Yes No 🗸		income, transactions, or liabilities of a spouse or dependent child	Have you excluded from this report any other assets, "unearned" income, transactions, or because they meet all three tests for exemption?	Exemptions Have you excluded from this report any other ass because they meet all three tests for exemption?
Yes No 🗸		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?	d Blind Trusts" approved by the Comn sed. Have you excluded from this repc	Trusts- Details regarding "Qualifie trusts" need not be disclochild?
S	STIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS	DENT, OR TRUST INFORM	EXCLUSION OF SPOUSE, DEPEN
				If yes, complete and attach Schedule V.
e appropriate	and the	Each question in this part must be answered and the appropriate	reportable liability Yes No	V. (more than \$10,000) during the reporting period?
		If yes, complete and attach Schedule IX.		If yes, complete and attach Schedule IV.
Yes 🗸 No 🗌	outside	Did you have any reportable agreement or arrangement with an outside IX. entity?	sell, or exchange any µring the reporting Yes ☑ No ☐	Did you, your spouse, or dependent child purchase, sell, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting period?
		If yes, complete and attach Schedule VIII.		If yes, complete and attach Schedule III.
Yes No V	ing in the	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	unearned" income of portable asset worth Yes 🕢 No 🗌	Did you, your spouse, or a dependent child receive "unearned" income of III. more than \$200 in the reporting period or hold any reportable asset worth
		If yes, complete and attach Schedule VII.		If yes, complete and attach Schedule II.
Yes 🛂 No 🗌	le travel or lan \$305	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$305 from one source)?	o charity in lieu of paying ing period? Yes ☐ No ✔	Did any individual or organization make a donation to charity in lieu of paying II. you for a speech, appearance, or article in the reporting period?
		If yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.
Yes No 🗸	le gift in herwise	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$305 and not otherwise	salaries or fees) of \$200 Yes [] No ☑	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 l. or more from any source in the reporting period?
		QUESTIONS	NSWER EACH OF THESE	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS
more than 30 days late.	more th	Termination Date: ation	Amendment Termination	Report Type Annual (May 15)
A \$200 penalty shall be assessed against anyone who files	A \$200 be asso	Officer Or Employing Office: Employee	State: PA State: 15	Filer Member of the U.S. Status House of Representatives
(Office Use Only)	Offi	(Daytime Telephone)	ame)	(Full Name)
Meng JUL 17 AMII: 53	J.	(202) 225-6411	V. Dent	Charles W. Dent
SELECTION SOMEOF SELECTION				
HAND DELLVERED	H	FORM A Page 1 of 9 For use by Members, officers, and employees	REPRESENTATIVES FOR CALENDAR YEAR 2007	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007

Asse	ldentify (a) ea a fair market of and (b) any of than \$200 in "fland, provide mutual funds retirement pla in which you in the account plans that are and its value of that is not pul its activities, a information, s information, s information, s	Government if you so choo that of your si in the optiona	TU	SP	. T .	DC-1	DC-2	DC-3
et and/or Income Source	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 your spouse, or by your spouse schild.	Government retirement programs. 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.	Bank of America (checking/savings)	American Bank (savings)	American Bank (savings)	Lafayette Ambassador Bank (Savings)	Lafayette Ambassador Bank (Savings)	Lafayette Ambassador Bank (Savings)
BLOCK B Year-End	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."		\$1,001 - \$15,000	\$1 - \$1,000	\$1,001 - \$15,000	\$1 - \$1,000	\$1 - \$1,000	\$1 - \$1,000
	Check all columns that apply. Check "None" if asset did not generate any income during the calendar year. If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)		INTEREST	INTEREST	INTEREST	INTEREST	INTEREST	INTEREST
Amount of Income	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, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income. Check "None" if no income was earned.		\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200
Transaction	Iransaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.				· ·	. 	<u></u>	

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SCHEDULE III - ASSETS AND "UI
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SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Charles W. Dent	/. Dent		Page 3 of 9
ΤL	Aflac, Inc (Common)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT ::	Bank of America (Common)	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	, , ,
ΤŪ	I-shares Dow Jones Select Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	ָ י
J7	Powershares Intl Divd Achievers Portfolio	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	.
ŢŢ	PIMCO FD PAC INVT MGMT All Asset FD CL C	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
JT	Nuveen Municipal Value Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	י ט
J7	Wachovia Securities Bank Deposit Sweep Option	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
JT	Agere Systems Inc	None	None	NONE	<i>်</i>
JT	Air Products and Chemicals	None	DIVIDENDS	\$1 - \$200	S
JT	Alcatel-Lucent 1	None	none	NONE	σ.
	Wachovia Securities Bank Sweep Option (IRA)	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	I-Shares Dow Jones Select Dividend Index Fund (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Gabelli Equity Trust (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
,	Gabelli Healthcare & Wellness \$SRX (IRA)	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	U

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SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Charles W. Dent	. Dent		Page 4 of 9
	Gabelli Utility Trust (IRA)	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
	Wachovia Securities Bank Sweep Option (Beneficial IRA)	\$1 - \$1,000	INTEREST	\$1 - \$200	
	Van Kampen Government SEC \$: FD CL A (Beneficial IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	PS(part)
DC-1	Wachovia Securities Bank Sweep Option \$	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC-1	I-Shares Dow Jones Select Dividend Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-1	Flagstaff Bank CD \$	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
DC-1	Legg Mason Partners Equity \$7 Fund CL O	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-1	Ellsworth Conv Growth & \$1 Income Fund	\$1,001 ~ \$15,000	DIVIDENDS	\$1 - \$200	סר
DC-1	Capital One Bank CD No.	None	INTEREST	\$201 - \$1,000	
DC-3	Wachovia Securities Bank Sweep Option	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC-3	I-Shares Dow Jones Select Dividend Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	· ·
DC-3	Flagstaff Bank CD \$1	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC-3	AllianceBernstein Growth & \$1 Income FD CL B	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-3	Alliance Large Cap Growth	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME	
Name Charles W. Dent	

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Charles W. Dent	V. Dent		Page 5 of 9
DC-3	Ellsworth Conv Growth & Income Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	ס
DC-3	Discover Bank CD	None	INTEREST	\$1 - \$200	
DC-2	Wachovia Securities Bank Sweep Option	\$1,001 - \$15,000	INTEREST	\$1 - \$200	L
DC-2	I-Shares Dow Jones Select Dividend Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-2	Flagstar Bank CD	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC-2	Alliance Large Cap Growth	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
DC-2	Oppenheimer Quest Opportunity Value Fund CL C	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-2	Van Kampen Harbor Fund CL A	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-2	Ellsworth Conv Growth & Income Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	ס
DC-2	Capital One Bank CD	None	INTEREST	\$1 - \$200	
SP	American Euro Pacific Growth Fund CL C (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Davis NY Venture FD CL C (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	! !
SP	Oppenheimer Small & Medium Cap Value FD CL C (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	1
SP	Loomis Sayles Strategic Income Fund CL C (IRA)	\$1,001 - \$15,000 DIVIDENDS	DIVIDENDS	\$201 - \$1,000	

SCHED	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Charles W. Dent	V. Dent		Page 6 of 9
JT	Treasury Fund Daily Money Class	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
ㅋ	AFLAC Inc. (Common)	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
JT :	Wachovia Corp (Common)	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	Commonwealth of PA Deferred Compensation Program (457 PlanNot Self Directed)	\$50,001 - \$100,000	n/a	n/a	
·	Pennsylvania State Employees Retirement System (Pension Not Self Directed)	\$50,001 - \$100,000	n/a	n/a	
JT	PA Tap Account (529 plan— Prepaid Tuition)	\$1,001 - \$15,000	n/a	n/a	
	TIAA-CREF Traditional Long- Term Bond Fund 403(B) Plan	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	TIAA-CREF Stock Fund 403(B) Plan	\$1,001 - \$15,000 DIVIDENDS	DIVIDENDS	\$201 - \$1,000	

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SCHEDULE IV - TRANSACTIONS

Name Charles W. Dent

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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 or series of transactions exceeded \$1,000. Include transactions that resulted in a loss. 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. Provide a brief

	il between you, your spouse, or your dependent come, or my p	dividate of adic or jour poron	nai residence, amess	Tolliera Out. 1 Tolliera & Stite.
SP, DC,		Type of		
JT	Asset	Transaction	Date	Amount of Transaction
ΤĽ	I-shares Dow Jones Select Index Fund	Р	01-16-07	\$1,001 - \$15,000
JT	Powershares Intl Divd Achievers Portfolio	ָּט [ּ]	01-16-07	\$1,001 - \$15,000
JT	Nuveen Municipal Value Fund	7	01-16-07	\$1,001 - \$15,000
Ţ	Agere Systems Inc	S	01-16-07	less than \$1001
JT	Air Products and Chemicals	S	01-16-07	\$1,001 - \$15,000
Ţ	Alcatel-Lucent	S	01-16-07	less than \$1001
,	Gabelli Healthcare & Wellness SRX (IRA)	ָּט [ָ]	06-29-07	less than \$1001
	Van Kampen Government SEC FD CL A (Beneficial IRA)	PS(part)	12-24-07	less than \$1001
DC-1	Ellsworth Conv Growth & Income Fund	סי	07-19-07	\$1,001 - \$15,000
DC-3	Ellsworth Conv Growth & Income Fund	70	07-19-07	\$1,001 - \$15,000
DC-2	Ellsworth Conv Growth & Income Fund	פר	07-19-07	\$1,001 - \$15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Charles W. Dent

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spouse or dependent child that is totally independent of his or her relationship to you. sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$305 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the

Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family g? Food? Member Included? (Y/N) (Y/N)	Days not at sponsor's expense
American Israel Education Foundation	Aug. 4-12	Aug. 4-12 Newark/Tel Aviv/Newark	~	Y	Υ	0

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SCHEDULE IX - AGREEMENTS

Name Charles W. Dent

Page 9 of 9

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
Charles W. Dent & Commonweath of PA	Health insurance provided by Highmark Blue Shield

2007