

# UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT

**FORM B**  
For New Members, Candidates, and New Employees

Name: RICHARD D. DAUGHERTY Daytime Telephone: \_\_\_\_\_

## FILER STATUS



New Member of or Candidate for U.S. House of Representatives

State: PA District: 15

Candidates - Date of Election: \_\_\_\_\_



Check if Amendment



New Officer or Employee  
Employing Office: \_\_\_\_\_

Period Covered: January 1, 2015 to APRIL 30, 2016

*(Signature)*

(Office Use Only)

A \$200 penalty shall be assessed against any individual who files more than 30 days late.

**MAY 04 2016**

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LEGISLATIVE RESOURCE CENTER

2016 MAY 11 PM 1:40

U.S. HOUSE OF REPRESENTATIVES

## PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

A. Did you, your spouse, or your dependent child:

a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or

b. Make more than \$200 in unearned income from any reportable asset during the reporting period?

Yes ☒ No ☐

E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?

Yes ☒ No ☐

C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?

Yes ☒ No ☐

F. Do you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?

Yes ☐ No ☒

D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?

Yes ☒ No ☐

J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?

Yes ☐ No ☒

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"

THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE

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

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?

Yes ☐ No ☒

EXEMPTION - Have you excluded from this report any other assets, "unearned" income, 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.

Yes ☐ No ☒

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**Use additional sheets if more space is required.**

# SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: **RICHARD D. DAUGHERTY**

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BLOCK A Assets and/or Income Sources		BLOCK B Value of Asset													BLOCK C Type of Income								BLOCK D Amount of Income																									
SP, DC, JT	ASSET NAME	None	A	B	C	D	E	F	G	H	I	J	K	L	M	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	Current Year												Preceding Year												
		\$1-\$1,000	\$1,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$250,000	\$250,001-\$500,000	\$500,001-\$1,000,000	\$1,000,001-\$5,000,000	\$5,000,001-\$25,000,000	\$25,000,001-\$50,000,000	Over \$50,000,000	Spouse/DC Asset over \$1,000,000*												I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII
	DC NEW TRIPOLI BANK PA		X															X							X											X												
	DC NEW TRIPOLI BANK PA		X															X							X										X													
	NY LIFE IRA ANNUITY			X														X							X										X													
	BANK OF AMERICA			X														X							X										X													
	OFFSHORE INVESTMENT			X														X							X										X													
	PEOPLES FIRST			X														X							X										X													
	FIRST NATL/MDA			X														X							X										X													

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**Source** (include date of receipt for honoraria)

Type

Amount	Current Year to Filing	Preceding Year
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**Examples:**

ABC Trade Association, Baltimore, MD (July 15)  
State of Maryland  
Civil War Roundtable (Oct. 2)  
Ontario County Board of Education

Honorarium
Spouse Speech
Spouse Salary

	\$20,000
	\$0
	N/A

\$500
\$76,000
\$1,000
N/A

LEHIGH COUNTY SENIOR CITIZENS, INC.

SALARY

22,456

75, 789

**Use additional sheets if more space is required**

# SCHEDULE D - LIABILITIES

Name: **RICARD D. DAUGHERTY**

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Report liabilities of over \$10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. **New Members:** Members are required to report all liabilities secured by real property including mortgages on their personal residence. **Exclude:** Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. \*Column K is for liabilities held solely by your spouse or dependent child.

SP, DC, JT	Creditor	Date Liability Incurred MO/YR	Type of Liability	Amount of Liability										
				A \$10,001-\$15,000	B \$15,001-\$50,000	C \$50,001-\$100,000	D \$100,001-\$250,000	E \$250,001-\$500,000	F \$500,001-\$1,000,000	G \$1,000,001-\$5,000,000	H \$5,000,001-\$25,000,000	I \$25,000,001-\$50,000,000	J Over \$50,000,000	K Over \$1,000,000* (Spouse/DC Liability)
Example	First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE				X							
	FIRSTTRUST	6/2013	MORTGAGE PAYMENT RENTAL				X							
	FIRST NATION	6/2013	HOME EQUITY LOAN		X									

# SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. **Exclude:** Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. **New Members and second-year candidates** report positions held in the reporting period and the current calendar year. **First-year candidates and new employees** report positions held in the current calendar year and two previous years.

Position	Name of Organization
BOARD OF DIRECTORS	LATINO LEADERSHIP ALLIANCE OF THE LEHIGH VALLEY
BOARD OF DIRECTORS	PA ASSOCIATION OF SENIOR CHURCHES
BOARD OF DIRECTORS	INSTITUTE FOR LEARNING IN REPAIRMENT
EX COM MEMBER	LEHIGH COUNTY DEMOCRATIC COMMITTEE