PRELIMINARY INFORMATION -EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? 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. they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct **EXEMPTION**—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? IV. Did you, your spouse, or a dependent child purchase, sell If yes, complete and attach Schedule III. 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 II. reporting period? II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I. Name: CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT **UNITED STATES HOUSE OF REPRESENTATIVES** If yes, complete and attach Schedule IV. . Did you or your spouse have "earned" income (e.g., salaries or Status Report Filer 200 Annual (May 17, 2010) Member of the U.S. House of Representatives ¥ AND State: District: **ANSWER EACH OF THESE QUESTIONS** Amendment Yes Yes Yes 🗡 Yes X Yes Ė \sim Daytime Telephone: <mark>8</mark> <u>Z</u> 8 <u>Z</u> o Employee Officer or \times If yes, complete and attach Schedule IX. with an outside entity? If yes, complete and attach Schedule VIII reportable travel or reimbursements for travel in the reporting VII. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI. Did you have any reportable agreement or arrangement of filing in the current calendar year? VIII. Did you hold any reportable positions on or before the date It yes, complete and attach Schedule VII. period (worth more than \$335 from one source)? For use by Members, officers, and employees Did you, your spouse, or a dependent child receive any appropriate schedule attached for each "Yes" response. Employing Office: Each question in this part must be answered and the Termination -158 ANSWER EACH OF THESE QUESTIONS Fermination Date: 757-1758 Laisi Ative Resource Clait 2010 MAY 19 PM 4: 29 against anyone who files more A \$200 penalty shall be assessed than 30 days late. DELIVERED (Office Use Only) HANDage 1 of 15 Yes Yes Yes X Yes Yes X Yes 8 Š ٥ ا No X ö ₹ |

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SCHEDULE I — EARNED INCOME

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. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

Exclude: Willially pay (such as National Guard of Reserve pay), received interinity programs, and benefits received under the Social Security Act.	its received under the Social Sec	Curry Act.
Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Earp Whn FC, Cheny HII, WI		\$ 29,660
(Income earned in 2008 before becoming		
a Member of Congress, but not paid out by		
Earp (ohn until 2009 when clients prid tees)		
Earl John PC, (hum HIL, N)	Spavise Salory	NA
Town ship of Cherm Hill	Spouse Salary	NA

sy family lawa	Vareund SD	SP VANAMA SOUTHER PINAMA	(F. Z	Law Firm	Face Lohn PC		Examples:	SP, SP Mega Corp. Stock	A. For a A.	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	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 asset 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).	BLOCK A Asset and/or Income Source
*	*				*	×	Indefinite	×	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000	A B C D E F G H	Indicate value of asset 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 during the reporting year and is included only because it generated income, the value should be "None."	BLOCK B
× ,	*	→		Five	Shares in Law	×		×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: For Example, Partnership Income	ie or Farm Income)	Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA." For all other assets <i>including all IRAs</i> , indicate the type of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during calendar year.	
7	×	*			×	×	×	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000	- III	For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, <i>including all IRAs</i> , indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.	BLOCK D Amount of Income
				(cost 14) (costs)	Redevetion			S (partial)	(S) (partial) See below for example. P. S, E	portion of an asset is sold, please indicate as follows:	Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.	BLOCK E Transaction

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name John H. Adk.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name John H. Adler

Cont	Continuation Sheet (if needed)		F i va	Name John H. Hales		age W OI
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SCHEDULE IV- TRANSACTIONS

Name John H. Adk

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SCHEDULE IV- TRANSACTIONS

Name JOHN H. Adle

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SCHEDULE IV - TRANSACTIONS

Name John H. Adler

Page 1 of 15

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SCHEDULE IV - TRANSACTIONS

Name John H. Adler

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t These transactives resulted from the Charac in warrant of a 401 k find.

SCHEDULE V- LIABILITIES

Name John H. Adler

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude**: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

7	!	SP, DC, JT	
TD Book, (hory Hill, N)	Example: First Bank of Wilmington, Delaware	Creditor	
Ressonal Line of Credit	Mortgage on 123 Main St., Dover, Del.	Type of Liability	
×		\$10,001- \$15,000	
		\$15,001- \$50,000	4
		\$50,001- \$100,000 5	1. I
	×	\$250,001- \$250,001-	' Am
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		\$5,000,000 3	
		\$25,000,000 \$25,000,001- \$50,000,000	<u> </u>
		Over \$50,000,000	

SCHEDULE VI - GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$335 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

 _	 			
		Example: Mr. Joseph H. Smith, Anytown, Anystate	Source	
		Silver Platter (determination on personal friendship received from Committee on Standards)	Description	
		\$345	Value	

Name
John
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SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor 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 Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$335 received by

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)	City of Departure – Destination – City of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Number of days not at sponsor's expense
Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	Z	z	Z	None
Roycroft Corporation	Aug. 6–11	DC—Los Angeles—Cleveland	Υ	~	Υ	2 Days
American Israel Education	NG. 9-15	Nework - Tel Av. V	γ	٧	V	0
Foundation						
				,		

SCHEDULE VIII—POSITIONS

Name John H. Adler

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organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any non profit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

zations); and positions solely of an honorary nature Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organi-

Position Name of Organization	_	 	 	 		_
Name of					Position	,
					Name of Organization	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; continuing participation in an employee welfare or benefit plan maintained by a former employer; or publication of a book.

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	(ozen O' (onnor 401 (K) Plkn	Euro (ohn 7 (Hollk) Plan	P.C.	P.C.	Parties To	
U	401 (x) (money remains & no additional contibutions)	401(4) (morey rungins, no additional contributions)	letter detailing purposent for sources of Europ Cohn P.C.	for wort in process and streetholder share upon termination	Terms of Agreement	