CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT For use by Members, officers, and employees	STATE DELIVERED
Name: AARIN JIN SCHOCK Daytime Telephone: 202-225-6201	Sound The William St. Proceedings
Filer Member of the U.S. State: Officer or Employing Office:	A \$200 penalty shall be assessed
Status House of Representatives District: Employee Report Annual (May 16, 2011) Amendment Termination Date:	against anyone who files more than 30 days late.
PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS	
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. 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.	egating more Yes No
Yes No Period (worth more the lift yes, complete and	receive any the reporting Yes No
hild receive "unearned" period or hold any the end of the period? Yes No	r before the date 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.	rrangement with Yes No No
Id have any reportable Yes No appropriate	tion in this part must be answered and the schedule attached for each "Yes" response.
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH O	ANSWER EACH OF THESE QUESTIONS
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?	losed. Have you Yes No
EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	hild because Yes No

SCHEDULE V— LIABILITIES

Name AARON JON SCHOCK

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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 (unless you are personally liable); 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.

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	DUNLAP BANK, ILLINOIS	DUNLAP BANK, ILLINOIS Sep-2008 Mortgage on 2414 W. Augu	Example: First Bank of Wilmington, DE	Creditor	
	Nov. 2010	Sep. wob	May 1998	Liability Incurred Mo/Year	Date
il i		Moral M PIFC no spoodage	Mortgage on 123 Main St., Dover, DE	Type of Liability	
(sna)	IAR	र्भूट			
/s/	À	Start E		\$10,001- \$15,000	
//s)	Ara	StarClar		\$15,000 \$15,001- \$50,000	
VS)	Arro	shatte		\$15,000 \$15,001- \$50,000 \$50,001- \$100,000	
WS)	And	She Die.	x	\$15,000 \$15,001- \$50,000 \$50,001- \$100,000 \$100,001- \$250,000	Amou
Vs)	and	Start Land	X	\$15,000 \$15,001- \$50,000 \$50,001- \$100,000 \$100,001- \$250,000 \$250,001- \$500,000	Amount of L
Vs.	Arro	Start Date		\$15,000 \$15,001- \$50,000 \$50,001- \$100,001- \$250,000 \$250,001- \$500,000 \$1,000,001- \$1,000,000	Amount of Liabilit
NG)	Airo	shrthe X		\$15,000 \$15,001- \$50,000 \$50,001- \$100,000 \$100,001- \$250,000 \$250,001- \$500,000 \$1,000,001- \$5,000,000 \$5,000,001- \$5,000,001-	Amount of Liability
NG)	Airo	shitte X		\$15,000 \$15,001- \$50,000 \$50,001- \$100,000 \$100,001- \$250,000 \$250,001- \$500,000 \$1,000,001- \$1,000,000 \$1,000,001- \$5,000,000	Amount of Liability

SCHEDULE VI— GIFTS

relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold. 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 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