AO 10 Rev. 1/2006

FINANCIAL DISCLOSURE REPORT FOR CALENDAR YEAR 2005



AMEROSE, DONETTA W 4. Title (Article III Judges indicate series or senior status; undestrate) judges indicate series or senior status; suggestrate judges indicate fall- or part-duals) Chief U.S. District Judge 7. Chambers or Office Address 6.20 U. S. Post Office & Court 7. Chambers or Office & Court 7. Of the basis of the information contained in this Report and any modifications pertaining thereto, it is, in my opinion, in compliance with applicable laws and regulations. Reviewing Officer. IMPORTANT NOTES: The instructions accompanying this form must be followed. Complete all parts, checking the NONE box for each part where you have no reportable information. Sign on last page. POSITIONS. (Reporting individual only; see pp. 9-13 of instructions.) NONE (No reportable positions.) POSITION NAME OF ORGANIZATION/ENTITY YMCA - NEW KENSINGTON, PENNSYLVANIA BOARD OF DIRECTORS - MAGEE WOMEN'S HOSPITAL MEMBER BOARD OF DIRECTORS - MAGEE WOMEN'S HOSPITAL BOARD OF DIRECTORS - MAGEE WOMEN'S HOSPITAL BOARD OF DIRECTORS - MAGEE WOMEN'S HEALTH AGREEMENTS. (Reporting individual only; see pp. 14-16 of instructions.) NONE (No reportable agreements.) DATE PARTIES AND TERMS Commonwealth of Pennsylvania Blue Cross/Blue Shield Retired Employee's Health Care Benefit Plair	1. Person Reporting (last name, first, middle initial)	2. Court or Organization	3. Date of Report			
Chief U.S. District Judge	AMBROSE, DONETTA W	US DIST. CT. WEST. DIST. PA	04/27/2006			
### and it is in any opinion, in compliance with applicable laws and regulations. #### positions accompanying this form must be followed. Complete all parts, checking the NONE box for each part where you have no reportable information. Sign on last page. #### POSITIONS. (Reporting individual only; see pp. 9-13 of instructions.) ### NONE (No reportable positions.) ### POSITION NAME OF ORGANIZATION/ENTITY ### TRUSTEE ### POSITION NAME OF ORGANIZATION/ENTITY ### POSITION NAME OF ORGA	magistrate judges indicate full- or part-time)	Nomination, Date Initial X Annual Final	01/01/2005 to			
POSITIONS. (Reporting individual only; see pp. 9-13 of instructions.) NONE (No reportable positions.) POSITION NAME OF ORGANIZATION/ENTITY TRUSTEE YMCA - NEW KENSINGTON, PENNSYLVANIA BOARD OF DIRECTORS - MAGEE WOMEN'S HOSPITAL MEMBER BOARD OF DIRECTORS - MAGEE WOMEN'S HEALTH MEMBER BOARD OF DIRECTORS - MAGEE WOMEN'S HEALTH MEMBER BOARD OF DIRECTORS - MAGEE WOMEN'S HEALTH PARTIES AND TERMS Commonwealth of Pennsylvania Blue Cross/Blue Shield Retired Employee's Health Care Benefit Plan	620 U. S. Post Office & Court 700 Grant Street Pittsburgh, PA 15219-1906	modifications pertaining thereto, it is, in my opinion, in comwith applicable laws and regulations. Reviewing Officer	plianceDate			
POSITION NAME OF ORGANIZATION/ENTITY TRUSTEE YMCA - NEW KENSINGTON, PENNSYLVANIA MEMBER BOARD OF DIRECTORS - MAGEE WOMEN'S HOSPITAL BOARD OF DIRECTORS - MAGEE WOMEN'S HEALTH BOARD OF DIRECTORS - MAGEE WOMEN'S HEALTH LAGREEMENTS. (Reporting individual only; see pp. 14-16 of instructions.) NONE (No reportable agreements.) DATE PARTIES AND TERMS Commonwealth of Pennsylvania Blue Cross/Blue Shield Retired Employee's Health Care Benefit Plant	. POSITIONS. (Reporting individual only; see pp. 9-13 of it					
TRUSTEE YMCA - NEW KENSINGTON, PENNSYLVANIA BOARD OF DIRECTORS - MAGEE WOMEN'S HOSPITAL BOARD OF DIRECTORS - MAGEE WOMEN'S HEALTH BOARD OF DIRECTORS - MAGEE WOMEN'S HEALTH LAGREEMENTS. (Reporting individual only; see pp. 14-16 of instructions.) NONE (No reportable agreements.) DATE PARTIES AND TERMS 2005 Commonwealth of Pennsylvania Blue Cross/Blue Shield Retired Employee's Health Care Benefit Plarr						
MEMBER BOARD OF DIRECTORS - MAGEE WOMEN'S HOSPITAL BOARD OF DIRECTORS - MAGEE WOMEN'S HEALTH BOARD OF DIRECT	<u>POSITION</u>	NAME OF ORGA	NIZATION/ENTITY			
MEMBER BOARD OF DIRECTORS - MAGEE WOMEN'S HEALTH AGREEMENTS. (Reporting individual only; see pp. 14-16 of instructions.) NONE (No reportable agreements.) DATE PARTIES AND TERMS Commonwealth of Pennsylvania Blue Cross/Blue Shield Retired Employee's Health Care Benefit Plant	. TRUSTEE	YMCA - NEW KENSINGTON, PENNSYL	VANIA			
I. AGREEMENTS. (Reporting individual only; see pp. 14-16 of instructions.) NONE (No reportable agreements.) DATE PARTIES AND TERMS Commonwealth of Pennsylvania Blue Cross/Blue Shield Retired Employee's Health Care Benefit Plant	. MEMBER	BOARD OF DIRECTORS - MAGEE WOM	▲			
I. AGREEMENTS. (Reporting individual only; see pp. 14-16 of instructions.) NONE (No reportable agreements.) DATE PARTIES AND TERMS 2005 Commonwealth of Pennsylvania Blue Cross/Blue Shield Retired Employee's Health Care Benefit Plar	MEMBER	BOARD OF DIRECTORS - MAGEE WON	CORPORATIONEN'S HEALTH			
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$oldsymbol{\cup}$. 2005 Commonwealth	of Pennsylvania Blue Cross/Blue Shield Retired Employee's Ho	ealth Care Benefit Plair			
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Page 2 of 7

Name of Person Reporting

AMBROSE, DONETTA W

Date of Report

04/27/2006

III. NON-INVESTMENT IN	NCOME. (Reporting in	dividual and spouse; see pp. 17-24 of instructions.)	
A. Filer's Non-Investment Income	•		
NONE (No reportable non-i	nvestment income.)		
DATE		SOURCE AND TYPE	INCOME (yours, not spouse's)
1. 2005	Pennsylvania State Em	ployees Retirement System	\$21,251
2.			
3.			
4.			
5.			
B. Spouse's Non-Investment Inco. (Dollar amount not required except for honoraria.		ring any portion of the reporting year, complete this	section.
NONE (No reportable non-i			
DATE		SOURCE AND TYPE	
1. 2005	Law Practice		
2. 2005	AIGA		
3.			
4.			
5.			
IV. REIMBURSEMENTS -	transportation, lodging, food,	, entertainment	
(Includes those to spouse and dependent children.			
NONE (No reportable reim)	bursements.)		
SOURCE		<u>DESCRIP</u>	<u>TION</u>
1. New York Intellectural Properties & Law	Association	3/2005 - Dinner & New York, New York	
2.			
3.			
4.			

Name of Person Reporting AMBROSE, DONETTA W Date of Report

Page 3 of 7

04/27/2006

V. GIFTS. (Includes those to spouse and dependent children. See pp. 28-31 of instructions.)						
X NONE (No reportable gifts.)						
SOURCE	DESCRIPTION	<u>VALUE</u>				
1.						
2.						
3.						
4.	`					
5.						
VI. LIABILITIES. (Includes those NONE (No reportable liabil	e of spouse and dependent children. See pp. 32-34 of instructions.)					
CREDITOR	<u>DESCRIPTION</u>	VALUE CODE				
1. Morgan Stanley	Margin Account	L				
2. PNC	Line of Credit	ı				
3. First National Bank	Business Loan	М				
4. First Commonwealth	Business Loan	М				

Page 4 of 7

Name of Person Reporting

AMBROSE, DONETTA W

Date of Report

04/27/2006

VII. INVESTMENTS and TRUSTS - income, value, transactions (includes those of the spouse and dependent children. See pp. 34-57 of filing instructions)

A.		В.	(2.			D.		
Description of Assets (including trust assets)	Income during reporting period		Gross value at end of reporting period		D. Transactions during reporting period				
	(1)	(2)	(1)	(2)	(1)		If not e	xempt from di	sclosure
Place "(X)" after each asset exempt from prior disclosure	Amount Code 1 (A-H)	Type (e.g. div., rent, or int.)	Value Code 2 (J-P)	Value Method Code 3 (Q-W)	Type (e.g. buy, sell, merger,	(2) Date Month - Day	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)
1. Alleg. Co. US Govt. EFCU	A	Interest	L	Т					
2. Residential Rental New Kensington, Westmoreland	D	Rent	K	R			<u> </u>	-	
3. Commercial Rental New Kensington, Westmoreland	D	Rent	М	R					
4. Morgan Stanley Active Asset Money Trust	A	Dividend							
5. Interdigital Communictions Options		None			sell	6/20			expired
6. Interdigital Communications Options		None			sell	9/19			expired
7. Interdigital Communications Options		None			sell	12/19			expired
8. Interdigital Communications Options		None			sell	8/22			expired
9. Interdigital Communications Options		None			sell	8/22			expired
10. Interdigital Communications Options		None			sell	11/21			expired
11. Interdigital Communications Options		None			sell	3/21			expired
12. Interdigital Communications Corp		None			sell	8/22	L		
13. Interdigital Communications Corp		None			sell	12/21	J		
14. Interdigital Communictions Corp		None			sell	1/13	К		
15. Interdigital Communications Corp		None			sell	1/14	J		
6. Interdigital Communications Corp.		None			sell	3/15	J		
17. Interdigital Communications Corp.		None			sell	8/2	L		

1. Income Gain Codes: (See Columns B1 and D4)

2. Value Codes (See Columns C1 and D3)

3. Value Method Codes (See Column C2) A =\$1,000 or less

U =Book Value

F =\$50,001 - \$100,000 J =\$15,000 or less

N =\$250,001 - \$500,000 P3 =\$25,000,001 - \$50,000,000 Q =Appraisal B =\$1,001 - \$2,500 G =\$100,001 - \$1,000,000 K =\$15,001 - \$50,000

R=\$13,001 - \$50,000 O=\$500,001 - \$1,000,000 R=Cost (Real Estate Only) V=Other

L =\$50,00 P1 =\$1,000 P4 =More S = Assessi

C =\$2,501 - \$5,000 H1 =\$1,000,001 - \$5,000,000 L =\$50,001 - \$100,000 P1 =\$1,000,001 - \$5,000,000

P1 =\$1,000,001 - \$5,000,000 P4 =More than \$50,000,000 S =Assessment W =Estimated D =\$5,001 - \$15,000 E =\$15,001 - \$50,000 H2 =More than \$5,000,000

M=\$100,001 - \$250,000 P2=\$5,000,001 - \$25,000,000

T =Cash Market

Page 5 of 7

Name of Person Reporting

AMBROSE, DONETTA W

Date of Report

04/27/2006

VII. INVESTMENTS and TRUSTS – income, value, transactions (includes those of the spouse and dependent children. See pp. 34-57 of filing instructions)

NONE (No reportable income, assets, or transactions.) C. B. D. Description of Assets Income during Gross value at end of Transactions during reporting period (including trust assets) reporting period reporting period (1) (2) (1) (2) (1) If not exempt from disclosure Place "(X)" after each asset Amount Type (e.g. Value Value Type (e.g. (2) (3) exempt from prior disclosure Code I div., rent, Code 2 Method buy, sell, Date Gain Identity of Value (A-H) or int.) (J-P) Code 3 merger, Month -Code 2 Code 1 buyer/seller (Q-W) redemption) (J-P) (A-H) Day (if private transaction) 18. Interdigital Communications 2/2 expired None buy 19. Interdigital Communications None buy 7/28 J expired 20. Interdigital Communications None buy 7/28 J expired 21. Interdigital Communications 8/19 None buy expired 22. Interdigital Communications 9/12 None buy expired 23. Interdigital Communications None buy 24. Interdigital Communications None buy 11/01 expired 25. Interdigital Communications Corp None 5/17 buy Interdigital Communications Corp. None 5/18 buy Interdigital Communications Corp None buy 5/25 Interdigital Communications Corp. None 5/26 buy Interdigital Communications Corp. 6/3 None buy Interdigital Communications Corp. 8/4 K None buy Interdigital Communications Corp. None buy Interdigital Communications Corp. None buy L 33. 34.

1. Income Gain Codes:
(See Columns B1 and D4)

^{2.} Value Codes (See Columns Cl and D3)

E =\$15.001 - \$50.000

^{3.} Value Method Codes (See Column C2)

A =\$1,000 or less

F =\$50,001 - \$100,000 J =\$15,000 or less N =\$250,001 - \$500,000

N = \$250,001 - \$500,000 P3 = \$25,000,001 - \$50,000,000 Q = Appraisal U = Book Value

G = \$100,001 - \$1,000,000 K = \$15,001 - \$50,000 O = \$500,001 - \$1,000,000

R =Cost (Real Estate Only)
V =Other

C=\$2,501 - \$5,000 H1=\$1,000,001 - \$5,000,000 L=\$50,001 - \$100,000 P1=\$1,000,001 - \$5,000,000

P1 =\$1,000,001 - \$5,000,000 P4 =More than \$50,000,000 S =Assessment W =Estimated

H2 =More than \$5,000,000 M =\$100,001 - \$250,000 P2 =\$5,000,001 - \$25,000,000

T = Cash Market

FINANCIAL	DISCLOSURE	REPORT
Page 6 of 7		

Name of Person Reporting	Date of Report
AMBROSE, DONETTA W	04/27/2006

VIII. ADDITIONAL INFORMATION OR EXPLANATIONS. (Indicate part of Report.)

Page 7 of 7

Name of Person Reporting

AMBROSE, DONETTA W

Date of Report

04/27/2006

IX. CERTIFICATION.

I certify that all information given above (including information pertaining to my spouse and minor or dependent children, if any) is accurate, true, and complete to the best of my knowledge and belief, and that any information not reported was withheld because it met applicable statutory provisions permitting non-disclosure.

I further certify that earned income from outside employment and honoraria and the acceptance of gifts which have been reported are in compliance with the provisions of 5 U.S.C. § 501 et. seq., 5 U.S.C. § 7353, and Judicial Conference regulations.

Signature______Da

Date 5-8-06

NOTE: ANY INDIVIDUAL WHO KNOWINGLY AND WILFULLY FALSIFIES OR FAILS TO FILE THIS REPORT MAY BE SUBJECT TO CIVIL AND CRIMINAL SANCTIONS (5 U.S.C. app. § 104)

FILING INSTRUCTIONS

Mail signed original and 3 additional copies to:

Committee on Financial Disclosure Administrative Office of the United States Courts Suite 2-301 One Columbus Circle, N.E. Washington, D.C. 20544