Pat Edmund M. Mahern 97 Democrat

Name District Party Affiliation

HOUSE OF REPRESENTATIVES OF THE STATE OF INDIANA

STATE HOUSE
INDIANAPOLIS, INDIANA 46204

STATEMENT OF ECONOMIC INTERESTS FOR THE CALENDAR YEAR 2004

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 of 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)*
Mahern & Associates	Real Estate	self	

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

NAME OF BUSINESS	NATURE OF BUSINESS	Your Business (x)	Spouse's Business (x)
Mahenn & Associates	Real Estate	✓	

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.

NAME OF BUSINESS	NATURE OF BUSINESS	Your Business (x)	Spouse's Business (x)

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

NAME OF BUSINESS	NATURE OF BUSINESS	Your Business (x)	Spouse's Business (x)
Mahenn & Associates	Real Estate	✓	
R R OSS - Board	501c3	✓	
Teachers Treasurer	501c3	✓	

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.

NAME OF BUSINESS	Your Stock (x)	Spouse's Stock (x)	Children's Stock (x)
Communications Intelligence	✓		
Pharmos Corp	✓		
Stem Cell Inc	✓		
Sirius Satellite	✓		
Sun Microsystems	✓		
Horizon Offshore	✓		
Alliance Am. Adv. Centers	✓		
IRA Mutual Funds	✓		
401 K Mutual Funds	✓		

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*
Professional Lic	Real Estate Broker	X		2-4	
Professional Lic	Appraiser	X		2-4	

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)*

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 Allied Theaters owners		✓	
BAA Airport Parking Pass Coke-Cola Tickets		✓ ✓	
Centaur.		✓	

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*

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*

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

Edward M Maher
Signature

Filed with the Clerk of the Indiana House of Representatives this 10 day of January 2005.

Pam Kukpto, Deputy Clerk
Name, Title

2707 Allen Ave.
Address

Indianapolis, IN 46203
City

317-590-5899
Area Code / Telephone

STATE OF INDIANA
HOUSE OF REPRESENTATIVES
THIRD FLOOR STATE HOUSE
INDIANAPOLIS, INDIANA 46204

ED MAHERN
200 West Washington Street
INDIANAPOLIS, INDIANA 46204

COMMITTEES:
Environmental Affairs
FINANCIAL INSTITUTIONS
Elections and Apportionment, RMM

January 12, 2005

Caroline Spotts
Principal Clerk
Indiana House of Representatives
200 W. Washington Street
Indianapolis, IN 46204

Dear Ms. Spotts,

I write today to respectively request that my 2004 Statement of Economic Interest be amended to reflect the following

On September 21st, 2004, Centaur expensed one meal on my behalf in the amount of $147.78. My 2004 Statement of Economic Interest should be amended accordingly.

If you have any questions please feel free to contact me at 317-590-5899 or my Legislative Assistant, Sam Denton, at 232-9798.

Sincerely,

Ed Mahern

Ed Mahern
State Representative
House District 97