AO 10 Rev. 1/2011

FINANCIAL DISCLOSURE REPORT FOR CALENDAR YEAR 2010

Report Required by the Ethics in Government Act of 1978 (5 U.S.C. app. §§ 101-111)

1. Person Reporting (last name, first, middle initial)	2. Court or Organization	3. Date of Report
Perry, Matthew J.	United States District Court (South Carolina)	05/04/2011
	5a. Report Type (check appropriate type) Nomination, Date Initial Annual Final 5b. Amended Report 8. On the basis of the information contained in this Report and modifications pertaining thereto, it is, in my opinion, in com with applicable laws and regulations. Reviewing Officer uctions accompanying this form must be followed. Complete art where you have no reportable information. Sign on last parts.	pliance Date all parts,
I. POSITIONS. (Reporting individual only; see pp. 9-13 of filing	; instructions.)	
✓ NONE (No reportable positions.)		
POSITION	NAME OF ORGAN	NIZATION/ENTITY
1.		
2.		
3.		
4.		
5.		
II. AGREEMENTS. (Reporting individual only; see pp. 14-1	6 of filing instructions.)	
NONE (No reportable agreements.)		
<u>DATE</u>	PARTIES AND TERMS	
1.		
2.		
3.	·	

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Name of Person Reporting

Perry, Matthew J.

Date of Report

05/04/2011

III.	NON-INVESTME	ENT INCOME. a	Reporting individual and spouse; se	e pp. 17-24 of filing instruction	15.)
A. Fi	ler's Non-Investment	Income			
\checkmark	NONE (No reportab	le non-investment inc	come.)		
	DATE		SOURCE AND	TYPE	INCOME (yours, not spouse's)
1.					
2.					
	·				
3.					
4.					
	ouse's Non-Investme		married during any portion of the l	reporting year, complete this se	ection.
✓	NONE (No reportable	le non-investment inc	ome.)		
	<u>DATE</u>		SOURCE AND	<u>TYPE</u>	
1.					
2.					
3.					
					
4.			. 		
	REIMBURSEME. Is those to spouse and dependent NONE (No reportable)	t children; see pp. 25-27 of fili			
V	NONE (No reportable	te reimoursements.)			
	SOURCE	<u>DATES</u>	<u>LOCATION</u>	<u>PURPOSE</u>	ITEMS PAID OR PROVIDED
1.					
2.		-			
3.					
4.			· · · · · · · · · · · · · · · · · · ·		
5.					

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${f V.~GIFTS.}$ (Includes those to spouse and dependent children; see p_i	p. 28-31 of filing instructions.)		
✓ NONE (No reportable gifts.)			
SOURCE	DESCRIPTION		VALUE
1.			
2.			
3.			
4.			
5.			
VI. LIABILITIES. (Includes those of spouse and dependent NONE (No reportable liabilities.)	children; see pp. 32-33 of filing instructions.)		
CREDITOR	<u>DESCRIPTION</u>	V	ALUE CODE

4.

1.

5.

2.

3.

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Name of Person Reporting

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VII INVESTMENTS and TRUSTS - income, value, transactions (Includes those of spouse and dependent children; see pp. 34-60 of filing instructions.)

Perry, Matthew J.

Place "(X)" after each asset exempt from prior disclosure Greenville Hospital Municipal Bond Van Kampan Energy Growth Bond Merrill Lynch Global Bond Resources	(1) Amount Code 1 (A-H)	(2) Type (e.g., div., rent, or int.)	(1) Value Code 2 (J-P)	(2) Value Method Code 3	(1) Type (e.g., buy, sell,	(2) Date mm/dd/yy	(3) Value Code 2	(4) Gain	(5) Identity of
an Kampan Energy Growth Bond		None		(Q-W)	redemption)		(J-P)	Code 1 (A-H)	buyer/seller (if private transaction)
			J	Т					
Marrill Lynch Global Bond Resources	1 1	None	J	Т					
Menni Lynch Global Bolid Resources		None	J	Т					
Merrill Lynch Basic Value FD Bond		None	J	Т					
Merrill Lynch Fundamental Growth Bond		None	J	Т					
ML Health Bond		None	J	Т					
Davis NY Venture		None	J	Т					
Pimco Long Term US Gov.		None	J	Т					
Davis Financial Fund		None	J	Т					
		-							
	ML Health Bond Davis NY Venture Pimco Long Term US Gov.	ML Health Bond Davis NY Venture Pimco Long Term US Gov.	ML Health Bond None Davis NY Venture None Pimco Long Term US Gov. None	ML Health Bond None J Davis NY Venture None J Pimco Long Term US Gov. None J	ML Health Bond None J T Davis NY Venture None J T Pimco Long Term US Gov. None J T	ML Health Bond None J T Davis NY Venture None J T Pimco Long Term US Gov. None J T	ML Health Bond None J T Davis NY Venture None J T Pimco Long Term US Gov. None J T	ML Health Bond None J T Davis NY Venture None J T Pimco Long Term US Gov. None J T	ML Health Bond None J T Davis NY Venture None J T Pimco Long Term US Gov. None J T

1. Income Gain Codes:
(See Columns B1 and D4)
2. Value Codes

⁽See Columns C1 and D3)

Q =Appraisal

U =Book Value

F=\$50,001 - \$100,000 J =\$15,000 or less

G =\$100,001 - \$1,000,000 K =\$15,001 - \$50,000 O =\$500,001 - \$1,000,000 N =\$250,001 - \$500,000 P3 =\$25,000,001 - \$50,000,000

R =Cost (Real Estate Only) V =Other

C =\$2,501 - \$5,000 H1 =\$1,000,001 - \$5,000,000 L =\$50,001 - \$100,000

P1 =\$1,000,001 - \$5,000,000 P4 =More than \$50,000,000

S =Assessment W =Estimated

D=\$5,001 - \$15,000 H2 =More than \$5,000,000 M =\$100,001 - \$250,000 P2 =\$5,000,001 - \$25,000,000

T =Cash Market

E=\$15,001 - \$50,000

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VIII. ADDITIONAL INFORMATION OR EXPLANATIONS. (Indicate part of report.)

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IX. CERTIFICATION.

I certify that all information given above (including information pertaining to my spouse and minor or dependent children, if any) is accurate, true, and complete to the best of my knowledge and belief, and that any information not reported was withheld because it met applicable statutory provisions permitting non-disclosure.

I further certify that earned income from outside employment and honoraria and the acceptance of gifts which have been reported are in compliance with the provisions of 5 U.S.C. app. § 501 et. seq., 5 U.S.C. § 7353, and Judicial Conference regulations.

Signature: s/ Matthew J. Perry

NOTE; ANY INDIVIDUAL WHO KNOWINGLY AND WILFULLY FALSIFIES OR FAILS TO FILE THIS REPORT MAY BE SUBJECT TO CIVIL AND CRIMINAL SANCTIONS (5 U.S.C. app. § 104)

Committee on Financial Disclosure Administrative Office of the United States Courts Suite 2-301 One Columbus Circle, N.E. Washington, D.C. 20544