child Ethics. Yes ☐ No ☑	ome, transactions, or liabilities of a spouse or dependent child " unless you have first consulted with the Committee on Ethics.	ets, "unearned" inc Do not answer "yes	Exemptions Have you excluded from this report any other assets, "unearned" income, transactions, or li
Yes No 🗸	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?	ed by the Committe	
STIONS	TION ANSWER EACH OF THESE QUESTIONS	ST INFORMA	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWE
			If yes, complete and attach Schedule V.
d and the appropriate	Each question in this part must be answered and the appropriate	Yes □ No ☑	Did you, your spouse, or a dependent child have any reportable liability V. (more than \$10,000) during the reporting period?
	If yes, complete and attach Schedule IX.		If yes, complete and attach Schedule IV.
Yes No 🗸	Did you have any reportable agreement or arrangement with an outside IX. entity?	Yes V No	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting revicts.
	If yes, complete and attach Schedule VIII.		If yes, complete and attach Schedule III.
filing in the	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes No	Did you, your spouse, or a dependent child receive "uneamed" income of III. 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 VII.		If yes, complete and attach Schedule II.
ble travel or than \$335 Yes No 🗸	Did you, your spouse, or a dependent child receive any reportable travel or VII. relimbursements for travel in the reporting period (worth more than \$335 from one source)?	Yes No	Did any individual or organization make a donation to charity in lieu of paying li. you for a speech, appearance, or article in the reporting period?
	If yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.
ble gift in	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)?	Yes 🗸 No 🗌	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?
	UESTIONS	OF THESE Q	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS
more than 30 days late.	Termination Date: 0n 1/3/2011	Termination	Report
be assessed against anyone who files	cmpioyee		Status House of Representatives District: 19
A \$200 penalty shall	Officer Or Employing Office:		Filer Member of the U.S. State: NY
(Office Use Only)	(Daytime Telephone)		(Full Name)
AUG 2 2 2011	(845) 220-8251		John Joseph Hall
201 A18 25 FH 2: 24	For use by Members, officers, and employees	AIIVES	CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT
TO SECULATION OF SECULA	FORM A Page of 0	.V → N /⊏ 0	ואווידרים פידאדרים שכו ופיד סבי מבממבפבאות

SCHEDULE I - EARNED INCOME

Name John Joseph Hall

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$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.

Source	Туре	Amount
Film Musicians Secondary Fund, Studio City, Ca	Performance fees from pevious recordings	\$377
Siren Songs Records/Cuttyhunk Music	Spouse salary (legal fees)	N/A

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 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 IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.s.,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 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 publically 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 and advantages there is a second absorber of the last the th	EMI World Entertainment, New York, NY	Warner Music, Burbank, CA	Broadcast Music Inc., New York, NY	John Hall d/b/a Siren Songs Records, Dover Plains, NY	Orleans, Sanford, FL	Congressional Federal Savings Bank, Washington DC
вгоск в	Year-End 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 and is included only because it is generated income, the value should be "None."				Indefinite	Indefinite	Indefinite	Indefinite	Indefinite	1-1,000
BLOCK C	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 40°(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.			Royalties	Royalties	Royalties	CD Sales	Royalties	INTEREST
BLOCK D	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.	q			\$50,001 - \$100,000	\$201 - \$1,000	\$50,001 - \$100,000	\$201 - \$1,000	\$5,001 - \$15,000	\$1 - \$200
BLOCK E	Transactior indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding	\$1,000 in reporting year.									

SCHED	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name	John Joseph Hall		tout of 9 pas
ဇ္ဓာ	Brandreth Associates(family partnership for	\$1,001 - \$15,000	Partner- ship	\$1 - \$200	
_	ownership/stewardship of approximatley 2,500 aces preserved, unimproved land. (Hamilton Co., NY). (1 interest out of 120 interests)				_
JT	Hudson Valley Credit Union, Pleasant Valley, NY Personal Savings account; Certificates of Deposit	\$50,001 - \$100,000	INTEREST	\$201 - \$1,000	
JT	USAA Federal Savinga Bank San Antonio, TX Personal Savings Account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
SP P	Southeast Federal Financial Credit Union, Nashville, TN	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
Ţ	Bank of Millbrook, Millbrook, NY	\$50,001 - \$100,000	INTEREST	\$1 - \$200	
JT	John Hall and Pamela Hall, d/b/a Cuttyhunk Music, Dover Plains, NY	\$1,001 - \$15,000	Royalties	\$1 - \$200	
SP	Brandreth Park Ass'n. (family association for the ownership and stewardship of approx. 10,000 acres preserved land in Hamilton Co. NY. (1 interest out of 120 interests)	\$1,001 - \$15,000	None	NONE	
	Entertainment Partners, Studio City, CA	Indefinite	Royalties	\$201 - \$1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

(unincorporate business association C/O
EMI Publishing, New York, NY d/b/a Siren Songs, John Hall and Johanna S. Hall \$500,001 -\$1,000,000 Name John Joseph Hall NONE NONE Sout of 9 pgs.

EMI Publishing, New York, INT			
Northwestern Mutual Adjustable Comp Life Insurance	\$15,001 - \$50,000	DIVIDENDS	\$2,501 - \$5,000
CBS Studio Inc., Studio City, CA	Indefinite	Royalties	\$201 - \$1,000

	-						S
	SP	SP	SP	SP	SP	ASSet a lidentity (a) each a fair market valua of the market valuand (b) any other generated more the provide complete symbols.) For all IRAs and a self-directed, to self exercised, to self exercised, to self exercised in the retruition reporting period. The institution reporting period of the institution reporting period. For rental or other address. For an ownership publically traded activities, and its exercised nomes in the self-direction for the s	CHEDUL
Siren Songs Keogh-Calvert Impact Fd Inc Small Cap Value Fd Cl. A	CREF Retirement Annuity CREF Stock	CREF Retirement Annuity CREF Social Choice	CREF Retirement Annuity CREF Money Market	CREF Retirement Annuity CREF Equity Index	CREF Retirement Annuity CREF Bond Market	ASSet and/or income Source Asset and/or income Source 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 "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 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 publically 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.)	SCHEDULE III - ASSETS AND "UNEARNED" INCOME
\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1 - \$1,000	\$1,001 - \$15,000	\$1,001 - \$15,000	BLOCK B Year-End 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 and is included only because it is generated income, the value should be "Nome."	Name John Joseph Hall
None	None	None	None	None	None	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.	eph Hall
NONE	NONE	NONE	NONE	NONE	NONE	BLOCK D Amount of Income For redirement 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 catagory 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.	6 0
m						BLOCK E Transaction Indicate if asset had purchases (P), sales (3), or exchanges (E) exceeding \$1,000 in reporting year:	out of 9 79s

SCHEDULE III - ASSETS AND "UNEARNED" INCOME SP SP ş SP SP State of TN 401k State of TN 401k World Values Fd Inc Intl Equity Fd CL C Siren Songs Keogh-Calvert Social Invt Fd Equity Port CL A С С State of TN 401k State of TN 401k State of TN 401k Social Investmt Fd Equity PTFL Siren Songs Keogh-Calvert Calvert Income Fund Siren Songs Keogh-Calvert State Street S&P 500 Fidelity Puritan Fund Fidelity OTC Portfolio Fidelity Magellan Fund \$15,000 \$1,001 -\$15,000 \$1,001 -\$15,000 \$15,001 -\$50,000 \$1,001 -\$15,000 \$1,001 -\$15,000 \$1,001 -\$50,000 \$15,001 -\$15,000 \$1,001 -Name John Joseph Hall None None None None None DIVIDENDS/CAPI TAL GAINS **DIVIDENDS/CAPI** DIVIDENDS TAL GAINS NONE \$1 - \$200 NONE NONE NONE \$1 - \$200 \$1 - \$200 NONE Fout of 9 pas Ш

SCHEDULE IV - TRANSACTIONS

Name John Joseph Hall

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transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below. Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	Siren Songs Keogh-Calvert Impact Fd Inc Small Cap Value Fd CL A (Exchanged for Calvert New Vision Small Cap Fd CL B)	m	N/A	11-29-2010	\$1,001 - \$15,000
	Siren Songs Keogh-Calvert Social Invt Fd Equity Port CL A(Exchanged for Calvert Social Invt Fd Equity Port CL B)	m	N/A	10-21-2010	\$1,001 - \$15,000

SCHEDULE VIII - POSITIONS

Name John Joseph Hall

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
President	John Hall d/b/a Siren Songs Records
Partner	Orleans (pop/rock group)
Husband/Wife songwriting associates	John Hall and Pamela Hall d/b/a Cuttyhunk Music
Business Associate	John Hall and Johanna S. Hall d/b/a Siren Songs

hild because Yes No X	sactions, or liabilities of a spouse or dependent child because with the Committee on Ethics.	y other assets, "uneamed" income, tr r "yes" unless you have first consulte	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.
losed. Have you Yes No No	nd certain other "excepted trusts" need not be disck	proved by the Committee on Ethics ting you, your spouse, or dependent	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?
SWER EACH OF THESE QUESTIONS	- AN	DENT, OR TRUST INFO	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
tion in this part must be answered and the schedule attached for each "Yes" response.	Each question in this part m appropriate schedule attached	reportable Yes No S	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.
rrangement with Yes No X	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	se, sell, seding Yes 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.
r before the date Yes No X		unearned" ld any the period? Yes No No No	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.
receive any the reporting Yes No No	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.	to charity in in the Yes No	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.
receive any egating more Yes No X	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.	salaries or g period? Yes Mo	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 yes, complete and attach Schedule I.
	SE QUESTIONS	- ANSWER EACH OF THESE QUESTIONS	PRELIMINARY INFORMATION — A
against anyone who mes more than 30 days late.	Termination Date:	Amendment	Annual (May 16, 2011)
A \$200 penalty shall be assessed	Employing Office: John Sullyon	ct: Officer or	Filer Member of the U.S. State: Status House of Representatives District:
2011 AUG 26 AN 11: 02 W.S. HOUSE ONLY)	Daytime Telephone: 9(8 79 1014	Daytim	Name: Rich Hedgerock
AUG 1 8 2011	Form A For use by Members, officers, and employees	SENTATIVES	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT
3			

Namo Ruled Hedgeruck	
Page 2	

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: Military pay (such as National Guard of neserve pay), issueral remainding programs; and serve		
Source	Туре	Amount
	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
Examples: Civil War Roundtshie (Oct. 2nd)	Spouse Speech	\$1,000
	Spouse Salary	NA
First Robert Charles OK	Spanne & lang	7
		1

Asset and/or Income Source BLOCK A

the end of the reporting peri reportable asset or sources of i more than \$200 in "unearned" in of income with a fair market va Identify (a) each asset held for it

Provide complete names of stock not use ticker symbols.)

investments), provide the value is account that exceeds the reportionent accounts which are not se pians) that are self-directed (i.e., the power, even if not exercise value at the end of the reporting the name of the institution hold For **all IRAs** and other retireme

For rental or other real property vide a complete address.

For an ownership interest in a part that is not publicly traded, state ness, the nature of its activities, aution in Block A.

Savings Plan. ing \$5,000 or less in a perso accounts; and any financial inter-from, a federal retirement progr income during the reporting pe Exclude: Your personal resid nomes and vacation homes (

If you so choose, you may in income source is that of your sp child (DC), or is jointly held with optional column on the far left.

please refer to the instruction bo For a detailed discussion of Sc

DC, Examples:

UBS Reduce

ACCE

Value of Asset BLOCK B

Type of Income BLOCK C

Amount of Income BLOCK D Transaction \$1,000 in xchanges (E) ourchases (P) sset had ndicate if the xceeding ales (S), or BLOCK E

ang/or income source	10000			Indicate # the
asset held for investment or production	Indicate value of asset at close of	Check all columns that apply. For	For retirement accounts that go not allow to choose specific investments or	paget had
a fair market value exceeding \$1,000 at period, and (b) any other	reporting year. If you use a valuation	you to choose specific investments of	that generate tax-deferred income (such	asser rad
or sources of income which generated	method other than fair market value,	that generate tax-deferred income	as 401(k) plans or iHAS), you may check	,
in "unearned" income during the year.	please specify the method used.	(such as 401(k) plans or IHAs), you	indicate the category of income by	sales (S), or
le names of stocks and mutual funds (do	War and the reporting	Dividends. Interest, and capital	checking the appropriate box below.	exchanges (E)
(mbots.)		gains, even if reinvested, must be	Dividends, interest, and capital gains,	exceeding
d other retirement plans (such as 401(k)	year and is included only boomsoon	disclosed as income. Check "None"	even if reinvested, must be disclosed	\$1,000 in
en-directed (<i>i.e.</i> , plans in which you have the specific to select the specific	generated income, the value should be	if the asset generated no income dur-	as income. Check Twoner if no income	morring year
ovide the value for each asset held in the	None."	ing the reporting period.	Has bellion of Salatawar.	soporting Journ
which are not self-directed, provide only				If only a
e institution holding the account and its			- V V V X	portion of an
or na rabound barbon	n G			F
er real property heid for investment, pro-		me)		asset is soid,
hip interest in a privately-held business		Inco		please indicate
icly traded, state the name of the busi-		ım		as follows:
of its activities, and its geographic loca-		or Fr		(S) (partial)
personal residence, including second		me		See Delow tot
cation homes (unless there was rental		F.46.	45-11-02	example.
less in a personal checking or saving	0,00	ne	000	
ry financial interest in, or income derived	000,000	con	00 00 00 00	.TO
ignation broken, moreon 8 and	00,0 500 \$5,0	f In	000 50,0 50,0 51,0	, Ω
se, you may indicate that an asset or	\$15 - \$1	GA	61,0 \$1,0 - \$5 - \$ 1 - 61 ,000	m
jointly held with your spouse (JT), in the	1 - 91 01 00 00 00 00	TAL	01-001-0001-000000000000000000000000000	
on the far left.	0,0 0,0 50,	the	2,5 5,0 15, 100 100	
discussion of Schedule III requirements, the instruction booklet.	\$1 \$1 \$5 \$5 \$2 \$1 \$1	R In C	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
Sp. Moss Corn Stock	X	×		S (partial)
OF INOPE COOK	Indefinite	A Royalties	×	
Silligit & School CV Associate		×		
ISCHARGE PROJECT, NY ARABONES				
Patrone + Aut				
	X		X	
Method Acol (This)				
り くしましまれま	×			