	Yes No K		ome, transactions, or liabilities of a spouse or dependent child s' unless you have first consulted with the Committee on Ethics.	ets, "unearned" inco Do not answer "yes	Exemptions Have you excluded from this report any other assets, "unsarned" income, transactions, or liabilities because they meet all three tests for exemption? Do not answer "yes" unless you have first consu	E X
, ,	Yes 🕢 No 🗌		e on Ethics and certain other "excepted trusts" need not be t benefiting you, your spouse, or dependent child?	ed by the Committee dails of such a trust	Trusts Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse,	Ť'n
	S	STIONS	TION - ANSWER EACH OF THESE QUESTIONS	ST INFORMA	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EA	EXCL
			schedule attached for each "Yes" response.		if yes, complete and attach Schedule V.	# Y
	e appropriate	and the	Each question in this part must be answered and the appropriate	8 8 8 8	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	V. Did
			If yes, complete and attach Schedule IX.			if y
	¥ □ ₹	outside	Old you have any reportable agreement or arrangement with an outside IX. entity?	Y 88 No K	your spouse, or dependent child purchase, sell, or exchange any is asset in a transaction exceeding \$1,000 during the reporting	≥ §
	V O V MATERIA V VIA A L'ANTINO D'A DATA DE MATERIA DE M		If yes, complete and attach Schedule VIII.		If yes, complete and attach Schedule III.	¥
	¥8	ling in the	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	¥ 8	using your spouse, or a dependent chad receive "useamed" income of more than \$200 in the reporting period or hold any reportable asset worth y more than \$1,000 at the end of the period?	.≡ 3 a a a
			If yes, complete and attach Schedule VII.		If yes, complete and attach Schedule II.	H y
	Yes □ No (S)	hen \$335	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$338 from one source)?	Yas C	ued any individual of organization make a donation to charity in feu of paying you for a speech, appearance, or article in the reporting period?	II. you
			If yea, complete and attach Schedule VI.		If yee, complete and attach Schedule I.	H y
	¥8 □ ×8 □ ×8	therwise	VI. the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)?	₹8 ₹8		e e
-			THE COLOR STORES OF A described child receive any reportable off in	OF INCOE S	Did you or your spouse have "semed" income (e.g., selectes or fees) of \$200	
	more than 30 days late.	more the	Termination Date:	☐ Termination	teport Type ☑ Annual (May 15) ☐ Amendment	Report Type
	be assessed against	be ass	Employee		Status House of Representatives District 01	Stat
	A \$200 penalty shall	A \$200	Officer Or Employing Office:		S	Filer
TATIVES	"Office Use Offy) ESENTATIVES	(o)	(Daytime Telephone)		(Fuil Name)	
76		,	(856) 546-5100		Robert E. Andrews	
=======================================	2011 MAY 13 PM 1: 41	201				
E CEALLY.	FEGISLATIVE BECOMMER CENTRA	LEGIS	For use by Members, officers, and employees	ENT	CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT	CALE
%			FORM A Page 1 of 5	ATIVES	UNITED STATES HOUSE OF REPRESENTATIVES	UN.
ERED	HAND DELIVERED	INA				

SCHEDULE 1 - EARNED INCOME

Name Robert E. Andrews

Page 2 of 5

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
Rutgers Law School	Spouse Wages/Compensation	NA
Context Capital Partners	Spouse Wages/Compensation	NA
AYCO Charitable Foundation, New York	Spouse Wages/Compensation	N/A
Hill International	Spouse Wages/Compensation	N/A

- 1	۲.	ŕ	
	۲	4	
4	۴	۹	
•	È	4	
:	3	ľ	
•	-	1	
- 1	П	П	
i	r		į
1	ŧ,	ď	
4	۲		
- 3	•		
1	r	_	
i	h	۲	
•	,	•	
	_		
•	-	•	
	ı		
- 2	J	ź	
i	۲	ŕ	
	ļ	ľ	
- 1	Ü	į.	
	ř	÷	
	ľ	ľ	
- 7	•		į
	Ú	ſ,	į
	Ξ		
•	1	ż	
	4	-	
	d	Ź	
1	ř		į
•	١,	d	١
	ľ	_	
- 1	ī	i	
- 2	ď	ď	
i	Ē	ŕ	
	Ŀ	•	
•	ı	١	١
- 1	4	í	
-	i	Ĺ	ı
-	,	i	
	۰	6	
ļ	ı	ľ	
	÷		١
•	Ĺ	j	ı
	_	ŧ	
		•	١
- :			
		2	
•	į	į	
•	į		
(ļ		
•	֓֡֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜		
•	(
•	(

SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	E Name Robert E. Andrews	Andrews		Page 3 of 5
	BLOCK A	BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset a lidentify (a) each a a fair market value and (b) any other generated more to provide complets symbols.) For all IRAs and a self-directed (i.e. exercised, to self-directed in the retirement account of the institution reporting period. For rental or othe address. For an ownership publically traded, activities, and its	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 "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 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, the nature of its activities, and its geographic location in Block A.	Year-End Value of Asset at close of reporting year. If you use a valuation method other than fair method used. If an asset was sold and is included only because it is generated income, the value should be "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.	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 "RAs), you may check the "Rone" 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 samed or generated.	Transaction indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
For an owner publically tra-activities, and Exclude: You vacation hor made at the control of the	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 vacation).				
T	Citizens Bank of Pennsylvania Checking Account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
	Hill International Stock	\$50,001 - \$100,000	DIVIDENDS	NONE	
SP	Met Life Defined Contribution Plan, Hartford, CT (through Rutgers University ABP 401A Plan)	\$250,001 - \$500,000	None	NONE	
SP	Morgan Stanley Retirement Money Market	\$1,001 - \$15,000	None	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

knowledge of the holdings of

individual has no specific individual and the reporting

was not created by the reported

Olive B. Andrews Testamentary Trust (50%) remainder interest in Life Estate. NOTE: this trust \$15,001 -\$50,000 Name Robert E. Andrews interest) None (remainder NONE Page 4 of 5

	the trust.	mananananananaphikkanjikki kirjikki kirjikki kirjika kirjika kirjika kirjika kirjika kirjika kirjika kirjika k	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	
=	PNC National Bank Checking	\$15,001 - \$50,000	INTEREST	\$1 - \$200
SP	Stock-PEPCO Holdings	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200
Sp	TD Bank Checking Account (joint account with Phyllis M. Wolf, Member's mother-in-law)	\$1,001 - \$15,000	INTEREST	\$1 - \$200
4	The Hershey Company	\$1 - \$1,000	DIVIDENDS	\$1 - \$200
	Verizon Stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200

SCHEDULE V - LIABILITIES

Name Robert E. Andrews

Page 5 of 5

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 all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; 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.

SP, DC,	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
	American Express PO Box, 1270, Newark, NJ, 07101-1270	December 2010	Credit Card	\$15,001 - \$50,000