		Ш		_				<u>D</u>				
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.	TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excep excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	ld have any reportable orting period?	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.	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? If yes, complete and attach Schedule III.	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? If yes, complete and attach Schedule II.	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.	PRELIMINARY INFORMATION — ANSWER		Status Member of the U.S. State: PA House of Representatives District: 19	Name: Toold R. Plath	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT
ts, "unearned" income, tr ss you have first consulte	ne Committee on Ethics ar spouse, or dependent	R TRUST INFO	Yes No No	Yes No	Yes No	Yes No X	Yes No	EACH OF THE	Amendment	Officer or Employee	Daytim	IVES RE STATEMENT
ransactions, or liabilities of a spouse or dependent of with the Committee on Ethics.	and certain other "excepted trusts" need not be disclosed. Have you child?	 <u>≥</u>	Each ques appropriate	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	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.	- ANSWER EACH OF THESE QUESTIONS	Termination Date:	er or Employing Office:	Daytime Telephone:(202)225-53%	Form A For use by Members, officers, and employees
child because Yes	slosed. Have you Yes	NSWER EACH OF THESE QUESTIONS	tion in this part must be answered and the schedule attached for each "Yes" response	arrangement with	r before the date Yes	receive any the reporting Yes ??	receive any egating more Yes		against anyone who mes more than 30 days late.	A \$200 penalty shall be assessed	2010 II.AY 13 FH 2: 55 MCCS. I. Johnson J. S. S. S. J. S. S. S. J. S. S. S. J. S.	A COMERCO
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Page 2 of S

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) totalling \$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. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

							Comm. of PA, St. Exployees Rethremount System	Ontario County Board of Education	Examples: State of Maryland Civil War Roundtable (Oct. 2nd)	Keene State	Source
							Lugizlothes Rend	Spouse Salary	Spouse Speech	Approved Teaching Fee	Туре
							×4510	NA	\$9,000 \$1,000	\$6,000	Amount

BLOCK A

of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other Identify (a) each asset held for investment or production Asset and/or Income Source

not use ticker symbols.) Provide complete names of stocks and mutual funds (do reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.

value at the end of the reporting period. the power, even if not exercised, to select the specific investments), provide the value for each asset held in the For **all IRAs** and other retirement plans (such as 401(k) plans) that are self-directed (*i.e.*, plans in which you have the name of the institution holding the account and ment accounts which are not self-directed, provide only account that exceeds the reporting thresholds. For retire-

For rental or other real property held for investment, provide a complete address.

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that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For an ownership interest in a privately-held business

ing \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift ing \$5,000 or less in a income during the reporting period); any deposits totalnomes and vacation homes (unless there was rental Exclude: Your personal residence, including second

income source is the child (DC), or is join optional column or you so choose,

please refer to the For a detailed dis-

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Examples:

Value of Asset

BLOCK B

please specify the method used method other than fair market value, reporting year. If you use a valuation Indicate value of asset at close <u>Q</u>

generated income, the value should be year and is included only because it If an asset was sold during the reporting

BLOCK C

Type of Income

Check all columns that apply ing the reporting period. if the asset generated no income disclosed as income. Check "I gains, even if reinvested, mu Dividends, interest, and ca may check the "None" co (such as 401(k) plans or IRAs) that generate tax-deferred you to choose specific investme retirement accounts that do not

BLOCK D

Transaction BLOCK E

If only a		
reporting year.	was earned or generated.	
\$1,000 in	as income. Check "None" if no income	e dur-
exceeding	Dividends, interest, and capital gains,	st be
exchanges (E)	checking the appropriate box below.	apital
sales (S), or	the "None" column. For all other assets, indicate the category of income by	you
purchases (P),	as 401(k) plans or IRAs), you may check	come
asset had	you to choose specific investments <u>or</u> that generate tax-deferred income (such	allow nts or
Indicate if the	For retirement accounts that do not allow	y. For
Hallsaction	Amount of Income	

Francis Final	Amounts	warm Fund	thank Find	when Bank Acct	whanna Bank Act	1st Bank of Paducah, KY Accounts	Simon & Schuster	SP Mega Corp. Stock	address. I read properly read for investment, pro- address. Ip interest in a privately-held business by traded, state the name of the busi- of its activities, and its geographic loca- personal residence, including second ation homes (<i>uniess</i> there was rental ne reporting period); any deposits total- ses in a personal checking or saving y financial interest in, or income derived etirement program, including the Thrift etirement program, including the Thrift iointly held with your spouse (JP) or dependent iointly held with your spouse (JT), in the on the far left.
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							Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)
	l								None
X	X	X	×	×	×				\$1 - \$200
									\$201 – \$1,000
								×	\$1,001 - \$2,500
<u> </u>					<u> </u>	<u> </u>	_	<u> </u>	\$2,501 – \$5,000
		<u> </u>	<u> </u>	<u> </u>	<u> </u>	×	L	_	\$5,001 - \$15,000
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				ļ <u>.</u>	ļ	L	<u> </u>		Over \$5,000,000
								S (partial)	asset is sold, please indicate as follows: (S) (partial) See below for example. P, S, E

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Continuation Sheet (if needed) SCHEDULE III—ASSETS AND "UNEARNED" INCOME Page 4

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										Caynord James Bark Dapa Ace	Experience Sank Azet #2	Susqualierra Barlotad 951	Thornton Linear Linear	the Selding Com	is mid cap Grantific	Sci.+Tach Find	Growth Fund of Amounta				BLOCK A Asset and/or Income Source
		<u> </u>	<u> </u>													×		×		None >	
						<u> </u>				X								٠		\$1 - \$1,000	
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												X								\$15,001 - \$50,000	\$
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																				Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	BLOCK C Type of Income
				ļ					 `	X	X	×			X	メ		メ		None –	
			<u> </u>										X				X		X	\$1 - \$200 =	_
																				\$201 - \$1,000 =	An
								L												\$1,001 - \$2,500 <	BLOCK D Amount of Income
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SCHEDULE IV— TRANSACTIONS

Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real prop-Type 70+0

or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000 Include transactions that	of Transaction	action		Date			Amo	Amount	으	Transaction	actio	S		
resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent chil-			pital \$200	(MO/DAY/YR)	>	Φ.	ဂ	0	m	π_	ဓ	I	_	د
dren, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	HASE	IANGE	Box if Ca xceeded	or Quarterly, Monthly, or			0	0	0	000	000	,000	,001- ,000	,000
Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	PURC	EXC	Check Gain E	Bi-weekly, if applicable	\$1,001- \$15,000	\$15,001 \$50,000	\$50,001 \$100,00	\$100,00 \$250,00	\$250,00 \$500,00	\$500,00 \$1,000,	\$1,000, \$5,000,	\$5,000,0 \$25,000	\$25,000 \$50,000	Over \$50,000
SP, DC, JT Asset														
Example: Mega Corpo	×			10-12-10		×							Ш	
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ASSA 5 star Sel. + Technology Fund	*	•		4-13-15	X				-					
Salignan Comm. + Inter Find	メ			4-13-10	メ									
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