

# UNITED STATES HOUSE OF REPRESENTATIVES

## CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT

**FORM A**  
For use by Members, officers, and employees

**MAILED  
DELIVERED**

Kathleen Dahlkemper  
(Full Name)

202-225-5406  
(Daytime Telephone)

LEGISLATIVE RESOURCE CENTER  
2010 MAY 17 AM 11:02  
(Office Use Only)

<b>Filer Status</b>	Member of the U.S. House of Representatives	<b>State:</b> PA	<b>Officer Or Employee</b>	<b>Employing Office:</b>
<b>Report Type</b>	Annual (May 15)	<b>Amendment</b>	<b>Termination</b>	<b>Termination Date:</b>

CA \$200 penalty shall be assessed against anyone who files late.  
more than 30 days

### PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

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?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	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)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	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)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
III. If yes, complete and attach Schedule II.		VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
IV. Did you, your spouse, or a dependent child receive "unearned" income of more than \$1,000 at the end of the period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

### EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<b>Trusts-</b>	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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Exemptions--</b>	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.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

**SCHEDULE I - EARNED INCOME**

Name Kathleen Dahlkemper

Page 2 of 7

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$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.

Source	Type	Amount
Dahlkemper Landscape Architects & Contractors	Spouse Salary	N/A

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Kathleen Dahlkemper

Page 3 of 7

BLOCK A	BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source	Year-End Value of Asset	Type of Income	Amount of Income	Transaction
<p>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.</p> <p>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.</p> <p>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.</p>	<p>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."</p>	<p>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.</p>	<p>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.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
<p><b>Fidelity Equity-Income IRA</b></p> <p>JT      1659 Norcross Rd, Erie, PA</p> <p>Rental Property</p>	<p>\$50,001 - \$100,000</p> <p>\$100,001 - \$250,000</p> <p>\$250,001 - \$500,000</p>	<p>CAPITAL GAINS</p> <p>CAPITAL GAINS</p> <p>RENT</p>	<p>\$201 - \$1,000</p> <p>\$1,001 - \$2,500</p> <p>\$15,001 - \$50,000</p>	
<p>JT      Loan to Dahlkemper Landscape Erie, PA</p>	<p>None</p>	<p>None</p>	<p>NONE</p>	
<p>JT      GE Stock</p>	<p>\$15,001 - \$50,000</p>	<p>DIVIDENDS</p>	<p>\$201 - \$1,000</p>	
<p>JT      Columbia Acorn B</p>	<p>\$50,001 - \$100,000</p>	<p>CAPITAL GAINS</p>	<p>\$1,001 - \$2,500</p>	

**SCHEDULE III - ASSETS AND "UNEARNED" INCOME**

Name Kathleen Dahlkemper

Page 4 of 7

JT	Columbia Acorn C	\$50,001 - \$100,000	CAPITAL GAINS	\$1,001 - \$2,500	
JT	Aim Constellation Fund B	\$15,001 - \$50,000	None	NONE	
JT	Aim Global Growth	\$1,001 - \$15,000	CAPITAL GAINS	\$1 - \$200	
JT	Alliance OCC Renaissance	\$15,001 - \$50,000	CAPITAL GAINS	\$1 - \$200	
JT	Fidelity Advisor Mid Cap	\$15,001 - \$50,000	CAPITAL GAINS	\$201 - \$1,000	
JT	Regency Limited Partnership, Senior Living Center Erie, PA	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
JT	Erie Federal CU, Checking	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
JT	Erie Federal CU, Savings	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
JT	Fidelity Equity Income	\$15,001 - \$50,000	CAPITAL GAINS	\$201 - \$1,000	
SP	RVS Large Cap (IRA)	\$1,001 - \$15,000	CAPITAL GAINS	\$201 - \$1,000	
SP	Fidelity Magellan (IRA)	\$100,001 - \$250,000	CAPITAL GAINS	\$2,501 - \$5,000	
SP	Fidelity Contra (simple IRA)	\$250,001 - \$500,000	CAPITAL GAINS	\$2,501 - \$5,000	
SP	Dahlkemper Landscape Architects & Contractors	\$250,001 - \$500,000	Other: S-Corp, see Sch 1		
DC	Fidelity AdvisorBalanced DC # 1	None	CAPITAL GAINS	\$5,001 - \$15,000	S

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Kathleen Dahikemper

Page 5 of 7

DC	Fidelity Equity Income DC #1	\$15,001 - \$50,000	CAPITAL GAINS	\$1,001 - \$2,500	S(part)
DC	Fidelity Aggressive Growth DC #2	\$1,001 - \$15,000	CAPITAL GAINS	\$1 - \$200	
DC	Fidelity Equity Income DC #2	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	
DC	Fidelity Balanced T DC #2	\$1,001 - \$15,000	CAPITAL GAINS	\$1 - \$200	
	Erie Federal CU, Checking	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	Erie Federal CU, Savings	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
JT	Fidelity Contra Fund	None	CAPITAL GAINS	\$15,001 - \$50,000	P
JT	GE	None	CAPITAL GAINS	\$5,001 - \$15,000	P

# SCHEDULE IV - TRANSACTIONS

Name Kathleen Dahlkemper

Page 6 of 7

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 exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. 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. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
DC	Fidelity Advisor Balance, DC # 1	S	Yes	8-05-09	\$1,001 - \$15,000
DC	Fidelity Equity Income, DC # 1	S(part)	Yes	8-05-09	\$1,001 - \$15,000
JT	Fidelity Contra Fund	P	N/A	3-16-09	\$15,001 - \$50,000
JT	GE Stock	P	N/A	3-16-09	\$1,001 - \$15,000

**SCHEDULE VIII - POSITIONS**

Name Kathleen Dahlkemper

Page 7 of 7

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director, resigned	Lake erie Arboretum at Frontier (LEAF)
Corporate Secretary, resigned	Dahlkemper Landscape Architects & Contractors
Board Member, resigned	The Non-Profit Partnership