₹	Yes	child because	sactions, or liabilities of a spouse or dependent child because vith the Committee on Ethics.	" income, tran- irst consulted v	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee or	
No.	Yes	closed. Have you	d certain other "excepted trusts" need not be discild?	e on Ethics and dependent chi	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?	1
S	QUESTIONS	EACH OF THESE QU	— ANSWER	TINFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	1 m
the onse.	wered and Yes" respo	must be ansved for each "	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	No M	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.	
S S	Yes	arrangement with	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	No 🔀	IV. Did you, your spouse, or a 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.	
No N	Yes	or before the date	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.	<u>8</u>	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.	
8	Yes	d receive any n the reporting	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	Ş ⊠	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.	
8 ⊠	Yes	regating more	VI. 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.	No No	 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? Yes Yes 	, ,
			OF THESE QUESTIONS	OF THES	PRELIMINARY INFORMATION — ANSWER EACH	סו
more man	ie wno liles i	30 days late.	Termination Date:		Report Annual (May 16, 2011) Amendment	-
assessed	ty shall be	A \$200 penalty shall be assessed	or Employing Office:	Officer or Employee	Status Member of the U.S. State: MAY House of Representatives District: 2nd	
RED	OF THE LEEK TATRYED BLIVE IN ONLY OF THE LEEK TATRYED BY THE PROPERTY OF THE P	HAND DELIVERED (Office Use Only)	Daytime Telephone: (207)715 5661	Daytime	Name: Richard E. Newl	<u> </u>
Page 1 of 4	Pai SOURCE CENTI	Page LEGISLATIVE RESOURCE CENTER	Form A For use by Members, officers, and employees	MENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT	
_						l

Pa	
Page D of	

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.

manufered the property of the		
Source	Type	Amount
Keene State	Approved Teaching Fee	\$6,000
	Legislative Pension	\$9,000
Examples: Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Ontario County Board of Education		NA
Commonwealth of Massachusetts	Approved Teaching Fee	191,928,0
Commonwealth of Massachusetts	SpouseSalary	NA
Springfield Massachusetts Retirement System	Annual Retirement	\$19,578.60

City of Sp	Alliance Bank	Congressional Federal	Springfield	Bank North	mml Ir		Examples:	SP, SP Me	the name of the institution holding the value at the end of the reporting period. For rental or other real property held for vide a complete address. For an ownership interest in a privatel that is not publicly traded, state the naness, the nature of its activities, and its gitton in Block A. Exclude: Your personal residence, in homes and vacation homes (unless trincome during the reporting period); and ing \$5,000 or less in a personal cheracounts; and any financial interest in, or from, a federal retirement program, inc Savings Plan. If you so choose, you may indicate the income source is that of your spouse (Sichild (DC), or is jointly held with your spoptional column on the far left. For a detailed discussion of Schadule I please refer to the instruction booklet.	Asset and/c Identify (a) each asset to fincome with a fair mathe end of the report reportable asset or soul more than \$200 in "uner that are self-direct the power, even if not investments), provide the account that exceeds the ment accounts which are
City of Springfield, MA		al tederal Union	Springfield MACGELITUHION	orth	lnustors	1st Bank of Paducah, KY Accounts	Simon & Schuster	Mega Corp. Stock	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 deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	BLOCK A Asset and/or Income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the reportable asset or sources 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
									None >	ind rep me ple ff a yea
		X	X				ğ		\$1\$1,000	Indicate reporting method please silf an assiyear and generate "None."
\				$\perp X$	\times		Indefinite		\$1,001 – \$15,000	ng ng ng d o
X							Ф		\$15,001 - \$50,000	Valuyeau yeau yeau ther ther is ino
	\times	,						×	\$50,001 – \$100,000 m	BLOCK B Value of Asset 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."
						×			#100,001 - #EEO,000	BLOCK B Je of asse of asse If you than fair than fair the meth sold during cluded of me, the v
									Ψ200,001 - Ψ000,000	As As sse sse start fair fair fair fair fair fair fair fair
									\$000,001 \$1,000,000	set t a t a ma ma ma nly alue
									\$1,000,001 – \$5,000,000 —	t cl rket sed bec sh
								\vdash	éntanolog : ésninonione	lose alua t va ppor poulc
					. 49				\$25,000,001 - \$50,000,000 ~ C	ting the state of
					\sim				NONE	
	•							×	DIVIDENDS	Checetire /out/
					 	×			RENT	Type of Ir Check all columns retirement accounts you to choose specifi that generate tax-c (such as 401(k) plai may check the " Dividends, interes gains, even if reinv disclosed as Incom if the asset generate ing the reporting peri
	X	×	\mathbf{V}	V					INTEREST	Typ Typ Tac The act of the act
-			- >			-		×	CAPITAL GAINS	BLU BELL BELL BELL BELL BELL BELL BELL B
									EXCEPTED/BLIND TRUST	Type of Inc. Type of Inc. Check all columns the retirement accounts that you to choose specific in that generate tax-defic (such as 401(k) plans may check the "No Dividends, interest, gains, even if reinves disclosed as income. If the asset generated n ing the reporting period.
							Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	Type of Income 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.
\sim					\times	<u> </u>			None –	For you as as was was was
		X	×	\times				Ц	\$1 \$200 :	Amount of In Amount of In Amount of In For retirement accounts th you to choose specific that generate tax-deferred as 401(k) plans or IRAs), the "None" column. For a indicate the category checking the appropria bividends, interest, and even if reinvested, must as income. Check "None was earned or generated the column of the column of the category checking the appropria bividends, interest, and even if reinvested, must as income. Check "None was earned or generated the column of the
	_X			ļ		ļ			\$201 – \$1,000 =	An eme cho the choice cho the choice ch
			<u> </u>		1			×	\$1,001 - \$2,500 - ₹	BLOCK D Amount of Income ment accounts that do n shoose specific investm erate tax-deferred incom) plans or IRAs), you ma le" column. For all other the category of inco the appropriate box ds, interest, and capital reinvested, must be dis me. Check "None" if no ned or generated.
	.,				ļ				\$2,501 - \$5,000 <	BLOCK D bunt of Inco t accounts that se specific inv tax-deferred in tax-deferred in ts or IRAs), you lumn. For all of category of appropriate terest, and co ested, must be check "None" Check "None"
					ļ	×			\$5,001 - \$15,000 S	CK of I
				ļ	1	_	1		\$15,001 - \$50,000 <u>\$</u>	D that that that that that that that tha
-					· · ·	-			\$50,001 - \$100,000 <u>\$</u>	om t do restr ncor ncor ncor inc inc box box box
ļ <u> </u>						-	×		\$100,001 - \$1,000,000 ×	ont al do not al astments streents loome (si umay chither assi income box bein pittal gai e disclos e disclos fino income fino income assi e disclos e discl
			·	L		-			\$1,000,001 - \$5,000,000 × Over \$5,000,000 ×	Amount of Income Amount of Income 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.
								S (partial)	portion of an asset is sold, please indicate as follows: (S) (partial) See below for example. P, S, E	BLOCK E Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.

This page may be copied if more space is required

SCHEDULE III—ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed) Ŗ ≒ SP (Funds in MITH Investigation of the state of Asset and/or Income Source **BLOCK A** () Muhud n Reserve TROWLE None 8 \$1 - \$1,000 O \$1,001 - \$15,000 D \$15,001 - \$50,000 Value of Asset ш \$50,001 - \$100,000 Year-End BLOCK B Ŧ \$100,001 - \$250,000 Ð \$250,001 - \$500,000 I \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 ے \$5,000,001 - \$25,000,000 $\overline{}$ \$25,000,001 - \$50,000,000 Over \$50,000,000 NONE **DIVIDENDS** , RENT INTEREST of Income BLOCK C **CAPITAL GAINS** Type **EXCEPTED/BLIND TRUST** Name Other Type of Income (Specify: e.g., Partnership Income or Farm Income) XXXXX None \$1 - \$200 Amount of Income ≡ \$201 - \$1,000 **7** \$1,001 - \$2,500 BLOCK D \$2,501 - \$5,000 ≤ \$5,001 - \$15,000 VII VIII X \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 × × Over \$5,000,000 Transaction BLOCK E πுறு