EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spot they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	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?	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	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.	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding Yes No \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold arry reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	ii. Did any individual or organization make a donation to charity in ileu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	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? If yee, complete and attach Schedule I.	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	Type Annual (May 16, 2011) Amendment	Status Member of the U.S. State: Market M. Officer or Status House of Representatives District: 197		UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT	
ansactions, or liabilities of a spouse or dependent child because is with the Committee on Ethics.	and certain other "excepted trusts" need not be disclosed. Have child?	RMATION — ANSWER EACH OF THESE QUESTIONS	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	IX. Did you have any reportable agreement or arrangement with an outside entity? If yee, complete and attach Schedule DX.	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yee, complete and attach Schedule VIII.	VII. Did you, your spot reportable travel or rel period (worth more that if yee, complete and	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 sitach Schedule VI.	SE QUESTIONS	Termination 12 W 30 days late.	Epskigving Office:	U.S. HOUS Daytime Telephone: (808) U.S. HOUS	Form A LEGISLAT For use by Members, officers, and employees 2011 Al	
8 N V	You Yes No	E QUESTIONS	answered and the ich "Yes" response.	Yes No No	Yes No	Yes No	" Yee No []		30 days late.	A \$200 penalty shall be assessed	U.S. HOUSE OF REPRESENTATIVES APR 1 2 2011 (Office Use Only)	2011 APR 20 AM 11: 27	

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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.

Source	Туре	Amount
	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
**************************************	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	¥
Croil and Constill of Horseville	Cower Sarage	416,317
Starte of Hamani	SPANCE SALVE	585 Kt
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ALBACKS	•		IT DAILERS	X FIDELITY	or where		Examples:	SF.	Asset and/or income to lidentity (a) each esset held for investmy of income with a fair market value except the end of the reporting period, and reportable asset or sources of income of more than \$200 in "unearned" income of more than \$200 in "unearned" income of Provide complete names of stocks and other retirement plans plans) that are self-directed (i.e., plans in the power, even if not exercised (i.e., plans in the power, even if not exercised (i.e., plans in the power, even if not exercised, to as investments), provide the value for each account that exceeds the reporting times ment accounts that exceeds the reporting times ment executed that are not self-direct 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 private that is not publicly traded, stats the names, the nature of its ectivities, and its tion in Block A. Exclude: Your personal residence, in hoome and vacation homes (unless the names and any financial interest in, or tron, a federal retirement program, inc Savings Plan. If you so choose, you may indicate the name source is that of your spouse (5) of identy held with your epoptional column on the far left. For a detailed discussion of Schedule.	
SP DRUFUS INTIL SOUR	Dairus Set Noce	D DN	bri Soon	TN 4-W-	Was Disway Co.	1st Bank of Paducsh, KY Accounts	Simon & Schuster	Mega Corp. Stock	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 reportable asset or sources of income which generated more than \$200 in "unearmed" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols.) For all BRAs and other retirement plans (such as 401(t) plans) that are self-directed (i.e., plans in which you have the power, even if not assertised, 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 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 that not publicly traded, state the name of the business that not publicly traded, state the name of the business that not publicly traded, state the name of the business that not publicly traded, state the name of the business that not publicly traded, state the name of the business that not publicly traded, state the name of the business that not personal recitance, including second from a Block A. Exclude: Your personal recitance, including second from a tederal retirement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or income ourse is that of your spouse (SP) or dependent child (DC), or its jointly held with your spouse (JT), in the optional column on the far left.	BLOCK A
4	*	7	** *** *** *** *** *** *** *** *** ***	*	*		Indefinite	×	None None	вгоск в
						X	Royalties		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 40 f(t) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if retirvested, must be disclosed as income. Check "None" column. The asset generated no income during the reporting period. CAPITAL GAINS CAPITAL GAINS Other Type of Income (Specify: e.g., Pertnership Income or Ferm Income)	BLOCK C
							X		None None	BLOCK D
							******	S (partial)	Indicate if the asset had purchases (F), sales (S), or exchanges (E) exceeding \$1,000 in reporting year. If only a portion of an asset is sold, please indicate as follows: (S) (partial) See below for example. F, S, E	BLOCK E

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