

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Kathy Dahlkemper for Congress

ADDRESS (number and street) PO Box 1045

Check if different than previously reported. (ACC)

Erie PA 16512

2. **FEC IDENTIFICATION NUMBER** C00440271

CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**

3. IS THIS REPORT NEW (N) OR AMENDED (A)

PA 03

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on 04 22 2008 in the State of PA

(c) 30-Day **POST**-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 01 01 2008 through 04 02 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mrs. Elizabeth S McCormick

Signature of Treasurer Electronically Filed by Mrs. Elizabeth S McCormick Date 01 30 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Kathy Dahlkemper for Congress

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

To:

M	M
0	4

D	D
0	2

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<hr/>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	58008.14	152223.21
(b) Total Contribution Refunds (from Line 20(d)).....	125.00	225.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	57883.14	151998.21
<hr/>		
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	100723.94	138442.62
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	100723.94	138442.62
<hr/>		
8. Cash on Hand at Close of Reporting Period (from Line 27).....	73555.59	
<hr/>		
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
<hr/>		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	71559.07	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Kathy Dahlkemper for Congress

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	4

D	D
0	2

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

42725.91

114333.90

(ii) Unitemized.....

14690.84

30906.84

(iii) TOTAL of contributions

57416.75

145240.74

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

549.00

699.00

(d) The Candidate.....

42.39

6283.47

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))

58008.14

152223.21

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

60000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

60000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

58008.14

212223.21

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	100723.94	138442.62
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	125.00	225.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	125.00	225.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	100848.94	138667.62

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	116396.39
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	58008.14
25. SUBTOTAL (add Line 23 and Line 24).....	174404.53
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	100848.94
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	73555.59

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Bill Arbanas		Date of Receipt MM / DD / YYYY 01 / 07 / 2008
	Mailing Address 4471 Whippoorwill Dr		Transaction ID: C14597828
	City Hermitage	State PA	Zip Code 16148-3255
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Powered Aire	Occupation VP of Operations	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

B.	Full Name (Last, First, Middle Initial) Gary M Borowy		Date of Receipt MM / DD / YYYY 01 / 08 / 2008
	Mailing Address 1040 Mission Drive		Transaction ID: C14576111
	City Erie	State PA	Zip Code 16509
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
	Name of Employer Bowowy Insurance Agency	Occupation Insurance Agent	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1900.00		

C.	Full Name (Last, First, Middle Initial) Gary M Borowy		Date of Receipt MM / DD / YYYY 03 / 01 / 2008
	Mailing Address 1040 Mission Drive		Transaction ID: C17455044
	City Erie	State PA	Zip Code 16509
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Bowowy Insurance Agency	Occupation Insurance Agent	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1900.00		

SUBTOTAL of Receipts This Page (optional)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 72
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial)
Nina C Bracken
Mailing Address 6717 Richardson Rd
City Fairview State PA Zip Code 16415-1659
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation homemaker
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1050.00
Date of Receipt 02 / 25 / 2008
Transaction ID: C17449446
Amount of Each Receipt this Period 50.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
John Britton
Mailing Address 9620 Donation Rd
City Waterford State PA Zip Code 16441-4236
FEC ID number of contributing federal political committee. **C**
Name of Employer Marina Holdings Limited Occupation President
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 750.00
Date of Receipt 02 / 29 / 2008
Transaction ID: C17454186
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Timothy G Colvin
Mailing Address 3467 Zimmerly Rd
City Erie State PA Zip Code 16506-4815
FEC ID number of contributing federal political committee. **C**
Name of Employer Tim Colvin Construction Inc. Occupation Contractor
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 01 / 15 / 2008
Transaction ID: C14581291
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
Paul J. Considine

Mailing Address 1333 Top Rd

City Erie State PA Zip Code 16505-2557

FEC ID number of contributing federal political committee. **C**

Name of Employer Considine Biebel & Co. Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 04 / 01 / 2008

Transaction ID: C17560883

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Richard Cross

Mailing Address 301 Gateway Dr

City Fairview State PA Zip Code 16415-1638

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 01 / 07 / 2008

Transaction ID: C14597835

Amount of Each Receipt this Period 150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Aron John Dahlkemper

Mailing Address 8614 Dellway Ln

City Vienna State VA Zip Code 22180-7065

FEC ID number of contributing federal political committee. **C**

Name of Employer CRA International Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 02 / 13 / 2008

Transaction ID: C17438067

Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 72
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial)
Aron John Dahlkemper
Mailing Address 8614 Dellway Ln
City Vienna State VA Zip Code 22180-7065
FEC ID number of contributing federal political committee. C
Name of Employer CRA International Occupation Consultant
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼ 2300.00
Date of Receipt MM / DD / YYYY
03 / 31 / 2008
Transaction ID: C17561844
Amount of Each Receipt this Period 1250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Christine Dahlkemper
Mailing Address 5219 Robinhood Ln
City Erie State PA Zip Code 16509-2562
FEC ID number of contributing federal political committee. C
Name of Employer Dahlkemper Jewelry Connection Occupation Merchant
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼ 250.00
Date of Receipt MM / DD / YYYY
03 / 27 / 2008
Transaction ID: C17551193
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Chuck Dahlkemper
Mailing Address 5240 Schrimper Rd
City Erie State PA Zip Code 16510-3846
FEC ID number of contributing federal political committee. C
Name of Employer RETIRED Occupation retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼ 2300.00
Date of Receipt MM / DD / YYYY
01 / 16 / 2008
Transaction ID: C14597846
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1600.00
TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Chuck Dahlkemper		Date of Receipt
	Mailing Address 5240 Schrimper Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 28 / 2008
	City	State	Zip Code
	Erie	PA	16510-3846
	FEC ID number of contributing federal political committee. C		Transaction ID: C17551571
Name of Employer RETIRED		Occupation retired	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 1200.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼		<input type="text"/> 2300.00	

B.	Full Name (Last, First, Middle Initial) Mary Dahlkemper		Date of Receipt
	Mailing Address 5240 Schrimper Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 28 / 2008
	City	State	Zip Code
	Erie	PA	16510-3846
	FEC ID number of contributing federal political committee. C		Transaction ID: C17551567
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼		<input type="text"/> 2300.00	

C.	Full Name (Last, First, Middle Initial) Stephanie Dahlkemper		Date of Receipt
	Mailing Address 8614 Dellway Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2008
	City	State	Zip Code
	Vienna	VA	22180
	FEC ID number of contributing federal political committee. C		Transaction ID: C17561846
Name of Employer Prince William Public Schools		Occupation Teacher	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 1250.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼		<input type="text"/> 2250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 4750.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Charlie A. Dailey		Date of Receipt
	Mailing Address 513 Shenley Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 29 / 2008
	City	State	Zip Code
	Erie	PA	16505-2233
	FEC ID number of contributing federal political committee. C		Transaction ID: C17559784
Name of Employer Smith & Nephew		Occupation Sales Representative	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Judith Lynn Dailey		Date of Receipt
	Mailing Address 513 Shenley Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 29 / 2008
	City	State	Zip Code
	Erie	PA	16505-2233
	FEC ID number of contributing federal political committee. C		Transaction ID: C17559785
Name of Employer Erie Insurance Group		Occupation Underwriting	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Pamela L Davis		Date of Receipt
	Mailing Address 1421 S Shore Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 02 / 23 / 2008
	City	State	Zip Code
	Erie	PA	16505-2523
	FEC ID number of contributing federal political committee. C		Transaction ID: C17449453
Name of Employer self		Occupation homemaker	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1050.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 4050.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
Nancy-Pat Dire

Mailing Address 102 Laren Road

City State Zip Code
Shelby NC 28152

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Gardner-Webb University professor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 01 / 2008

Transaction ID: C17556025

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Donna Douglass

Mailing Address 9395 Falls Rd

City State Zip Code
Girard PA 16417-8618

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 07 / 2008

Transaction ID: C17462989

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Philip W Dregalla

Mailing Address 1235 Rolling Meadow Rd

City State Zip Code
Pittsburgh PA 15241-3431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Confluence Sales

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 06 / 2008

Transaction ID: C17455447

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 72
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial)
Stephen P Drexler
Mailing Address 705 Pinoak Rd
City Pittsburgh State PA Zip Code 15243-1117
FEC ID number of contributing federal political committee. C
Name of Employer Self Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
1500.00

Date of Receipt MM / DD / YYYY
03 / 09 / 2008
Transaction ID: C17463386
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Beth Dubik
Mailing Address 333 Connecticut Dr
City Erie State PA Zip Code 16505-2213
FEC ID number of contributing federal political committee. C
Name of Employer Insurance Management Occupation Agent
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
500.00

Date of Receipt MM / DD / YYYY
03 / 04 / 2008
Transaction ID: C17455349
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mary Duncan
Mailing Address 526 Beverly Dr
City Erie State PA Zip Code 16505-2210
FEC ID number of contributing federal political committee. C
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
600.00

Date of Receipt MM / DD / YYYY
02 / 23 / 2008
Transaction ID: C17449359
Amount of Each Receipt this Period
75.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1075.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Elizabeth Farrell		Date of Receipt MM / DD / YYYY 01 / 16 / 2008
	Mailing Address 536 Seminole Drive		Transaction ID: C14581306
	City Erie	State PA	Zip Code 16505
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer self Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation homemaker Election Cycle-to-Date ▼ 300.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Jeffrey Fatica		Date of Receipt MM / DD / YYYY 02 / 21 / 2008
	Mailing Address 12350 Abels Rd		Transaction ID: C17443154
	City N. Springfield	State PA	Zip Code 16430-1008
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer CleanState Square One Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Owner Election Cycle-to-Date ▼ 250.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) John P Freeman		Date of Receipt MM / DD / YYYY 03 / 17 / 2008
	Mailing Address 650 Hawthorne Trce		Transaction ID: C17464992
	City Fairview	State PA	Zip Code 16415-1723
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Spectrum Control, Inc. Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation CFO Election Cycle-to-Date ▼ 400.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
Kathy Frisina

Mailing Address 334 Lincoln Ave

City Erie State PA Zip Code 16505-2448

FEC ID number of contributing federal political committee. **C**

Name of Employer The Caring Place Occupation Counselor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 550.00

Date of Receipt 03 / 29 / 2008
Transaction ID: C17559786
Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Douglas Grisier, DO

Mailing Address 5218 Walnut Rdg

City Erie State PA Zip Code 16506-4654

FEC ID number of contributing federal political committee. **C**

Name of Employer Medical Assoc. of Erie Occupation physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 18 / 2008
Transaction ID: C17465852
Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Vinnie Halupczynski

Mailing Address 3255 Kingston Ct.

City Erie State PA Zip Code 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Malin Berquist & Co. Occupation CPA

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt 03 / 04 / 2008
Transaction ID: C17455408
Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **850.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial) Robert M Harcourt		Date of Receipt MM / DD / YYYY 03 / 09 / 2008
Mailing Address 4716 Homeland Blvd		Transaction ID: C17463387
City Erie	State PA	Zip Code 16509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Snap-Tite, Inc	Occupation Mgr	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

B.

Full Name (Last, First, Middle Initial) Nancy T Held		Date of Receipt MM / DD / YYYY 01 / 09 / 2008
Mailing Address 420 Mohawk Dr		Transaction ID: C14576132
City Erie	State PA	Zip Code 16505
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Retired	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Julie Hersch		Date of Receipt MM / DD / YYYY 02 / 13 / 2008
Mailing Address 5127 Walnut Ridge Dr		Transaction ID: C17439268
City Erie	State PA	Zip Code 16506
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Hersch Research	Occupation owner	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1050.00	

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) William H Hilbert		Date of Receipt
	Mailing Address 5850 Clinton Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 01 / 2008
	City	State	Zip Code
	Erie	PA	16509
	FEC ID number of contributing federal political committee. C		Transaction ID: C17455042
Name of Employer PSB Industries		Occupation Chairman	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 1750.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Patti Holland		Date of Receipt
	Mailing Address 821 Dutch Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 25 / 2008
	City	State	Zip Code
	Fairview	PA	16415-1629
	FEC ID number of contributing federal political committee. C		Transaction ID: C17547680
Name of Employer Self		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Mary Ann Jones		Date of Receipt
	Mailing Address 408 Farrington Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 02 / 2008
	City	State	Zip Code
	Seven Fields	PA	16046-4210
	FEC ID number of contributing federal political committee. C		Transaction ID: C17561768
Name of Employer JC Penney		Occupation Store Manager	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 250.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 72
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

<p>A. Full Name (Last, First, Middle Initial) Diane Keim</p> <p>Mailing Address 705 Long Point Dr</p> <p>City State Zip Code Erie PA 16505-5413</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Talbots Occupation sales</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt 01 / 08 / 2008</p> <p>Transaction ID: C14576116</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Joyce Kulyk</p> <p>Mailing Address 7235 Springside Drive</p> <p>City State Zip Code Fairview PA 16415</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Rogers Brothers Corporation Occupation Assistant, Sales Department</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt 04 / 01 / 2008</p> <p>Transaction ID: C17556014</p> <p>Amount of Each Receipt this Period 100.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) Mark Kulyk</p> <p>Mailing Address 7235 Springside Drive</p> <p>City State Zip Code Fairview PA 16415</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Rogers Brothers Corp Occupation V P Sales</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 217.84</p>	<p>Date of Receipt 01 / 28 / 2008</p> <p>Transaction ID: C17450250</p> <p>Amount of Each Receipt this Period 117.84</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> <p>* In-Kind: Event Catering</p>
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SUBTOTAL of Receipts This Page (optional)	717.84
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 72
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial)
Robert F Lark

Mailing Address 3 Garfield St

City State Zip Code
West Middlesex PA 16159-4111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mercer County Democratic Party retired teacher

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
03 / 05 / 2008

Transaction ID: C17455444

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Que Lasky

Mailing Address 8040 Marietta Dr

City State Zip Code
Fairview PA 16415-1358

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
World Resource Inc Principal

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
03 / 08 / 2008

Transaction ID: C17463012

Amount of Each Receipt this Period
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Peggy Laughlin

Mailing Address 4619 Autumnwood Trail

City State Zip Code
Erie PA 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
01 / 07 / 2008

Transaction ID: C14597837

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Frank Leonard		Date of Receipt MM / DD / YYYY 02 / 23 / 2008
	Mailing Address 20 Carey Farms Rd.		Transaction ID: C17449476
	City Erie	State PA	Zip Code 16511
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Self	Occupation Painter	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

B.	Full Name (Last, First, Middle Initial) James J Luddy		Date of Receipt MM / DD / YYYY 03 / 06 / 2008
	Mailing Address 524 Kahkwa Blvd		Transaction ID: C17455445
	City Erie	State PA	Zip Code 16505-2352
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Custom Engineering	Occupation Engineer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) William J Madden		Date of Receipt MM / DD / YYYY 02 / 08 / 2008
	Mailing Address P.O. Box 981		Transaction ID: C17440526
	City Sharon	State PA	Zip Code 16146
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Self	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	▶	850.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial)
Mary Maxwell

Mailing Address 106 West 33rd St

City Erie State PA Zip Code 16508

FEC ID number of contributing federal political committee. **C**

Name of Employer Catholic Charities Occupation Executive Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 01 / 03 / 2008

Transaction ID: C14569378

Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Lynn McBrier

Mailing Address 144 Holly Drive

City Fairview State PA Zip Code 16415

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1150.00

Date of Receipt 03 / 27 / 2008

Transaction ID: C17551191

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Liz McCormick

Mailing Address 7210 Pinegate Rd

City Fairview State PA Zip Code 16415-1565

FEC ID number of contributing federal political committee. **C**

Name of Employer McCormick Structural Systems Inc Occupation Controller

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2007.00

Date of Receipt 02 / 23 / 2008

Transaction ID: C17560887

Amount of Each Receipt this Period 25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1075.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 72
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial)
Richard T McCormick

Mailing Address 463 W Arlington Rd

City Erie State PA Zip Code 16509-2270

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

250.00

Date of Receipt: 01 / 18 / 2008

Transaction ID: C14597843

Amount of Each Receipt this Period: 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Richard T McCormick

Mailing Address 463 W Arlington Rd

City Erie State PA Zip Code 16509-2270

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

250.00

Date of Receipt: 03 / 04 / 2008

Transaction ID: C17455406

Amount of Each Receipt this Period: 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Richard T McCormick

Mailing Address 463 W Arlington Rd

City Erie State PA Zip Code 16509-2270

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

250.00

Date of Receipt: 04 / 01 / 2008

Transaction ID: C17560881

Amount of Each Receipt this Period: 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **250.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
Tina Mengine

Mailing Address 952 West 8th St

City Erie State PA Zip Code 16502

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 277.73

Date of Receipt 02 / 07 / 2008

Transaction ID: C17428983

Amount of Each Receipt this Period 25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Tina Mengine

Mailing Address 952 West 8th St

City Erie State PA Zip Code 16502

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 277.73

Date of Receipt 02 / 17 / 2008

Transaction ID: C17450247

Amount of Each Receipt this Period 152.73

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Travel Expenses

C.

Full Name (Last, First, Middle Initial)
Santa Merrifield

Mailing Address 3014 Loveland Ave

City Erie State PA Zip Code 16506-2444

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 03 / 09 / 2008

Transaction ID: C17463391

Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 227.73

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial) Santa Merrifield		Date of Receipt MM / DD / YYYY 03 / 27 / 2008
Mailing Address 3014 Loveland Ave		Transaction ID: C17551197
City Erie	State PA	Zip Code 16506-2444
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

B.

Full Name (Last, First, Middle Initial) Darlyne M Nedresky		Date of Receipt MM / DD / YYYY 03 / 20 / 2008
Mailing Address 5060 Saybrook PI		Transaction ID: C17532474
City Erie	State PA	Zip Code 16505-1324
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Dietician	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1150.00	

C.

Full Name (Last, First, Middle Initial) Janet M. Pawlowski		Date of Receipt MM / DD / YYYY 04 / 01 / 2008
Mailing Address 8729 Lake Pleasant Rd		Transaction ID: C17560890
City Erie	State PA	Zip Code 16509-5743
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00
Name of Employer Child & Family Guidance Center of Erie	Occupation Counselor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2200.00	

SUBTOTAL of Receipts This Page (optional)	2300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 72

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)

Robert S. Pawlowski

Mailing Address 8729 Lake Pleasant Rd

City	State	Zip Code
Erie	PA	16509-5743

FEC ID number of contributing federal political committee. **C**

Name of Employer General Electric	Occupation Welder
--------------------------------------	----------------------

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00
---	-------------------------------------

Date of Receipt

MM / DD / YYYY
04 / 01 / 2008

Transaction ID: C17560888

Amount of Each Receipt this Period

2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Sara A. Pawlowski

Mailing Address 8729 Lake Pleasant Rd

City	State	Zip Code
Erie	PA	16509-5743

FEC ID number of contributing federal political committee. **C**

Name of Employer Student	Occupation Student
-----------------------------	-----------------------

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
---	-------------------------------------

Date of Receipt

MM / DD / YYYY
04 / 01 / 2008

Transaction ID: C17560891

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Anne M Pilewski

Mailing Address 227 Woodland Farms Rd

City	State	Zip Code
Pittsburgh	PA	15238

FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Homemaker
--------------------------	-------------------------

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00
---	------------------------------------

Date of Receipt

MM / DD / YYYY
01 / 31 / 2008

Transaction ID: C17409602

Amount of Each Receipt this Period

600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3900.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 72
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial)
Christine R Polacci
Mailing Address 4201 elmwood ave.
City State Zip Code
erie PA 16509
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation self
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8
Transaction ID: C17553306
Amount of Each Receipt this Period
100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Steve Porter
Mailing Address 51 Stephany Rd
City State Zip Code
Fairview PA 16415-1456
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 8
Transaction ID: C17549433
Amount of Each Receipt this Period
250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Khalil Rabat
Mailing Address 3708 Beech Avenue
City State Zip Code
Erie PA 16508
FEC ID number of contributing federal political committee. **C**
Name of Employer N R T I Occupation President
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 8 / 2 0 0 8
Transaction ID: C17409592
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1350.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 72
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial)
Anne Schaaf Rahner
Mailing Address 315 W 40th St
City Erie State PA Zip Code 16508-3003
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1675.99
Date of Receipt 04 / 01 / 2008
Transaction ID: C17560884
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Richard L Reichel
Mailing Address 417 Seminole Dr
City Erie State PA Zip Code 16505-2425
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Dentist
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 04 / 01 / 2008
Transaction ID: C17560880
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Marilyn Agresti Renkes
Mailing Address 517 Montmarc Blvd
City Erie State PA Zip Code 16504-2611
FEC ID number of contributing federal political committee. **C**
Name of Employer K2S,PC Occupation CPA
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00
Date of Receipt 03 / 04 / 2008
Transaction ID: C17455350
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
Ellen Richards

Mailing Address 415 Vermont Avenue

City Erie State PA Zip Code 16505

FEC ID number of contributing federal political committee. **C**

Name of Employer Girard School District Occupation Guidance Counselor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 01 / 10 / 2008
Transaction ID: C14576144

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Patrick L Richards

Mailing Address 415 Vermont Avenue

City Erie State PA Zip Code 16505

FEC ID number of contributing federal political committee. **C**

Name of Employer L. H. Production Occupation Video Production

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1662.50

Date of Receipt 01 / 09 / 2008
Transaction ID: C14597864

Amount of Each Receipt this Period 75.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Videotaping Donated

C.

Full Name (Last, First, Middle Initial)
Patrick L Richards

Mailing Address 415 Vermont Avenue

City Erie State PA Zip Code 16505

FEC ID number of contributing federal political committee. **C**

Name of Employer L. H. Production Occupation Video Production

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1662.50

Date of Receipt 04 / 01 / 2008
Transaction ID: C17561861

Amount of Each Receipt this Period 862.50

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Video Production

SUBTOTAL of Receipts This Page (optional) ► **1937.50**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 72
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	
							<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
Janet Robert

Mailing Address 4221 McDonald Dr N

City Stillwater State MN Zip Code 55082-2122

FEC ID number of contributing federal political committee. **C**

Name of Employer JR Broadcasting LLC Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt MM / DD / YYYY
03 / 31 / 2008

Transaction ID: C17559798

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Dawn Deiner Sauter

Mailing Address 324 Newbury Drive

City Monroeville State PA Zip Code 15146

FEC ID number of contributing federal political committee. **C**

Name of Employer Workscape, Inc. Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
04 / 02 / 2008

Transaction ID: C17559773

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Charles Schaaf

Mailing Address 434 Seminole Drive

City Erie State PA Zip Code 16505

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 650.00

Date of Receipt MM / DD / YYYY
01 / 15 / 2008

Transaction ID: C14581230

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3050.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 72
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial)
William J. Schaaf
 Mailing Address 502 Seminole Dr
 City Erie State PA Zip Code 16505-2428
 FEC ID number of contributing federal political committee. C
 Name of Employer Marsh Spaeder Bauer Spaeder & Schaaf Occupation Attorney
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
1000.00

Date of Receipt MM / DD / YYYY
02 / 29 / 2008
Transaction ID: C17454177
 Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Lorene F Schaefer
 Mailing Address 2324 South Shore Drive
 City Erie State PA Zip Code 16505
 FEC ID number of contributing federal political committee. C
 Name of Employer Self Occupation Attorney
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
1000.00

Date of Receipt MM / DD / YYYY
01 / 10 / 2008
Transaction ID: C14576139
 Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Michael Schloss
 Mailing Address 306 Shawnee Dr
 City Erie State PA Zip Code 16505-2432
 FEC ID number of contributing federal political committee. C
 Name of Employer Retired Occupation Retired
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
750.00

Date of Receipt MM / DD / YYYY
03 / 18 / 2008
Transaction ID: C17465855
 Amount of Each Receipt this Period
100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 72
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	
							<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
Jessica L. Schneider

Mailing Address 1438 Durham Dr
2803 Gates Ct.

City Broadview Hts State OH Zip Code 44147-4289

FEC ID number of contributing federal political committee. **C**

Name of Employer Techno Gym Occupation Sales Representative

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 500.00

Date of Receipt: 03 / 31 / 2008

Transaction ID: C17559806

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Peter Scibetta

Mailing Address 504 Gordon Ln

City Erie State PA Zip Code 16509-2305

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation retired physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 250.00

Date of Receipt: 02 / 29 / 2008

Transaction ID: C17455038

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Harold Simmons

Mailing Address 3605 Culpepper Dr.

City Erie State PA Zip Code 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Viking Plastics Occupation Administrator

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 675.00

Date of Receipt: 02 / 23 / 2008

Transaction ID: C17449420

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **775.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
J. Kathleen Steele

Mailing Address 4343 Colt Ln

City Erie State PA Zip Code 16506-6619

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 04 / 02 / 2008

Transaction ID: C17561778

Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Carl W Steenberge

Mailing Address 518 W Arlington Rd

City Erie State PA Zip Code 16509-2206

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2200.00

Date of Receipt 02 / 23 / 2008

Transaction ID: C17449488

Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Carl W Steenberge

Mailing Address 518 W Arlington Rd

City Erie State PA Zip Code 16509-2206

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2200.00

Date of Receipt 03 / 17 / 2008

Transaction ID: C17464996

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1150.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 72
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial)
Michael Steenberge

Mailing Address 6329 Golden Star Place

City Columbia State MD Zip Code 21044

FEC ID number of contributing federal political committee. **C**

Name of Employer Ciena Corporation Occupation IT Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 300.00

Transaction ID: C17559790

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Theresa Sumner

Mailing Address 952 West 8th Street

City Erie State PA Zip Code 16502

FEC ID number of contributing federal political committee. **C**

Name of Employer Student Occupation Student

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 275.00

Transaction ID: C17430006

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Amy H Szumigale

Mailing Address 511 Side Wood Dr

City Erie State PA Zip Code 16505-1049

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 300.00

Transaction ID: C17462990

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Jim Tometsko		Date of Receipt
	Mailing Address 1103 Lawrence Ct		<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Girard	PA	16417-1137
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Mercyhurst College		Occupation Human Resources	Transaction ID: C17450254
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1167.84"/>	<input type="text" value="117.84"/>
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
			* In-Kind: Event Catering

B.	Full Name (Last, First, Middle Initial) Rod J Troester		Date of Receipt
	Mailing Address 114 E 36th St		<input type="text" value="02"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Erie	PA	16504-1518
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Penn State Behrend		Occupation Professor	Transaction ID: C17440523
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="350.00"/>	<input type="text" value="250.00"/>
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Rod J Troester		Date of Receipt
	Mailing Address 114 E 36th St		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Erie	PA	16504-1518
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Penn State Behrend		Occupation Professor	Transaction ID: C17455442
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="350.00"/>	<input type="text" value="100.00"/>
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="467.84"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 72
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
David Tullio

Mailing Address 4422 Upland Dr

City Erie State PA Zip Code 16509-1655

FEC ID number of contributing federal political committee. **C**

Name of Employer Custom Engineering Co. Occupation executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 01 / 16 / 2008

Transaction ID: C14581304

Amount of Each Receipt this Period 150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
David Tullio

Mailing Address 4422 Upland Dr

City Erie State PA Zip Code 16509-1655

FEC ID number of contributing federal political committee. **C**

Name of Employer Custom Engineering Co. Occupation executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 28 / 2008

Transaction ID: C17550553

Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Debra A. Uht

Mailing Address 4722 Upland Dr

City Erie State PA Zip Code 16509-2248

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 01 / 03 / 2008

Transaction ID: C14569375

Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **350.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
Robert J Van Tuil

Mailing Address 19051 Park Avenue Plz

City State Zip Code
Meadville PA 16335-4011

FEC ID number of contributing federal political committee. **C**

Name of Employer Van Tuil Photo And Imaging Occupation Merchant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 07 / 2008

Transaction ID: C14576109

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Robert J Van Tuil

Mailing Address 19051 Park Avenue Plz

City State Zip Code
Meadville PA 16335-4011

FEC ID number of contributing federal political committee. **C**

Name of Employer Van Tuil Photo And Imaging Occupation Merchant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 29 / 2008

Transaction ID: C17455035

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Everett David Walker

Mailing Address 4929 Wolf Rd

City State Zip Code
Erie PA 16505-1339

FEC ID number of contributing federal political committee. **C**

Name of Employer Walker Real Estate Occupation Real Estate Leasing

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 13 / 2008

Transaction ID: C17440530

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 72
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial)
Everett David Walker

Mailing Address 4929 Wolf Rd

City State Zip Code
Erie PA 16505-1339

FEC ID number of contributing federal political committee. **C**

Name of Employer Walker Real Estate Occupation Real Estate Leasing

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	0	8

Transaction ID: C17463402

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Arlene Webb

Mailing Address 550 Montroyale

City State Zip Code
Erie PA 16504

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1050.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	8

Transaction ID: C17455047

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Marguerite M Weibel

Mailing Address 469 Grandview Dr

City State Zip Code
Erie PA 16509

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	8	/	2	0	0	8

Transaction ID: C14597842

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **250.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 37 / 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial) Susan Q Wellman		Date of Receipt MM / DD / YYYY 02 / 05 / 2008
Mailing Address 3801 Old State Road		Transaction ID: C17430004
City Edinboro	State PA	Zip Code 16412
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer The Ophelia Project	Occupation Administrator	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) Douglas M Yarbenet		Date of Receipt MM / DD / YYYY 02 / 29 / 2008
Mailing Address 1620 W. 4th St		Transaction ID: C17455036
City Erie	State PA	Zip Code 16505-2404
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer self	Occupation Accountant	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	42725.91

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 72
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial)
American Dietetic Assoc. PAC

Mailing Address 1120 Connecticut Ave NW
Ste 480

City State Zip Code
Washington DC 20036-3989

FEC ID number of contributing federal political committee. **C** C00143560

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	0	8

Transaction ID: C17556432

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Butler County Democrats For Change

Mailing Address P. O. Box 2208

City State Zip Code
Butler PA 16003-2208

FEC ID number of contributing federal political committee. **C** C00438333

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
49.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	9	/	2	0	0	8

Transaction ID: C17559817

Amount of Each Receipt this Period
49.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Candidates Forum Share of Costs

SUBTOTAL of Receipts This Page (optional)	▶	549.00
TOTAL This Period (last page this line number only)	▶	549.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 72
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 11d
		<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial) Kathy Dahlkemper		Date of Receipt
Mailing Address 530 Seminole Dr		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
City	State	Zip Code
Erie	PA	16505-2428
FEC ID number of contributing federal political committee.		Transaction ID: C17559826
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="42.39"/>
Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008	Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="66283.47"/>	* In-Kind: Phone for Herm-itage HQ
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="42.39"/>
TOTAL This Period (last page this line number only)	<input type="text" value="42.39"/>

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 40 / 72

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Ambassador Banquet and Conference Cneter	Transaction ID: D290873 Date of Disbursement
	Mailing Address 7792 Peach St.	<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City Erie State PA Zip Code 16509	Amount of Each Disbursement this Period
	Purpose of Disbursement Event Catering	<input type="text" value="2223.96"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AMVIC	Transaction ID: D290875 Date of Disbursement
	Mailing Address 1652 West 8th ST.	<input type="text" value="02"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City Erie State PA Zip Code 16505	Amount of Each Disbursement this Period
	Purpose of Disbursement Rent	<input type="text" value="1000.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AMVIC	Transaction ID: D282165 Date of Disbursement
	Mailing Address 1652 West 8th ST.	<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City Erie State PA Zip Code 16505	Amount of Each Disbursement this Period
	Purpose of Disbursement Lease Payment Campaign Office Jan	<input type="text" value="1000.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4223.96"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) AMVIC Mailing Address 1652 West 8th ST. City Erie State PA Zip Code 16505 Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D293293 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 8 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) AMVIC Mailing Address 1652 West 8th ST. City Erie State PA Zip Code 16505 Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D298465 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 8 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Big Picture Communications Inc. Mailing Address 1 Altoona Place City Pittsburgh State PA Zip Code 15228 Purpose of Disbursement Debt Payment: Photo Prep. payable Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D288046 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 8 Amount of Each Disbursement this Period 1253.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	3253.43
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Big Picture Communications Inc.	Transaction ID: D288048 Date of Disbursement 01 / 22 / 2008
	Mailing Address 1 Altoona Place	Amount of Each Disbursement this Period 6520.90
	City Pittsburgh State PA Zip Code 15228	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Debt Payment: Camp. Handout Prep.	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Big Picture Communications Inc.	Transaction ID: D288050 Date of Disbursement 01 / 22 / 2008
	Mailing Address 1 Altoona Place	Amount of Each Disbursement this Period 528.41
	City Pittsburgh State PA Zip Code 15228	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Debt Payment: Button Production	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Big Picture Communications Inc.	Transaction ID: D288052 Date of Disbursement 01 / 22 / 2008
	Mailing Address 1 Altoona Place	Amount of Each Disbursement this Period 1661.62
	City Pittsburgh State PA Zip Code 15228	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Debt Payment: Contribution Envelope Prod	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

8710.93

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Blue Streak Strategies, LLC Mailing Address 127 E Sprague Rd City Seven Hills State OH Zip Code 44131 Purpose of Disbursement Campaign Consultant Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D297167 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 8 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Bluestocking Consulting Mailing Address 952 West 8th St. Suite 3 City Erie State PA Zip Code 16502-1164 Purpose of Disbursement Debt Payment: Campaign Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D282168 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 8 Amount of Each Disbursement this Period 1377.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Bluestocking Consulting Mailing Address 952 West 8th St. Suite 3 City Erie State PA Zip Code 16502-1164 Purpose of Disbursement Debt Payment for Campaign Consultant Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D282117 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 2 / 2 0 0 8 Amount of Each Disbursement this Period 1406.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	3284.53
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Bluestocking Consulting	Transaction ID: D282164 Date of Disbursement 01 / 02 / 2008
	Mailing Address 952 West 8th St. Suite 3	Amount of Each Disbursement this Period 3940.40
	City Erie State PA Zip Code 16502-1164	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Debt Payment: Campaign Consulting Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bluestocking Consulting	Transaction ID: D290877 Date of Disbursement 02 / 08 / 2008
	Mailing Address 952 West 8th St. Suite 3	Amount of Each Disbursement this Period 3400.00
	City Erie State PA Zip Code 16502-1164	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Campaign Consulting Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Capers	Transaction ID: D282166 Date of Disbursement 01 / 07 / 2008
	Mailing Address 2743 East 38th St.	Amount of Each Disbursement this Period 350.00
	City Erie State PA Zip Code 16510	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Deposit for Fund Raiser Feb/07 Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7690.40
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
Capers

Mailing Address 2743 East 38th St.

City Erie State PA Zip Code 16510

Purpose of Disbursement
Event Catering
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D293276
Date of Disbursement

02 / 23 / 2008

Amount of Each Disbursement this Period

861.40

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Cellular One

Mailing Address PO Box 6407

City Carol Stream State IL Zip Code 60197-6407

Purpose of Disbursement
Cell Phone Service
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D293290
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

101.64

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Cellular One

Mailing Address PO Box 6407

City Carol Stream State IL Zip Code 60197-6407

Purpose of Disbursement
Cell Phone
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D297164
Date of Disbursement

03 / 16 / 2008

Amount of Each Disbursement this Period

55.40

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1018.44

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

<p>A. Full Name (Last, First, Middle Initial) Cellular One</p> <p>Mailing Address PO Box 6407</p> <p>City Carol Stream State IL Zip Code 60197-6407</p> <p>Purpose of Disbursement Cell Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D298469 Date of Disbursement 04 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 102.34</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Cellular One</p> <p>Mailing Address PO Box 6407</p> <p>City Carol Stream State IL Zip Code 60197-6407</p> <p>Purpose of Disbursement Candidate Cell Phone Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D282092 Date of Disbursement 01 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 101.76</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Cellular One</p> <p>Mailing Address PO Box 6407</p> <p>City Carol Stream State IL Zip Code 60197-6407</p> <p>Purpose of Disbursement Cell Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D290771 Date of Disbursement 01 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 102.01</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

306.11

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) DeSantis Sign and Graphics, Inc.	Transaction ID: D297162
	Mailing Address 540 West 18th St.	Date of Disbursement 03 / 05 / 2008
	City Erie State PA Zip Code 16502-1721	Amount of Each Disbursement this Period 4234.70
	Purpose of Disbursement Campaign Signs	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DeSantis Sign and Graphics, Inc.	Transaction ID: D293287
	Mailing Address 540 West 18th St.	Date of Disbursement 02 / 26 / 2008
	City Erie State PA Zip Code 16502-1721	Amount of Each Disbursement this Period 262.88
	Purpose of Disbursement Campaign Materials	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DeSantis Sign and Graphics, Inc.	Transaction ID: D293288
	Mailing Address 540 West 18th St.	Date of Disbursement 02 / 26 / 2008
	City Erie State PA Zip Code 16502-1721	Amount of Each Disbursement this Period 5506.20
	Purpose of Disbursement Campaign Signs	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	10003.78
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

<p>A. Full Name (Last, First, Middle Initial) Erie Insurance</p> <p>Mailing Address 100 Erie Insurance Place</p> <p>City Erie State PA Zip Code 16530</p> <p>Purpose of Disbursement Insurance Policy HQ</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D298471</p> <p>Date of Disbursement 04 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 44.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Erie Insurance</p> <p>Mailing Address 100 Erie Insurance Place</p> <p>City Erie State PA Zip Code 16530</p> <p>Purpose of Disbursement Debt Payment: Insurance Office</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D282190</p> <p>Date of Disbursement 01 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 566.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Erie Metropolitan Transit Authority</p> <p>Mailing Address 127 E 14th St</p> <p>City Erie State PA Zip Code 16503</p> <p>Purpose of Disbursement Event Transportation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D297163</p> <p>Date of Disbursement 03 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 400.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	1010.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
Filmet Color Laboratories Inc.

Transaction ID: D290871
Date of Disbursement

Mailing Address P.O. Box 106062

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	0	8

City Pittsburgh State PA Zip Code 15230-6062

Amount of Each Disbursement this Period

295.00

Purpose of Disbursement
Campaign Materials
Candidate Name

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Kathy Dahlkemper

Transaction ID: D296646
Date of Disbursement

Mailing Address 530 Seminole Dr

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	0	8

City Erie State PA Zip Code 16505-2428

Amount of Each Disbursement this Period

42.39

Purpose of Disbursement
Phone for Hermitage HQ
Candidate Name
Kathy Dahlkemper

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: PA District: 03

* in-kind received

C.

Full Name (Last, First, Middle Initial)
Market Place Direct

Transaction ID: D290878
Date of Disbursement

Mailing Address 1 Sexton Rd

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	0	8

City Mc Kees Rocks State PA Zip Code 15136-2758

Amount of Each Disbursement this Period

984.61

Purpose of Disbursement
Event Mailing
Candidate Name

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

1322.00

TOTAL This Period (last page this line number only)

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Momentum Analysis, LLC Mailing Address 1508 Monroe St., NW City Washington State DC Zip Code 20010 Purpose of Disbursement Polling Survey Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D290879 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 8 Amount of Each Disbursement this Period 7750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Momentum Analysis, LLC Mailing Address 1508 Monroe St., NW City Washington State DC Zip Code 20010 Purpose of Disbursement Polling Survey Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D290772 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 8 Amount of Each Disbursement this Period 8000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) National Fuel Gas Distribution Corp. Mailing Address 1100 State St. City Erie State PA Zip Code 16501 Purpose of Disbursement Utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D290770 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 8 Amount of Each Disbursement this Period 371.23 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	16121.23
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial)
National Fuel Gas Distribution Corp.

Mailing Address 1100 State St.

City Erie State PA Zip Code 16501

Purpose of Disbursement
Utilities

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D293273

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
National Fuel Gas Distribution Corp.

Mailing Address 1100 State St.

City Erie State PA Zip Code 16501

Purpose of Disbursement
Utilities

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D298467

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
NGP Software, Inc.

Mailing Address 1225 Eye Street, NW
Suite 1225

City Washington State DC Zip Code 20005

Purpose of Disbursement
Website Host and Data Management

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D298472

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 52 / 72

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Penelec Mailing Address PO Box 16001 City Reading State PA Zip Code 19612-6001 Purpose of Disbursement Utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D293289 Date of Disbursement 02 / 26 / 2008 Amount of Each Disbursement this Period 89.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Penelec Mailing Address PO Box 16001 City Reading State PA Zip Code 19612-6001 Purpose of Disbursement Electric at HQ Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D290872 Date of Disbursement 01 / 31 / 2008 Amount of Each Disbursement this Period 73.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Penelec Mailing Address PO Box 16001 City Reading State PA Zip Code 19612-6001 Purpose of Disbursement Electric for Office Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D282087 Date of Disbursement 01 / 02 / 2008 Amount of Each Disbursement this Period 41.07 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	204.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
Postmaster

Mailing Address Griswold Plaza

City Erie State PA Zip Code 16512

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D290874

Date of Disbursement

02 / 01 / 2008

Amount of Each Disbursement this Period

56.60

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Postmaster

Mailing Address Griswold Plaza

City Erie State PA Zip Code 16512

Purpose of Disbursement
Postage Fundraising

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D290775

Date of Disbursement

01 / 28 / 2008

Amount of Each Disbursement this Period

41.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Postmaster

Mailing Address Griswold Plaza

City Erie State PA Zip Code 16512

Purpose of Disbursement
Postage Fundraiser

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D293270

Date of Disbursement

02 / 14 / 2008

Amount of Each Disbursement this Period

119.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

216.60

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: D297161 Date of Disbursement
	Mailing Address Griswold Plaza	<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City Erie State PA Zip Code 16512	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage Mailer	<input type="text" value="13.46"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: D293310 Date of Disbursement
	Mailing Address Griswold Plaza	<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City Erie State PA Zip Code 16512	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage Mailer	<input type="text" value="152.34"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: D293311 Date of Disbursement
	Mailing Address Griswold Plaza	<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City Erie State PA Zip Code 16512	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage Mailer	<input type="text" value="91.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="256.80"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: D297165 Date of Disbursement
	Mailing Address Griswold Plaza	<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City Erie State PA Zip Code 16512	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	<input type="text" value="60.54"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: D297166 Date of Disbursement
	Mailing Address Griswold Plaza	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City Erie State PA Zip Code 16512	Amount of Each Disbursement this Period
	Purpose of Disbursement Mail Box Fee	<input type="text" value="18.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: D297168 Date of Disbursement
	Mailing Address Griswold Plaza	<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City Erie State PA Zip Code 16512	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	<input type="text" value="41.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="119.54"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
Print Management, LLC

Transaction ID: D293292
Date of Disbursement

Mailing Address 800 Vinal Street
Suite B210

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	0	8

City Pittsburgh State PA Zip Code 15212

Amount of Each Disbursement this Period

2255.43

Purpose of Disbursement
Printing Letterhead

--

Candidate Name

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Print Management, LLC

Transaction ID: D293272
Date of Disbursement

Mailing Address 800 Vinal Street
Suite B210

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	0		2	0	0	8

City Pittsburgh State PA Zip Code 15212

Amount of Each Disbursement this Period

714.16

Purpose of Disbursement
Printing Buttons

--

Candidate Name

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Print Management, LLC

Transaction ID: D282159
Date of Disbursement

Mailing Address 800 Vinal Street
Suite B210

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	2		2	0	0	8

City Pittsburgh State PA Zip Code 15212

Amount of Each Disbursement this Period

2186.01

Purpose of Disbursement
Debt Payment:Direct Mailer Printing

--

Candidate Name

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

5155.60

TOTAL This Period (last page this line number only) ►

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Print Management, LLC Mailing Address 800 Vinal Street Suite B210 City Pittsburgh State PA Zip Code 15212 Purpose of Disbursement Debt Payment: Campaign Buttons Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D282161 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>1189.45</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	2		2	0	0	8	1189.45
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		0	2		2	0	0	8														
1189.45																							
B.	Full Name (Last, First, Middle Initial) Print Management, LLC Mailing Address 800 Vinal Street Suite B210 City Pittsburgh State PA Zip Code 15212 Purpose of Disbursement Debt Payment: Invitation Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D282180 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>2988.51</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	0	8	2988.51
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		0	8		2	0	0	8														
2988.51																							
C.	Full Name (Last, First, Middle Initial) Print Management, LLC Mailing Address 800 Vinal Street Suite B210 City Pittsburgh State PA Zip Code 15212 Purpose of Disbursement Debt Payable: Contrib. Envelope Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D288054 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>1088.19</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	2		2	0	0	8	1088.19
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		2	2		2	0	0	8														
1088.19																							

SUBTOTAL of Disbursements This Page (optional) ▶	<table border="1"> <tr> <td>5266.15</td> </tr> </table>	5266.15
5266.15		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td> </td> </tr> </table>	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Printing Concepts Inc.	Transaction ID: D282152 Date of Disbursement 01 / 02 / 2008
	Mailing Address 4982 Pacific Ave.	Amount of Each Disbursement this Period 1480.82
	City Erie State PA Zip Code 16506	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Debt Payment:Printing Invitations	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Anne Schaaf Rahner	Transaction ID: D282162 Date of Disbursement 01 / 02 / 2008
	Mailing Address 315 W 40th St	Amount of Each Disbursement this Period 196.30
	City Erie State PA Zip Code 16508-3003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimburse for announcement exp., Beverage	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Anne Schaaf Rahner	Transaction ID: D293274 Date of Disbursement 02 / 20 / 2008
	Mailing Address 315 W 40th St	Amount of Each Disbursement this Period 22.41
	City Erie State PA Zip Code 16508-3003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimburse event expense	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1699.53
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Anne Schaaf Rahner	Transaction ID: D293282
	Mailing Address 315 W 40th St	Date of Disbursement 02 / 25 / 2008
	City Erie State PA Zip Code 16508-3003	Amount of Each Disbursement this Period 171.53
	Purpose of Disbursement Reimburse Event Beverages	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Patrick L Richards	Transaction ID: D297158
	Mailing Address 415 Vermont Avenue	Date of Disbursement 04 / 01 / 2008
	City Erie State PA Zip Code 16505	Amount of Each Disbursement this Period 862.50
	Purpose of Disbursement Video Production	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	* in-kind received
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Patrick L Richards	Transaction ID: D287338
	Mailing Address 415 Vermont Avenue	Date of Disbursement 01 / 09 / 2008
	City Erie State PA Zip Code 16505	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Videotaping Donated	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	* in-kind received
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1109.03
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 60 / 72

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Signs Now	Transaction ID: D282088 Date of Disbursement 01 / 02 / 2008
	Mailing Address 2232 West 23rd St.	Amount of Each Disbursement this Period 519.93
	City Erie State PA Zip Code 16506	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Debt payment: Sign for office Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

B.	Full Name (Last, First, Middle Initial) Splitstone Enterprises Inc.	Transaction ID: D297160 Date of Disbursement 03 / 01 / 2008
	Mailing Address 2880 E State St.	Amount of Each Disbursement this Period 400.00
	City Hermitage State PA Zip Code 16148	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Lease Hermitage HQ Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type

C.	Full Name (Last, First, Middle Initial) Splitstone Enterprises Inc.	Transaction ID: D298466 Date of Disbursement 04 / 01 / 2008
	Mailing Address 2880 E State St.	Amount of Each Disbursement this Period 400.00
	City Hermitage State PA Zip Code 16148	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Lease Hermitage HQ Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type

SUBTOTAL of Disbursements This Page (optional)	1319.93
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
The Campaign Group

Transaction ID: D290876

Mailing Address 1600 Locust St.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	0	8

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Campaign Consulting

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
The Campaign Group

Transaction ID: D293271

Mailing Address 1600 Locust St.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	0		2	0	0	8

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

20000.00

Purpose of Disbursement
Media Production

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Time Warner Cable

Transaction ID: D293291

Mailing Address 3627 Zimmerman Rd.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

City Erie State PA Zip Code 16510-2642

Amount of Each Disbursement this Period

324.90

Purpose of Disbursement
Cable Internet Service

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

22324.90

TOTAL This Period (last page this line number only) ▶

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D293285
	Mailing Address PO Box 28003	Date of Disbursement 02 / 26 / 2008
	City Lehigh Valley State PA Zip Code 18002-8003	Amount of Each Disbursement this Period 8.80
	Purpose of Disbursement Telephone Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type
	State: District:	

B.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D293286
	Mailing Address PO Box 28003	Date of Disbursement 02 / 26 / 2008
	City Lehigh Valley State PA Zip Code 18002-8003	Amount of Each Disbursement this Period 205.79
	Purpose of Disbursement Telephone Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type
	State: District:	

C.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D298468
	Mailing Address PO Box 28003	Date of Disbursement 04 / 01 / 2008
	City Lehigh Valley State PA Zip Code 18002-8003	Amount of Each Disbursement this Period 12.67
	Purpose of Disbursement Telephone Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶

227.26

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 63 / 72

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
Verizon

Transaction ID: D298470

Date of Disbursement

Mailing Address PO Box 28003

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	0	8

City State Zip Code
Lehigh Valley PA 18002-8003

Amount of Each Disbursement this Period

79.56

Purpose of Disbursement
Telephone

Category/ Type

Candidate Name

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

79.56

TOTAL This Period (last page this line number only) ►

98308.81

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 64 / 72
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

Transaction ID: L575

LOAN SOURCE Full Name (Last, First, Middle Initial) Kathy Dahlkemper, PERS FUNDS	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 530 Seminole Dr	
City Erie State PA ZIP Code 16505-2428	

Original Amount of Loan 60000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 60000.00
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TERMS

Date Incurred MM DD YY 12 20 2007	Date Due 12/31/2008	Interest Rate .0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	60000.00
TOTALS This Period (last page in this line only)	60000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Big Picture Communications Inc.

Nature of Debt (Purpose):
 Debt: Website Photo Prep.

Mailing Address 1 Altoona Place

City Pittsburgh State PA ZIP Code 15228

Outstanding Balance Beginning This Period	Transaction ID: D288045	
1253.43		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	1253.43	0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Big Picture Communications Inc.

Nature of Debt (Purpose):
 Debt: Campaign Handout payable

Mailing Address 1 Altoona Place

City Pittsburgh State PA ZIP Code 15228

Outstanding Balance Beginning This Period	Transaction ID: D288047	
6520.90		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	6520.90	0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Big Picture Communications Inc.

Nature of Debt (Purpose):
 Debt: Campaign Button Production

Mailing Address 1 Altoona Place

City Pittsburgh State PA ZIP Code 15228

Outstanding Balance Beginning This Period	Transaction ID: D288049	
528.41		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	528.41	0.00

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Big Picture Communications Inc.

Nature of Debt (Purpose):
 Debt: Contribution Envelope Payable

Mailing Address 1 Altoona Place

City Pittsburgh State PA ZIP Code 15228

Outstanding Balance Beginning This Period	Transaction ID: D288051	
1661.62		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	1661.62	0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Bluestocking Consulting

Nature of Debt (Purpose):
 Debt: Campaign Consulting

Mailing Address 952 West 8th St. Suite 3

City Erie State PA ZIP Code 16502-1164

Outstanding Balance Beginning This Period	Transaction ID: D298485	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
3523.55	0.00	3523.55

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Bluestocking Consulting

Nature of Debt (Purpose):
 Debt: Campaign Consulting

Mailing Address 952 West 8th St. Suite 3

City Erie State PA ZIP Code 16502-1164

Outstanding Balance Beginning This Period	Transaction ID: D298502	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
3500.00	0.00	3500.00

1) SUBTOTALS This Period This Page (optional).....	▶	7023.55
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bluestocking Consulting			Nature of Debt (Purpose): Debt: Campaign Consultant Payable
Mailing Address 952 West 8th St. Suite 3			
City Erie	State PA	ZIP Code 16502-1164	

Outstanding Balance Beginning This Period <input type="text" value="1406.63"/>		Transaction ID: D282108	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1406.63"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bluestocking Consulting			Nature of Debt (Purpose): Debt: Campaign Consulting
Mailing Address 952 West 8th St. Suite 3			
City Erie	State PA	ZIP Code 16502-1164	

Outstanding Balance Beginning This Period <input type="text" value="3940.40"/>		Transaction ID: D282163	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3940.40"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bluestocking Consulting			Nature of Debt (Purpose): Debt: Campaign Consulting payable
Mailing Address 952 West 8th St. Suite 3			
City Erie	State PA	ZIP Code 16502-1164	

Outstanding Balance Beginning This Period <input type="text" value="1377.90"/>		Transaction ID: D282167	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1377.90"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Erie Insurance			Nature of Debt (Purpose): Debt:Insurance Policy Off-ice
Mailing Address 100 Erie Insurance Place			
City Erie	State PA	ZIP Code 16530	

Outstanding Balance Beginning This Period <input type="text" value="566.00"/>		Transaction ID: D282188	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="566.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gohrs Printing Service, Inc.			Nature of Debt (Purpose): Debt:Mailer Printing
Mailing Address 1107 Hess Ave.			
City Erie	State PA	ZIP Code 16503-1650	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: D298497	
Amount Incurred This Period <input type="text" value="2231.30"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2231.30"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NGP Software, Inc.			Nature of Debt (Purpose): Debt:Web Support
Mailing Address 1225 Eye Street, NW Suite 1225			
City Washington	State DC	ZIP Code 20005	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: D298796	
Amount Incurred This Period <input type="text" value="180.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="180.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="2411.30"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Penelec			Nature of Debt (Purpose): Debt:Utilities
Mailing Address PO Box 16001			
City Reading	State PA	ZIP Code 19612-6001	

Outstanding Balance Beginning This Period 0.00		Transaction ID: D298792	
Amount Incurred This Period 84.22	Payment This Period 0.00	Outstanding Balance at Close of This Period 84.22	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Print Management, LLC			Nature of Debt (Purpose): Debt:Direct Mailer Payable
Mailing Address 800 Vinial Street Suite B210			
City Pittsburgh	State PA	ZIP Code 15212	

Outstanding Balance Beginning This Period 2186.01		Transaction ID: D282156	
Amount Incurred This Period 0.00	Payment This Period 2186.01	Outstanding Balance at Close of This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Print Management, LLC			Nature of Debt (Purpose): Debt:Campaign Buttons
Mailing Address 800 Vinial Street Suite B210			
City Pittsburgh	State PA	ZIP Code 15212	

Outstanding Balance Beginning This Period 1189.45		Transaction ID: D282160	
Amount Incurred This Period 0.00	Payment This Period 1189.45	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	84.22
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 70 / 72
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Print Management, LLC	Nature of Debt (Purpose): Debt: Invitation Printing payable
Mailing Address 800 Vinial Street Suite B210	
City State ZIP Code Pittsburgh PA 15212	

Outstanding Balance Beginning This Period <input type="text" value="2988.51"/>	Transaction ID: D282177	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2988.51"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Print Management, LLC	Nature of Debt (Purpose): Debt: Contribution Envel. Print Payable
Mailing Address 800 Vinial Street Suite B210	
City State ZIP Code Pittsburgh PA 15212	

Outstanding Balance Beginning This Period <input type="text" value="1088.19"/>	Transaction ID: D288053	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1088.19"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Printing Concepts Inc.	Nature of Debt (Purpose): Debt: Printing of Invitations
Mailing Address 4982 Pacific Ave.	
City State ZIP Code Erie PA 16506	

Outstanding Balance Beginning This Period <input type="text" value="1480.82"/>	Transaction ID: D282149	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1480.82"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Russell J Straub			Nature of Debt (Purpose): Debt:Ad Production Assistant
Mailing Address 918 West 30th St.			
City Erie	State PA	ZIP Code 16508	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: D298505	
Amount Incurred This Period <input type="text" value="200.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="200.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Signs Now			Nature of Debt (Purpose): Debt: Sign for office payable
Mailing Address 2232 West 23rd St.			
City Erie	State PA	ZIP Code 16506	

Outstanding Balance Beginning This Period <input type="text" value="519.93"/>		Transaction ID: D282084	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="519.93"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Campaign Group			Nature of Debt (Purpose): Debt:Campaign Consulting
Mailing Address 1600 Locust St.			
City Philadelphia	State PA	ZIP Code 19103	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: D298794	
Amount Incurred This Period <input type="text" value="1000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1000.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1200.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 72 / 72
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tungsten Creative Group	Nature of Debt (Purpose): Debt: Ad Design
Mailing Address 337 West 10th St.	
City Erie State PA ZIP Code 16502	

Outstanding Balance Beginning This Period 0.00	Transaction ID: D298490	
Amount Incurred This Period 630.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 630.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tungsten Creative Group	Nature of Debt (Purpose): Debt:Ad Design
Mailing Address 337 West 10th St.	
City Erie State PA ZIP Code 16502	

Outstanding Balance Beginning This Period 0.00	Transaction ID: D298510	
Amount Incurred This Period 210.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 210.00

1) SUBTOTALS This Period This Page (optional).....	840.00
2) TOTALS This Period (last page this line number only).....	11559.07
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	60000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	71559.07