

UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT

FORM A
For use by Members, officers, and employees

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**HAND
DELIVERED**

Mark Hamilton Schauer

(Full Name)

269-209-3940

(Daytime Telephone)

2010 MAY 25 AM 10:41

(Office Use Only)

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representative	State: MI District: 7	<input type="checkbox"/> Officer Or Employee	Employing Office:
Report Type	<input checked="" type="checkbox"/> Annual (May 15)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Termination Date:

A \$200 penalty shall be assessed 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?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$336 and not otherwise exempt)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, complete and attach Schedule I.		If yes, complete and attach Schedule VI.	
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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$336 from one source)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, complete and attach Schedule II.		If yes, complete and attach Schedule VII.	
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?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, complete and attach Schedule III.		If yes, complete and attach Schedule VIII.	
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes, complete and attach Schedule IV.		If yes, complete and attach Schedule IX.	
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	
If yes, complete and attach Schedule V.			

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Exemptions--	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 Standards of Official Conduct.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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) 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	Type	Amount
State of Michigan	Salary - Michigan State Senate	\$485.81

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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BLOCK A	BLOCK B	BLOCK C	BLOCK D	BLOCK E
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 assets 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 full 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 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 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 your or your spouse's child, parent or sibling; any deposits totaling \$5,000 or less in personal savings accounts; 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.	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."	Type of Income Check all columns that apply. For retirement 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 the calendar year.	Amount of Income For retirement 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.	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
Kellogg Co	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
The Growth Fund Of America - Class A	\$50,001 - \$100,000	DIVIDENDS	\$201 - \$1,000	
The Income Fund Of America - Class A	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
New Perspective Fund Class A	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
Russell Growth Strategy Fund	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	
Washington Mutual Investors Fund	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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SP	The Bond Fund of America Class A	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
SP	Europacific Growth Fund Class A	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	The Growth Fund of America Class A	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	The Income Fund of America Class A	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Russell Balanced Strategy Fund Class A	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	
SP	Small-Cap World Fund Class A	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Washington Mutual Investors Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	State of Michigan Legislative Retirement System Pension (not self directed)	determined at retirement	None	NONE	
SP	Hooper Sisters, LLC 2545 Capital Ave SW Battle Creek, MI Consignment Store dba My Style Your Style	\$15,001 - \$50,000	None	NONE	
SP	Northwestern Mutual Life Insurance Cash Value	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	Northwestern Mutual Life Insurance Cash Value	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	

SCHEDULE IV - TRANSACTIONS

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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 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.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	Alliance Bernstein Int Value I Fund	S	No	7-15-09	\$1,001 - \$15,000
	American Fund Europacific Growth	S	No	7-15-09	\$1,001 - \$15,000
	Dodge & Cox Stock Fund	S	No	7-15-09	\$1,001 - \$15,000
	Legg Mason Large Cap Growth	S	No	7-15-09	\$1,001 - \$15,000
	Lord Abbett Midcap Value Fund	S	No	7-15-09	\$1,001 - \$15,000
	MFS Total Return	S	No	7-15-09	\$15,001 - \$50,000
	New Perspective Fund Class A	P	N/A	8-1-09	\$1,001 - \$15,000
	New Perspective Fund Class A	P	N/A	9-14-09	\$1,001 - \$15,000
	New Perspective Fund Class A	P	N/A	10-12-09	\$1,001 - \$15,000
	Northwestern Mutual Investment Services General Money Market Fund	P	N/A	7-15-09	\$50,001 - \$100,000
	Northwestern Mutual Investment Services General Money Market Fund	S(part)	No	10-12-09	\$15,001 - \$50,000

SCHEDULE IV - TRANSACTIONS

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SP, DC, JT	Asset	Type of Transaction	Capital Gain In Excess of \$200?	Date	Amount of Transaction
	Northwestern Mutual Investment Services General Money Market Fund	S(part)	No	9-14-09	\$1,001 - \$15,000
	Northwestern Mutual Investment Services General Money Market Fund	S(part)	No	10-12-09	\$1,001 - \$15,000
	Northwestern Mutual Investment Services general Money Market Fund	S(part)	No	8-1-09	\$15,001 - \$50,000
	Rainier Large Cap growth Fund	S	No	7-15-09	\$1,001 - \$15,000
	Russell Growth Strategy Fund	P	N/A	8-1-09	\$1,001 - \$15,000
	Russell Growth Strategy Fund	P	N/A	10-12-09	\$1,001 - \$15,000
	Russell Growth Strategy Fund Class A	P	N/A	9-14-09	\$1,001 - \$15,000
	SSg Emerging Markets	S	No	7-15-09	\$1,001 - \$15,000
	SSg Russell 2000 Index Fund	S	No	7-15-09	\$1,001 - \$15,000
	The Growth Fund of America Class A	P	N/A	8-1-09	\$1,001 - \$15,000
	The Growth Fund of America Class A	P	N/A	9-14-09	\$1,001 - \$15,000

SCHEDULE IV - TRANSACTIONS

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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 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.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	The Growth Fund of America Class A	P	N/A	10-12-09	\$1,001 - \$15,000
	The Income Fund of America Class A	P	N/A	8-1-09	\$1,001 - \$15,000
	The Income Fund of America Class A	P	N/A	10-12-09	\$1,001 - \$15,000
	The Income Fund of America Class A	P	N/A	9-14-09	\$1,001 - \$15,000
	Washington Mutual Investors Fund Class A	P	N/A	9-14-09	\$1,001 - \$15,000
	Washington Mutual Investors Fund Class A	S(part)	No	10-12-09	\$1,001 - \$15,000
	Washington Mutual Investors Fund Class A	P	N/A	10-12-09	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

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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 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, JT	Creditor	Type of Liability	Amount of Liability
SP	Discover Financial Services, Salt Lake City, UT	Installment Loan- refinance of credit card balances for business start-up expenses (My Style Your Style)	\$15,001 - \$50,000

SCHEDULE IX - AGREEMENTS

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

Date	Parties To	Terms of Agreement
1/1/09	Mark Schauer & State of Michigan	Continued participation in state legislative pension program with benefits to be determined at age 55