

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 PA 03
3. **IS THIS REPORT** **NEW (N)** **OR** **AMENDED (A)**

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 [] [] [] in the State of []
(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 2011 through 03 31 2011

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 Mr. Aron Dahlkemper

Signature of Treasurer Electronically Filed by Mr. Aron Dahlkemper Date 04 15 2011

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

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Kathy Dahlkemper for Congress

Report Covering the Period: From: To:

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	9408.35	73048.81
(b) Total Offsets to Operating Expenditures (from Line 14).....	4933.83	5616.17
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	4474.52	67432.64
8. Cash on Hand at Close of Reporting Period (from Line 27).....	10313.89	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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	1	1

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

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	0.00	0.00
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	445.92
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	4933.83	5616.17
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)..... ▶	4933.83	6062.09

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	9408.35	73048.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	10000.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	10000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(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)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	500.00	2500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	9908.35	85548.81

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	15288.41
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	4933.83
25. SUBTOTAL (add Line 23 and Line 24).....	20222.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	9908.35
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10313.89

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 15
(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)
PNC Bank Business Card

Mailing Address PO Box 856177

City State Zip Code
Louisville KY 40285

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6346.88

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 0 2 / 2 0 1 1

Transaction ID: C19037599

Amount of Each Receipt this Period
2574.85

[MEMO ITEM]
* Use of credit on credit card account

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	0.00

A. Form/Schedule : **SA11AI**
Transaction ID : **C19037599**

This entry is to show the reduced amount of debt owed to the committee due to the 'use' of the credit on the credit card account (see also Schedule D below). This credit was shown on the committee's previous report. Entries relating to these transactoins are shown as memo entries on Schedule B below.

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

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

FOR LINE NUMBER: PAGE 7 / 15
(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)
Devine Mulvey, Inc.
 Mailing Address 2141 Wisconsin Avenue, NW
 City State Zip Code
 Washington DC 20007
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
4897.38
 Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 1 1
Transaction ID: C19043533
 Amount of Each Receipt this Period
4897.38
 Media refund

B. Full Name (Last, First, Middle Initial)
PNC Bank Business Card
 Mailing Address PO Box 856177
 City State Zip Code
 Louisville KY 40285
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
6346.88
 Date of Receipt
M M / D D / Y Y Y Y
0 2 / 0 2 / 2 0 1 1
Transaction ID: C19037600
 Amount of Each Receipt this Period
28.51
 Refund of credit on credit card account

SUBTOTAL of Receipts This Page (optional)	4925.89
TOTAL This Period (last page this line number only)	4925.89

**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) AT&T Mobility	Transaction ID: D448134 Date of Disbursement 01 / 03 / 2011
	Mailing Address PO Box 6438	Amount of Each Disbursement this Period 198.11
	City Carol Stream State IL Zip Code 60197-6438	
	Purpose of Disbursement Telephone Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Simone Baer	Transaction ID: D446355 Date of Disbursement 01 / 19 / 2011
	Mailing Address 5747 Holden St Apt 3	Amount of Each Disbursement this Period 124.00
	City Pittsburgh State PA Zip Code 15232-1928	
	Purpose of Disbursement Reimbursement (unitemized) Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Butler County Business Matters	Transaction ID: D446359 Date of Disbursement 01 / 19 / 2011
	Mailing Address PO Box 271	Amount of Each Disbursement this Period 274.05
	City Butler State PA Zip Code 16003	
	Purpose of Disbursement Print Ad Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	596.16
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) Cava</p> <p>Mailing Address 527 8th St SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Catering-Use of credit card credit</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D448127 Date of Disbursement 01 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 721.33</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Leonard Painting</p> <p>Mailing Address 20 Carey Farms Road</p> <p>City Erie State PA Zip Code 16511</p> <p>Purpose of Disbursement Office painting</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D445513 Date of Disbursement 01 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 800.00</p>
<p>C. Full Name (Last, First, Middle Initial) Ms. Tina Mengine</p> <p>Mailing Address 1100 1st St SE</p> <p>City Washington State DC Zip Code 20003-4700</p> <p>Purpose of Disbursement Void check from 11/10/10</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D451099 Date of Disbursement 01 / 19 / 2011</p> <p>Amount of Each Disbursement this Period -146.30</p>

SUBTOTAL of Disbursements This Page (optional) ▶

653.70

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 10 / 15

<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) Ms. Tina Mengine Mailing Address 1100 1st St SE City Washington State DC Zip Code 20003-4700 Purpose of Disbursement Re-issue of void check Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D446446 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 1 1 Amount of Each Disbursement this Period 146.30
B.	Full Name (Last, First, Middle Initial) Ms. Tina Mengine Mailing Address 1100 1st St SE City Washington State DC Zip Code 20003-4700 Purpose of Disbursement Reimbursement (unitemized) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D446496 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 1 1 Amount of Each Disbursement this Period 101.08
C.	Full Name (Last, First, Middle Initial) National Democratic Club Mailing Address 30 Ivy Street, SE City Washington State DC Zip Code 20003-4071 Purpose of Disbursement Catering - final payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D446357 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 1 1 Amount of Each Disbursement this Period 14.50

SUBTOTAL of Disbursements This Page (optional)	261.88
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) National Democratic Club Mailing Address 30 Ivy Street, SE City Washington State DC Zip Code 20003-4071 Purpose of Disbursement Catering-Use of credit card credit Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D448129 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 2 / 2 0 1 1 Amount of Each Disbursement this Period 434.50 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) NGP/VAN, Inc. Mailing Address 1225 Eye Street, NW Suite 1225 City Washington State DC Zip Code 20005 Purpose of Disbursement Software Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D451096 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 8 / 2 0 1 1 Amount of Each Disbursement this Period 1500.00
C.	Full Name (Last, First, Middle Initial) PCMS Mailing Address 1050 17th Street, NW Suite 590 City Washington State DC Zip Code 20036 Purpose of Disbursement Accounting services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D448302 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 1 1 Amount of Each Disbursement this Period 436.44

SUBTOTAL of Disbursements This Page (optional) ▶	1936.44
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)
Pennsylvania Democratic Party

Mailing Address 300 North Second Street
8th Floor

City Harrisburg State PA Zip Code 17101

Purpose of Disbursement
Payroll expense

Candidate Name

Category/ Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General Other (specify) ▼

State: District:

Transaction ID: D451097
Date of Disbursement
0 1 / 2 8 / 2 0 1 1

Amount of Each Disbursement this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Safeway

Mailing Address 415 14th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Catering-Use of credit card credit

Candidate Name

Category/ Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General Other (specify) ▼

State: District:

Transaction ID: D448130
Date of Disbursement
0 1 / 0 2 / 2 0 1 1

Amount of Each Disbursement this Period
238.47

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
SunTrust Merchant Services

Mailing Address P.O. Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement
Credit card processing fees

Candidate Name

Category/ Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General Other (specify) ▼

State: District:

Transaction ID: D448132
Date of Disbursement
0 1 / 0 3 / 2 0 1 1

Amount of Each Disbursement this Period
44.95

SUBTOTAL of Disbursements This Page (optional)	2544.95
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) SunTrust Merchant Services Mailing Address P.O. Box 6600 City Hagerstown State MD Zip Code 21741 Purpose of Disbursement Credit card processing fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D448133 Date of Disbursement 01 / 03 / 2011 Amount of Each Disbursement this Period 5.14 Category/Type
B.	Full Name (Last, First, Middle Initial) Whole Foods Mailing Address 1440 P Street NW City Washington State DC Zip Code 20005 Purpose of Disbursement Catering-Use of credit card credit Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D448131 Date of Disbursement 01 / 02 / 2011 Amount of Each Disbursement this Period 846.69 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Dan Williams Mailing Address 209 Pennsylvania Avenue, SE City Washington State DC Zip Code 20003 Purpose of Disbursement Final payment on lease Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D449078 Date of Disbursement 02 / 22 / 2011 Amount of Each Disbursement this Period 3300.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	3305.14
TOTAL This Period (last page this line number only) ▶	9298.27

**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 14 / 15

<input 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kathy Dahlkemper for Congress

A.

Full Name (Last, First, Middle Initial)
Committee to Elect Horan-Kunco

Mailing Address 457 West 31st Street

City Erie State PA Zip Code 16508

Purpose of Disbursement
Donation (non-federal)

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D450162

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	1	1

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Friends of Bob Merski

Mailing Address 2624 Greengarden Blvd.

City Erie State PA Zip Code 16508

Purpose of Disbursement
Non-federal contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D451095

Date of Disbursement

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

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) ►

500.00

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

500.00

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

(Use separate schedule(s) for each numbered line)	PAGE 15 / 15	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Kathy Dahlkemper for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor PNC Bank Business Card	Nature of Debt (Purpose): Credit on credit card account
Mailing Address PO Box 856177	
City State ZIP Code Louisville KY 40285	

Outstanding Balance Beginning This Period	Transaction ID: C19036275	
2603.36		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	2603.36	0.00

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