

# LEGISLATOR'S FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2010

NOTE: Before completing this Disclosure Statement, please carefully read the enclosed instructions. If additional space is needed, please duplicate this form as necessary and staple all pages together. An original signature is required on page 4; a facsimile, photocopy or stamp signature is not acceptable. Questions should be directed to Legislative Counsel at (609) 292-4625. The completed disclosure form is due May 15, 2011 and should be sent to: Joint Legislative Committee on Ethical Standards, 2nd Floor, State House Annex, Room 210, PO Box 068, Trenton, New Jersey 08625-0068.

Robert W. Singer  
PRINT NAME

CHECK APPROPRIATE HOUSE:     Senate     General Assembly

Provide the following information for yourself, your spouse and minor children (unless otherwise indicated) for calendar year 2010. Please note that a minor child is a child under the age of 18. For each entry, check  the box of the appropriate recipient. When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000 - \$24,999.99; 3=\$25,000 - \$49,999.99; 4=\$50,000 or more.

I. **EARNED INCOME:** List the name, address and amount for each source of earned income. (Earned income includes salaries, bonuses, royalties, commissions, profit sharing and fees.)

	Name of Employer	Address of Employer	Circle Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	<u>See attached sheets</u>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

II. **UNEARNED INCOME:** List the name, address and amount for each source of unearned income. (Unearned income includes rents, dividends and income from investments, trusts and estates.)

A. RENTS

	Property Address	Tenant Name	Circle Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	<u>NA</u>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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 OFFICE OF LEGISLATIVE SERVICE

When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000-\$24,999.99; 3=\$25,000-\$49,999.99; 4=\$50,000 or more.

**B. DIVIDENDS**

Name	Address	Circle Amount Code	Self	Spouse	Child
1) Wachovia Bank	Lakewood NJ 08701	<input checked="" type="radio"/> 2 3 4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2) Commerce Bank	Lakewood NJ 08701	<input checked="" type="radio"/> 2 3 4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3) Harmony Bank	Jackson NJ 08527	<input checked="" type="radio"/> 2 3 4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4) ING	ON Line Banking	<input checked="" type="radio"/> 2 3 4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**C. INCOME from investments, trusts and estates (including capital gains).**

Name	Address	Circle Amount Code	Self	Spouse	Child
1) See Attached		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**III. HONORARIA and FEES: List the name, address, nature and amount for each source of honorarium or fee received by you or your spouse for personal appearances, speeches or writings.**

Name & Nature of Honorarium or Fee	Address	Circle Amount Code	Self	Spouse
1) N.A.		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
2)		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
3)		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
4)		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>

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 OFFICE OF LEGISLATIVE SERVICES

**IV. REIMBURSEMENTS or PREPAID EXPENSES for TRAVEL, LODGING or SUBSISTENCE: List the name, address, nature and amount for each source of reimbursement or prepaid expense and circle whether the source is a profit (P), nonprofit (N), or governmental (G) entity.**

Name & Nature of Reimbursement or Prepaid Expense	Address	Circle Amount Code	Self	Spouse	Child	Circle P, N or G
1) N.A.		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N G
2)		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N G
3)		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N G
4)		1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N G

When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000-\$24,999.99; 3=\$25,000-\$49,999.99; 4=\$50,000 or more.

V. GIFTS: List the name, address, nature and amount for each source of gift to you, your spouse or minor child from a named donor connected to the legislative process.

Name & Nature of Gift	Address	Circle Amount Code				Self	Spouse	Child
		1	2	3	4			
1) <u>N/A</u>	_____	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) _____	_____	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) _____	_____	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) _____	_____	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VI. LIABILITIES: List the name and address of each creditor for you or your spouse and the nature and amount of each liability except for liabilities which are: (a) less than \$15,000 and owed to a relative; (b) less than \$3,000 and owed to any other person; (c) loans secured by a personal motor vehicle or household furniture or appliances; or (d) revolving charge accounts.

Name & Nature of Liability	Address	Circle Amount Code				Self	Spouse
		1	2	3	4		
1) <u>Wells Fargo</u>	<u>850 Bellevue Ave. Lakewood 08701</u>	1	2	3	④	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2) _____	_____	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>
3) _____	_____	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>
4) _____	_____	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>

VII. FORGIVEN LIABILITIES: List the name and address of each former creditor for you or your spouse and the nature and amount of each forgiven liability which would have been required to be reported pursuant to VI above had it not been forgiven.

Name & Nature of Forgiven Liability	Address	Circle Amount Code				Self	Spouse
		1	2	3	4		
1) <u>N.A.</u>	_____	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>
2) _____	_____	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>
3) _____	_____	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>
4) _____	_____	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>

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 OFFICE OF LEGISLATIVE SERVICES

VIII. BUSINESS ORGANIZATIONS: List the name and address of all business organizations in which you or your spouse held an interest.

Name	Address	Self	Spouse
1) <u>Tranquil Escape Spa</u>	<u>Kent Road, Howell, N.J. 07731</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2) _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
3) _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
4) _____	_____	<input type="checkbox"/>	<input type="checkbox"/>

IX. OFFICES, TRUSTEESHIPS, OR DIRECTORSHIPS: List the title of each position held by you or your spouse in any firm, corporation, association, partnership or business and the name and address of the entity in which the position was held.

Position Held	Name & Address of Entity	Self	Spouse
1) <u>See Attached</u>	_____	<input type="checkbox"/>	<input type="checkbox"/>
2) _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
3) _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
4) _____	_____	<input type="checkbox"/>	<input type="checkbox"/>

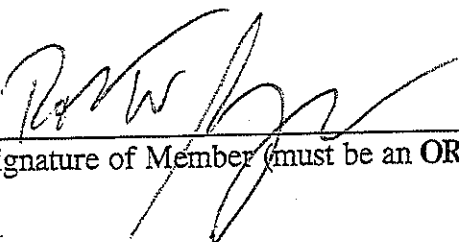
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 OFFICE OF LEGISLATIVE SERVICES

X. REAL ESTATE: Provide the address and a brief description for all real property in New Jersey in which you, your spouse, or minor child held an interest.

Property Address	Description of Property	Self	Spouse	Child
1) <u>850 Bellevue Ave. Lakewood N.J.</u>	<u>Residence</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2) _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I certify that the above information is correct and complete to the best of my knowledge. In addition to this statement, you have a continuing obligation to report any termination or assumption of public employment of yourself or your spouse within 30 days, which report shall be an addendum to this statement.

May 5, 2011  
Date

  
Signature of Member (must be an ORIGINAL signature, not a facsimile, stamp or photocopy)

VIII. BUSINESS ORGANIZATIONS: List the name and address of all business organizations in which you or your spouse held an interest.

	Name	Address	Self	Spouse
1)	<i>Tranquil Escape Spa</i>	<i>Kent Road Howell NJ 07231</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
3)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
4)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

IX. OFFICES, TRUSTEESHIPS, OR DIRECTORSHIPS: List the title of each position held by you or your spouse in any firm, corporation, association, partnership or business and the name and address of the entity in which the position was held.

	Position Held	Name & Address of Entity	Self	Spouse
1)	<i>See Attached</i>	_____	<input type="checkbox"/>	<input type="checkbox"/>
2)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
3)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
4)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

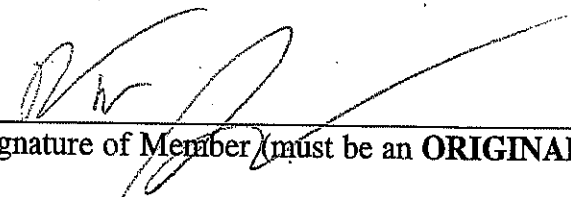
OFFICE OF  
 LEGISLATIVE  
 SERVICES  
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X. REAL ESTATE: Provide the address and a brief description for all real property in New Jersey in which you, your spouse, or minor child held an interest.

	Property Address	Description of Property	Self	Spouse	Child
1)	<i>850 Bellevue Ave. Lakewood N.J.</i>	<i>Residence</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I certify that the above information is correct and complete to the best of my knowledge. In addition to this statement, you have a continuing obligation to report any termination or assumption of public employment of yourself or your spouse within 30 days, which report shall be an addendum to this statement.

May 5, 2011  
Date

  
Signature of Member (must be an ORIGINAL signature, not a facsimile, stamp or photocopy)

Singer, Robert W.

State

2010

List the name and address of each source of income, earned and unearned, which you received in excess of \$2000.00.

Name	Address	Self	Spouse	Amount
Community/Kimball	600 River Avenue		X	4
Georgian Court Univ.	Forrest Ave, Lakewood NJ		X	1
Lakewood Township	231 Third St. Lakewood NJ	X		2
Lakewood MUA	390 New Hampshire Ave, Lakewood	X		1
Health South Advisory Bd	Route 37 Toms River	X		1
State of New Jersey	State House Trenton	X		3
Russo Family Trust	488 Madison Ave Toms River		X	1
Harmony Bank	West County Line Road, Jackson	X		4

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SERVICES

Singer, Robert W.

2010

Agency

Position Held

Term Expires

Lakewood Township

Committeeman

1/1/2011

Lakewood Township MUA

Chairman

3/1/2016

New Jersey Senate

Senator

1/1/2012

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Singer, Robert W.

2010

Company Name	Account Registration	Estimated Yearly Dividend
Fidelity Investments	Robert and Caryl Singer Self Spouse	All entries Code 1
Nationwide	Robert and Caryl Singer Self Spouse	All entries Code 1

7 6 - JAN 1977

LEGISLATIVE  
SERVICE

COMPANY NAME

Agere Systems/AGR/B/AGRIA  
c/o The Bank of New York  
P.O. Box 11082  
Church Street Station  
New York, NY 10286-1082  
Phone: 1-866-243-7347

Avaya Inc./AV  
Attn: Investor Relations  
211 Mount Airy Road  
Basking Ridge, NJ 07920  
Phone: 908-953-1504

Agilent Technologies/A  
395 Page Mill Road  
Palo Alto, CA 94305  
1-877-424-4536

ANC Rent Corp.

Bank of New York Corporation/BAC  
Bank of America Corporation Center  
100 North Tryon Street  
Charlotte, NC 28255  
1-704-386-8436

ACCOUNT REGISTRATION

Robert W. Singer

*Self*

Caryl Singer

*Spouse*

Caroline Singer Trust

*Child*

Robert W. Singer

*Self*

Carl Singer

*Spouse*

Caroline Singer Trust

*Child*

Caryl Singer

*Spouse*

Caryl Singer

*Spouse*

Marianna Singer Trust

*Child*

Caryl Singer

*Spouse*

ESTIMATED YEARLY DIVIDEND

*All entries Code 1*

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OFFICE OF  
LEGISLATIVE  
SERVICES

COMPANY NAME

Berkshire Hathaway, Inc./BRK/B  
1440 Kiewit Plaza  
Omaha, NE 68131

Bioject Medical Technology Inc

Lucent Technologies/LLU  
c/o The Bank of New York  
P.O. Box 11082  
Church Street Station  
New York, NY 10286-1082  
Phone: 1-866-243-7347

Bioject Med Technologies Inc./BJCT

Caterpillar Inc./CAT  
Shareholder Services  
100 NE Adams Street  
Peoria, IL 61629-7310  
309-675-4619

Coca-Cola Company/KO  
P.O. Box 1734

ACCOUNT REGISTRATION

Carol Singer

*spouse*

Caroline Singer Trust

*child*

Caryl Singer

*spouse*

Caryl Singer

*spouse*

Robert W. Singer

*self*

Caryl Singer

*spouse*

Caroline Singer Trust

*child*

Caryl Singer

*spouse*

Caryl Singer

*spouse*

Marianna Singer Trust

*child*

Caryl Singer

*spouse*

ESTIMATED YEARLY DIVIDEND

*All entries Code 1*

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OFFICE OF  
LEGISLATIVE  
SERVICES

Allanta, Georgia 30301

COMPANY NAME

ACCOUNT REGISTRATION

ESTIMATED YEARLY DIVIDEND

*All entries Col 1*

Commerce Bank Corp. Inc./CBH  
Mellon Investor Services  
85 Challenger Road  
Ridgefield Park, NJ 07660

Caryl Singer

*spouse*

Marianna Singer Trust

*child*

Caroline Singer Trust

*child*

The NASDAQ Stock Market, Inc./DIA  
Diamond Trust  
Investor Relations  
One Liberty Plaza, 50th Floor  
New York, NY 10006  
Phone: 212-401-8742

Caryl Singer

*spouse*

EMC Corp Mass/EMC  
c/o Alertline  
PMB 3767  
13950 Ballantyne Corporate Plaza  
Charlotte, NC 28277

Caryl Singer

*spouse*

Caroline Singer Trust

*child*

Federal Express  
3610 Hacks Cross Road  
Building A/1st Floor  
Memphis, TN 38125  
901.434.8100

Caryl Singer

*spouse*

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OFFICE OF  
DISCIPLINARY  
SERVICES

COMPANY NAME

Gillette Company/G  
Prudential Tower  
Boston, MA 02199-8004  
617.421.7000

Hewlett-Packard Company/HPQ  
Computershare Investor Services  
Shareholder Communications Department  
2 LaSalle Street, 3rd Floor  
Chicago, IL 60602  
312.588.4990

Intel Corp./INTC  
Intel Corporation RN5-24  
2200 Mission College Blvd  
P.O. Box 58119  
Santa Clara, CA 95052-8119  
408.765.1480

Johnson & Johnson/JPM  
Investors' Relations  
One Johnson & Johnson Plaza  
New Brunswick, NJ 08933  
1.800.950.5089

ACCOUNT REGISTRATION

Caryl Singer

Marianna Singer Trust

Caroline Singer Trust

Caryl Singer

Marianna Singer

Caryl Singer

Caryl Singer

*approved*  
*Child*  
*Child*

*approved*  
*Child*

*approved*

*approved*

ESTIMATED YEARLY DIVIDEND

*all entries Code 1*

2011 MAY -9 A 10 47

OFFICE OF  
REGULATIVE  
SERVICES

COMPANY NAME

JP Morgan Chase & Company/JPM  
Investor Services  
270 Park Avenue  
New York, NY 10017-2070  
212-270-6000

Maytag Corporation/MYG  
403 W. 4th Street N.  
Newton, IA 50208  
641.792.7000

McData Corporation/MCDTA  
380 Interlocken Crescent  
Broomfield, CO 80021  
720.558.8000

McKesson Corporation/MCK  
One Post Street  
San Francisco, CA 94104  
415.983.8300

Medarex Inc./MEDX  
707 State Road  
Princeton, NJ 08540  
609.430.2880

ACCOUNT REGISTRATION

Caryl Singer

*Spouse*

Caryl Singer

*Spouse*

Caryl Singer

*Spouse*

Caroline Singer Trust

*Child*

Caryl Singer

*Spouse*

Caryl Singer

*Spouse*

ESTIMATED YEARLY DIVIDEND

All entries Col 1

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OFFICE OF  
LEGISLATIVE  
SERVICES

COMPANY NAME

ACCOUNT REGISTRATION

ESTIMATED YEARLY DIVIDEND

All entries Coto

Microsoft Corporation/MSFT  
Investor Relations  
One Microsoft Way  
Redmond, Washington 98052-6399

Caryl Singer

Spouse

Marianna Singer Trust

Child

Monsanto Company/MON  
Mellon Investors Services  
85 Challenger Road  
Ridgefield park, NJ 07660

Caryl Singer

Spouse

The NASDAQ Stock Market, Inc./QQQQ  
Nasdaq-100 Trust  
Investor Relations  
One Liberty Plaza, 50th Floor  
New York, NY 10006  
Phone: 212-401-8742

Caryl Singer

Spouse

Nike Inc. Class B/NKE  
One Bowerman Drive  
Beaverton, Oregon 97005-6453

Caryl Singer

Spouse

Marianna Singer Trust

Child

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OFFICE OF  
LEGISLATIVE  
SERVICES

COMPANY NAME

Pfizer Incorporated/PFE  
235 East 42nd Street  
New York, NY 10017  
1.212.733.2323

Solutia Inc./SOLUQ  
Route 130  
Bridgeport, New Jersey 08014

American Stock Exchange  
Standard & Poor (SPY)  
86 Trinity Place  
New York, NY 10006  
212.306.1000

Sun Microsystems Inc./SUN  
4150 Network Circle  
Santa Clara, CA 95054  
800-555-9SUN

ACCOUNT REGISTRATION

Caryl Singer

*Spouse*

Caryl Singer

*Spouse*

Caryl Singer

*Spouse*

Caroline Singer Trust

*Child*

Caryl Singer

*Spouse*

Caroline Singer Trust

*Child*

ESTIMATED YEARLY DIVIDEND

*All entries Cash*

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OFFICE OF  
LEGISLATIVE  
SERVICES

COMPANY NAME

ACCOUNT REGISTRATION

ESTIMATED YEARLY DIVIDEND

All entries Cook 1

Home Depot  
2455 Pace Ferry Road  
Atlanta, GA 30339-4024

Caryl Singer

*Spouse*

Oppenheimer Main Street  
Fund Class/MSIGX  
Oppenheimer Funds  
10200 East Girard Avenue  
Building D  
Denver, CO 80231

Caryl Singer

*Spouse*

Marianna Singer Trust

*Child*

Caroline Singer Trust

*Child*

Oppenheimer Quest Value Fund /QVOPX  
Oppenheimer Funds  
10200 East Girard Avenue  
Building D  
Denver, CO 80231

Caryl Singer

*Spouse*

Marianna Singer Trust

*Child*

Oppenheimer Bond Fund/BK/WAX  
Oppenheimer Funds  
10200 East Girard Avenue  
Building D  
Denver, CO 80231

Caryl Singer

*Spouse*

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REGISTRATIVE  
SERVICES

COMPANY NAME

Verizon Communications Inc./VZ  
Investor Relations  
1095 Avenue of Americas  
36th Floor  
New York, NY 1003  
212-395-1525

Electronic Data Systems  
Corporation/EDS  
1301 Shoreway Road  
Suite 110  
Belmont, CA 94002-4110  
650.508.1155

EL Paso Corporation/EP  
1001 Louisiana Street  
Houston, TX 77002  
713.420.2600

Ampco Pittsburgh Corporation/AP  
Union Electric Steel Corporation  
P.O. Box 465  
Carnegie, PA 15106  
412.429.7655

Franklin/Templeton Distributors  
One Franklin Parkway  
San Mateo, CA 94403-1906  
Franklin/Templeton Corefolio Fd CI C/FTCLX

ACCOUNT REGISTRATION

Carvl Singer

*Spouse*

Marianna Singer Trust

*child*

Marianna Singer Trust

*child*

Mariann Singer Trust

*child*

Marianna Singer Trust

*child*

Caroline Singer Trust

*child*

ESTIMATED YEARLY DIVIDEND

All entries Code 1

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OFFICE OF  
LEGISLATIVE  
SERVICES

COMPANY NAME

Franklin/Templeton Distributors  
One Franklin Parkway  
San Mateo, CA 94403-1906  
Franklin Founding Fd Cl C

Scudder Investments  
Scudder Dreman High Return Cl C  
210 West 10th Street, 6th Floor  
Kansas City, MO 64105-1614

The Davis Funds  
Davis New York Venture Fund Cl C  
66 Brooks Drive  
Braintree, MA 02184

National Grid Transco PLC  
Sponsored ADR

Anadarko Petroleum Corporation/APC  
1201 Lake Robbins Drive  
The Woodlands, Texas 77380  
832.636.1000

The Walt Disney Company/DIS  
500 S. Buren Vista Street

ACCOUNT REGISTRATION

Caroline Singer Trust

*Chelol*

Marianna Singer Trust

*Chelol*

Marianna Singer Trust

*Chelol*

Marianna Singer Trust

*Chelol*

Caroline Singer Trust

*Chelol*

Caroline Singer Trust

*Chelol*

ESTIMATED YEARLY DIVIDEND

All entries Code 1

2011 MAY -9 A 10:49

OFFICE OF  
LEGISLATIVE  
SERVICES

Burbank, CA 91521-9722

<u>COMPANY NAME</u>	<u>ACCOUNT REGISTRATION</u>	<u>ESTIMATED YEARLY DIVIDEND</u>
Marathon Oil Corporation/MRO Corporate Headquarters 5555 San Felipe Road Houston, TX 77056-2723 713.629.6600	Caroline Singer Trust <i>Cheloh</i>	All enTrusts Coste
Columbia Funds Distributors Inc. One Financial Center Boston, MA 02111-2621 Columbia Growth & Income Fd Cl B	Caroline Singer Trust <i>Cheloh</i>	
Unisys Corporation/UIS Unisys Investor Relations Unisys Way Mail Stop A2-15 Blue Bell, PA 19424	Caroline Singer Trust <i>Cheloh</i>	
Xerox Corporation/XRX 800 Long Ridge Road Mail Stop STHQ-24C Stamford, CT 06904 203.968.3807	Caroline Singer Trust <i>Cheloh</i>	
Medsearch Technology Inc.	Robert Singer <i>Seif</i>	

MAY 9 9 10 AM '99

OFFICE OF  
LEGISLATIVE  
SERVICES