<u> </u>	ld Yes _ No €	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.	nssets, "unearned" ir	Exemptions Have you excluded from this report any other assets, "unearned" income, transactions, or because they meet all three tests for exemption? Do not answer "yes" unless you have fir Standards of Official Conduct.
	ad 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?	oved by the Commit	Trusts- Details regarding "Qualified Blind Trusts" app trusts" need not be disclosed. Have you exclusion of the child?
	TIONS	ATION ANSWER EACH OF THESE QUES	UST INFORM	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS
	:	schedule attached for each "Yes" response.		If yes, complete and attach Schedule V.
	₃nd the appropriate	Each question in this part must be answered and the appropriate	Yes No 🗸	Did you, your spouse, or a dependent child have any reportable liability V. (more than \$10,000) during the reporting period?
		If yes, complete and attach Schedule IX.		If yes, complete and attach Schedule IV.
	rtside Yes ✓ No 🗌	Did you have any reportable agreement or arrangement with an outside IX. entity?	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.
	ginthe Yes _ No ☑	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	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.
	travel or sign of the same of the same or same	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$335 from one source)?	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.
	gift in erwise Yes ∷ No ☑	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$335 and not otherwise	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	OF THESE	PRELIMINARY INFORMATION ANSWER EACH
	late.		Termination	Type (Annual (May 15) Amendment
	more than 30 days	Termination Date:		Report
	A \$200 penalty shall be assessed against	Employee Employing Onice.		Status House of Representatives District: 15
_ کر (HOUSE SPREAKED PRIVES	(Daytime Telephone)		(Full Name)
2	7009 JUL 24 PM 2: 58	202-225-6411 70n o J		. Charles W. Dent
	NEW TESTINES CHILES		:	
		FORM A Page 1 of 7 For use by Members, officers, and employees	NTATIVES EMENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT

		Name Charles W. Dent	V. Dent		Page 2 of /
	BLOCK A	вгоск в	BLOCK C	BLOCK D	BLOCK E
ASSE Identify (a) ea a fair market and (b) any of than \$200 in fant (b) any of than \$200 in fant (b) any of land, provide mutual funds retirement pla in which you investments) in the accoun plans that are and its value that is not pu its activities, information, s Exclude: You debt owed to parent or sibl savings acco Government If you so cho that of your s in the options	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."	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.
If you so choo that of your s in the optiona	ose, you may indicate that an asset or income source is pouse (SP) or dependent child (DC) or is jointly held (JT), all column on the far left.				
ΤΓ	AFLAC Inc. (Common)	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
JT	Aflac, Inc (Common)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-3	AllianceBernstein Growth & Income FD CL A	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-3	AllianceBernstein Large Cap Growth	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
DC-2	AllianceBernstein Large Cap Growth	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
JT	American Bank (Savings)	\$15,001 - \$50,000	INTEREST	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

		DC-3	DC-1	DC-2	DC-1	DC-3	DC-2	SP		J	JT	q _S	JT .	SCHEDUL
Gabelli Healthcare & Wellness	Gabelli Equity Trust (IRA)	Flagstar Bank CD	Flagstar Bank CD	Flagstar Bank CD	Ellsworth Conv Growth & Income Fund	Ellsworth Conv Growth & Income Fund	Ellsworth Conv Growth & Income Fund	Davis NY Venture FD CL C (IRA)	Commonwealth of PA Deferred Compensation Program (457 Plan Not Self Directed)	Bank of America (Common)	Bank of America (Checking / Savings)	American Euro Pacific Growth Fund CL C (IRA)	American Bank (Savings)	SCHEDULE III - ASSETS AND "UNEARNED" INCOME
\$1 - \$1,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$50,001 - \$100,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	Name
DIVIDENDS	DIVIDENDS	INTEREST	INTEREST	INTEREST	DIVIDENDS	DIVIDENDS	DIVIDENDS	DIVIDENDS	N/A	DIVIDENDS	INTEREST	DIVIDENDS	INTEREST	Charles W. Dent
\$1 - \$200	\$201 - \$1,000	\$1 - \$200	\$201 - \$1,000	\$201 - \$1,000	\$201 - \$1,000	\$201 - \$1,000	\$201 - \$1,000	\$1 - \$200	NONE	\$1,001 - \$2,500	\$1 - \$200	\$1 - \$200	\$1 - \$200	· · · · · · · · · · · · · · · · · · ·
										-				Page 3 of 7

SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Charles W. Dent	s W. Dent		Page 4 of 7
	Gabelli Utility Trust (IRA)	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
DC-3	I-Shares Dow Jones Select Dividend Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-1	I-Shares Dow Jones Select Dividend Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-2	I-Shares Dow Jones Select Dividend Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	I-Shares Dow Jones Select Dividend Index Fund (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	l-shares Dow Jones Select Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
DC-1	Lafayette Ambassador Bank (Savings)	\$1 - \$1,000	INTEREST	\$1 - \$200	
DC-2	Lafayette Ambassador Bank (Savings)	\$1 - \$1,000	INTEREST	\$1 - \$200	
DC-3	Lafayette Ambassador Bank (Savings)	\$1 - \$1,000	INTEREST	\$1 - \$200	
DC-1	Legg Mason Partners Equity Fund CL O	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Loomis Sayles Strategic Income Fund CL C (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
JT	Nuveen Municipal Value Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
DC-2	Oppenheimer Quest Opportunity Value Fund CL C	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Oppenheimer Small & Medium Cap Value FD CL C (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	

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

SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Charles W. Dent	s W. Dent		Page 5 of 7
	PA Tap Account (529 Plan - Prepaid Tuition)	\$1,001 - \$15,000	N/A	NONE	
	Pennsylvania State Employees Retirement System (Pension - Not Self Directed)	\$50,001 - \$100,000	N/A	NONE	
T	PIMCO FD PAC INVT MGMT All Asset FD CL C	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
J	Powershares Intl Divd Achievers Portfolio	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	TIAA-CREF Stock Fund 403(B) Plan	\$1,001 - \$15,000	N/A	NONE	
	TIAA-CREF Traditional Long- Term Bond Fund 403(B) Plan	\$1,001 - \$15,000	N/A	NONE	:
JT	Treasury Fund Daily Money Class	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
:	Van Kampen Government SEC FD CL A (Beneficial IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-2	Van Kampen Harbor Fund CL A	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Wachovia Corp New (Common)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Wachovia Securities Bank Deposit Sweep Option	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC-3	Wachovia Securities Bank Sweep Option	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC-2	Wachovia Securities Bank Sweep Option	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC-1	Wachovia Securities Bank Sweep Option	\$1,001 - \$15,000	INTEREST	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME DC Sweep Option (IRA) Sweep Option (Beneficial IRA) Wachovia Securities Bank Wachovia Securities Bank Account was set up by my X: A 529 College Savings \$1,001 -\$15,000 Unknown \$1 - \$1,000 Name Charles W. Dent Unknown INTEREST INTEREST \$1 - \$200 \$1 - \$200 Unknown Page 6 of 7

children. I am not a beneficiary of the 529 College Savings Account. I have no control over the assets of the 529 College Savings Account.

grandparents to benefit my

children's maternal

SCHEDULE IX - AGREEMENTS

Name Charles W. Dent

Page 7 of 7

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
2007	Charles W Dent & Commonwealth of PA	Health Insurance Provided by Highmark Blue Shield