No	Yes	child because duct.	insactions, or liabilities of a spouse or dependent child because with the Committee on Standards of Official Conduct.	d" income, tra first consulted	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct.
N _o	Yes	trusts" need not	ds of Official Conduct and certain other "excepted spouse, or dependent child?	e on Standar	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct 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?
S	QUESTIONS	F THESE Q	RMATION — ANSWER EACH OF THESE	T INFO	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
the onse.	wered and 'Yes" resp	nust be anso	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	No Se	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.
₹	Yes 🗀	arrangement	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	™	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.
₹	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.	□ S	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 X	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.	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.
N _S	Yes	receive any egating 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.	S S	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
			SE QUESTIONS	OF THESE	PRELIMINARY INFORMATION - ANSWER EACH
assessec les more	ity shall be a sine who fill late.	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	or Employing Office: ree Termination Date:	Officer or Employee	Status X Member of the U.S. State:
8	(Office Use Only)	(Offi			
* ** *	. 5 - ·	Co 	Telephone: 202-225-3635	Daytime	Name: Deborah L. Halvorson
RED D	DELIVERED		Form A For use by Members, officers, and employees	MENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT
D 7%	HAN				

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Name Debotoch L. H	
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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.

Type Amount Approved Teaching Fee \$6,000 Legislative Pension \$9,000 Spouse Salary \$1,000 Spouse Salary N/A Spouse Salary N/A Spouse Salary N/A Spouse Salary N/A	Examples: Military pay (such as National Guard or Heserve pay), tederal retirement programs, and benefits in Source Source
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For payments to charity in lieu of honoraria, use Schedule II.

Name Deborah Halvorso	
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SCHEDULE II - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. A green envelope for transmitting the list is included in each Member's filing package.

Conduct. A gleen envelope for dansmanly the list is included in each member a little package.	mily package.		
Source	Activity	Date	Amount
Association of American Associations, Washington, DC	Speech	Feb. 2, 2009	\$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2009	\$500
			•
			A CANADA

(See OHacked)	SP Worgan Stanley	Congressional Redution	1st Ilvited	IT OLD SECOND		Examples:	SP, SP Mega Corp. Stock	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 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 Block A. For additional information, see the instruction booklet. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by you or your spouse's child, parent, or sibling; any deposits totalling \$5,000 or less in personal savings accounts; and any financial interest in or income derived from U.S. Government retirement programs. 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 (JT), in the optional column on the far left.	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 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 tull 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).
			**************************************	× 120 1	×	Indefinite	×	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$1,000,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$7 Over \$50,000,000 □	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."
		×	×	×	×	Royalties	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	BLOCK C Type of Income Check all columns that apply. For refirement plans or accounts that do not allow you to choose specific investments, you may write "NA." For all other assets including all IRAs, 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.
		*		×	×	X	X	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 ×	Amount of Income For refirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, including all IRAs, 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.
							S (partial)	If only a 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.

!

None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$250,001 - \$500,000 \$500,001 - \$500,000 \$1,000,001 - \$5,000,000	က္က ၄	SCHEDULE III — ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed) BLOCK A BLOCK B Year-End Year-End Value of Asset	A B C	ARNE Value	RNED" INCC			<u> </u>	<u>^</u>	<u>^</u>
Marie Mari	SP, DC, JT		\$1 - \$1,000 [©]	\$15,001 - \$50,000	\$250,001 - \$500,000 D		\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000
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SCHEDULE IV- TRANSACTIONS

Name Deboran Halvorson Page 6 of 2

rt any purchase, sale, or exchange transactions by you, your spouse, condent child during the reporting period of any security or real propelled for investment that exceeded \$1,000. Include transactions that ed in a capital loss, Provide a brief description of any exchange transactions between you, your spouse or dependent chilor the purchase or sale of your personal residence, unless it generental income. If only a portion of an asset is sold, please so indicte, "partial sale"). See example below. al Gains — if a sales transaction resulted in a capital gain in excess 00, check the "capital gains" box and disclose this income on Schedule	PURCHASE T	SALE Transaction	EXCHANGE 9	Check Box if Capital Gain Exceeded \$200	Date (MO/DAY/YR) or Quarterly, Monthly, or Bi-weekly, if applicable	\$15,000 m	\$50,000	\$50,001- \$100,000 D	\$100,001- \$250,000 m	\$250,001- \$500,000	\$500,001- \$1,000,000	\$50,001- \$100,000 D mount of \$250,000 m S250,000 T m \$500,000 G S1,000,000 G \$5,000,000 T S5,000,000 T S5,000	\$5,000,001- \$25,000,000 - S	\$25,000,001-
Example: Mega Copor		×			10-12-09		×						$\vdash \vdash$	
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SCHEDULE V- LIABILITIES

Name Deborous Pla Nosarpage Zola

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.

J C S		Type of Liability Mongage on 123 Main St., Do	bility	\$10,001- \$15,000 00	\$10,001- \$15,000 w \$15,001- \$50,000 •	\$10,001- \$15,000 w \$15,001- \$50,000 ? \$50,001- \$100,000 U	\$10,001- \$15,000 W \$15,001- \$50,000 C \$50,001- \$100,000 U	\$10,001- \$15,000 W \$15,001- \$50,000 C \$50,001- \$100,000 U	\$10,001- \$15,000 W \$15,001- \$50,000 C \$50,001- \$100,000 U	\$10,001- \$15,000	\$10,001- \$15,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	over, Del.					X	X	X	X
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	And the second s										
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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.

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

Name Deboroch
Halvorson

Page O of Ic

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed 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 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 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

a spouse or dependent child that is totally independent of his or her relationship to you. 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

_			,	,							 	
	Source	Examples: Chicago Chamber of Commerce	Roycroft Corporation	American Israel Foundation 149 8- Chicago - Tel Aviv - Chicago								
	Date(s)	Mar. 2	Aug. 6-11	Aug 8 -								
	City of Departure—Destination— City of Return	DC—Chicago—DC	DC-Los Angeles-Cleveland	Chicago-Tel Avav-Chica								
	Lodging? (Y/N)	Z	1 .	8								
	Food? (Y/N)	Z	~	~						ļ !		
	Was a rainly Member Included? (Y/N)	N	Y	Y	Prysical and the second							
	Number of days not at sponsor's expense	None	2 Days	None								

SCHEDULE VIII—POSITIONS

Name Deborah Halvorson Page 9 of 12

organization, or any educational or other institution other than the United States. 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 other business enterprise, any non profit organization, any labor

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

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer; or publication of a book. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; continuing participation in an 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

Page 1 of 1

Jim Bush

Home: (312) 335-3085

TIER: STANDARD

ACCT: 399-18006-62 IRA Sweep Fund BDPS

317 E 11TH STREET CHICAGO HTS IL 60411-2852 Mobile:

Business: (312) 455-

5383

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Trade Date ▼	Activity	Quantity	Description	Symbol	Price (\$)	Amount (\$)
12/28/2009	Automatic Investment		UNIT VAN KAMPEN INSIDER BUY STRATEGY 2009-2 REINVESTMENT Ref: 363EBU84	INBY092	12.61	-25.21
11/25/2009	Automatic Investment	.02	GAMCO WESTWOOD MGHTY MITES C REINVESTMENT	WMMCX	12.35	28
			Ref: 3349F974			
09/15/2009	Sold	100.00	VULCAN MATERIALS CO PREFERENTIAL RATE CLIENT LONG IN ACCOUNT Ref: 25810094	VMC	55.89	5,427.65
08/04/2009	Sold	48.00	VULCAN MATERIALS CO PREFERENTIAL RATE CLIENT LONG IN ACCOUNT Ref: 216J3376	VMC	50.00	2,305.33
07/31/2009	Name Change To		INUVO INC COM Ref: 212S9226	INUV		
07/31/2009	Name Change From		KOWABUNGA! INC Ref: 212S9225			
05/26/2009	Bought	48.00	VULCAN MATERIALS CO PREFERENTIAL RATE UNSOLICITED TRADE Ref: 14646403	VMC	42.17	-2,117.62
05/22/2009	Automatic Investment		UNIT VAN KAMPEN INSIDER BUY STRATEGY 2009-2 REINV FULL CONTR A 970-098100-00 A-E 0004 RATE:N/A/N/A DUE:2010-08-20 Ref: 142O4857	INBY092	9.90	-2,821.50
05/22/2009	Automatic Redemption	501.00	UNIT VAN KAMPEN INSIDER BUY STRATEGY 2008-2 Ref: 142N9645	INBY082	5.66	2,829.51
04/01/2009	Sold	310.00	GENERAL MOTORS CORP UNSOLICITED TRADE	GM	1.76	485.78
04/01/2009	Bought	185.00		F	2.54	-522.14
			Ref: 09119440			
03/25/2009	Automatic Investment		UNIT VAN KAMPEN INSIDER BIJY STRATEGY 2008-2 REINVESTMENT MS IS MARKET MAKER RATE:N/A/N/A DUE:2009-06-22 Ref: 084E/026	INBY082	4.36	-4.36
03/18/2009	Bought	200.00	GENERAL ELECTRIC CO PREFERENTIAL RATE ORD 03/17/09 15:23:32 00 Ref: 07733728	GE	9.95	-2,080.32
02/26/2009	Bought	100.00	VULCAN MATERIALS CO PREFERENTIAL RATE UNSOLICITED TRADE Ref: 05756469	VMC	44.79	-4,618.84

Total Trade Activity

-1,142.00

Unless otherwise indicated, this information is not intended to be a substitute for the efficial account statements that You receive from Us. This information is approximate and subject to adjustment, updating and correction and is for illustrative and general reference purposes only. We are not responsible for any clerical, computational or other inaccuracies, errors or omissions. We obtain market values and other data from various standard quotation services and other sources, which We believe to be reliable. However, We do not warrant or guarantee the accuracy or completeness of any such information. The values that You actually receive in the market for any investment may be higher or lower than the values reflected herein. To the extent there are any discrepancies between Your official account statement and this information, You should rely on the official account statement. This information should not be considered as the sole basis for any investment

Deborah Halvorson 11 of 12

Page 1 of 1

Jim Bush

Home: (312) 335-3085

TIER: STANDARD

ACCT: 399-18006-62 IRA

Sweep Fund BDPS

317 E 11TH STREET CHICAGO HTS IL 60411-2852

Mobile:

Business: (312) 455-

383

	5383			
Trade Date Activity	Quantity Description	Symbol	Price (\$)	Amount (\$)
04/16/2010 Sold	GENERAL ELECTRIC CO PREFERENTIAL RATE CLIENT LONG IN ACCOUNT Ref: 10613344	GE	18.70	8,174.83
03/25/2010 Automatic Investment	UNIT VAN KAMPEN INSIDER BUY STI 1.00 REINVESTMENT Ref: 084EDW53	RATEGY 2009-2 INBY092	13.59	-13.59
01/07/2010 Bought	GENERAL ELECTRIC CO PREFERENTIAL RATE UNSOLICITED TRADE Ref: 00733253	GE	15.49	-3,999.76
01/07/2010 Bought	FORD MOTOR CO NEW PREFERENTIAL RATE UNSOLICITED TRADE Ref: 00731549	F	11.43	-4,130.56
	Total Trade Activity			30.92

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leborah Halvorson

19 04 12

Page 1 of 1

Jim Bush

Home: (708) 774-7346

TIER: STANDARD

ACCT: 399-17146-62 REG Sweep Fund BDPS

Price (\$)

317 E 11TH STREET CHICAGO HTS IL 60411-2852

То

Mobile: Business: (708) 210-1600 jimwbush@hotmail.com

Symbol

Amount (\$)

Trade Date - Activity 07/31/2009

Name Change

Quantity Description

INUVO INC COM

INUV

07/31/2009

Name Change From

Ref: 212S9224 KOWABUNGA! INC

Ref: 212S9223

Total Trade Activity

.00

Unless otherwise indicated, this information is not intended to be a substitute for the official account statements that You receive from Us. This information is approximate and subject to adjustment, updating and correction and is for illustrative and general reference purposes only. We are not responsible for any clerical, computational or other inaccuracies, errors or omissions. We obtain market values and other data from various standard quotation services and other sources, which We believe to be reliable. However, We do not warrant or guarantee the accuracy or completeness of any such information. The values that You actually receive in the market for any investment may be higher or lower than the values reflected herein. To the extent there are any discrepancies between Your official account statement and this information, You should rely on the official account statement. This information should not be considered as the sole basis for any investment