$11,361
GE	GE	\$11,167.52
JOHNSON AND JOHNSON	JNJ	\$10,994.65
LOWES	LOW	\$10,080.15

