

01-907-CD
COMMONWEALTH OF PENNSYLVANIA -vs- JENNIFER E. KEAGLE
DEPARTMENT OF TRANSPORTATION

Date: 11/04/2004

Clearfield County Court of Common Pleas

User: BANDERSON

Time: 10:35 AM

ROA Report






Page 1 of 1

Case: 2001-00907-CD

Current Judge: John K. Reilly Jr.

Commonwealth of Pennsylvania vs. Jennifer E. Keagle

Civil Other

Date		Judge
06/12/2001	Filing: Petition for Appeal from Suspension of Operating Privileges, Paid by: Keagle, Jennifer (defendant) Receipt number: 1826773 Dated: 06/12/2001 Amount: \$80.00 (Cash) Two CC without Order to Defendant, One CC to C/A	No Judge 
08/03/2001	Order, AND NOW, this 2nd day of August, 2001, supersedes of the suspension of the operating privileges of Petitioner is hereby granted. Written notice no later than 60 days prior to the hearing shall be given to the Director of the Bureau of Driver Licensing, Dept. of Transportation, of the time and place of the hearing. The Court Administrator's Office is directed to schedule the above hearing on the next regularly scheduled date for License Suspension Hearings. BY THE COURT: /s/John K. Reilly, Jr., P.J. One CC Defendant, One CC Commonwealth of PA	No Judge 
12/23/2003	ORDER, NOW, this 19th day of December, 2003, this being the day and date set for Hearing in the above-captioned appeal from license suspension, it is the Order of this Court that said appeal be CONTINUED until the next scheduled list of license suspension appeals. by the Court, s/JKR,JR.,P.J. 2 cc Atty Kuhar, 1 cc Def.	John K. Reilly Jr. 
10/15/2004	Order, AND NOW, this 15th day of October, 2004, it is the ORDER of the Court that hearing on Plaintiff's License suspension appeal in the above matter has been scheduled for Wednesday, November 10, 2004 at 9:30 a.m. before the Honorable John K. Reilly, Jr., Senior Judge, in the Clfd. Co. Courthouse. Report to the Court Administrator's Office. BY THE COURT: /s/ Fredric J. Ammerman, President Judge	Fredric Joseph Ammerman 
11/02/2004	Order returned unclaimed, mailed by certified mail.	Fredric Joseph Ammerman 

IN THE COURT OF COMMON PLEAS OF JEFFERSON COUNTY, PENNSYLVANIA
CIVIL DIVISION

COMMONWEALTH OF PENNSYLVANIA *
DEPARTMENT OF TRANSPORTATION *

-VS-

JENNIFER E. KEAGLE

No. 2001 - 907 - CD

Type of Action:

Appeal

Type of Pleading:

Petition for Appeal From
Suspension of Operating
Privileges

Filed on Behalf of:

Defendant

Pro SE

371-9766

FILED

JUN 12 2001

William A. Shaw
Prothonotary

IN THE COURT OF COMMON PLEAS OF JEFFERSON COUNTY, PENNSYLVANIA
CIVIL DIVISION

COMMONWEALTH OF PENNSYLVANIA *

DEPARTMENT OF TRANSPORTATION *

-vs-

JENNIFER E. KEAGLE *

*

*

*

No. 01-907-CO

PETITION FOR APPEAL FROM
SUSPENSION OF OPERATING PRIVILEGES

TO THE HONORABLE JUDGES OF THE SAID COURT:

NOW COMES, JENNIFER E. KEAGLE, upon a Petition for Appeal from Suspension of Operating Privileges, whereof the following is a statement:

1. Petitioner is JENNIFER E. KEAGLE whose address is 7 East Second Street, DuBois, Pennsylvania 15801.

2. By Official Notice from the Director of the Bureau of Driver Licensing, Department of Transportation, Commonwealth of Pennsylvania, a true and correct copy of which is attached hereto as Exhibit "A" and incorporated herein by reference as though set forth in full, Petitioner was informed that her operating privileges would be suspended for a period of three (3) months, effective June 22, 2001, as a result of an alleged violation for failure to produce proof of financial responsibility on April 6, 2001.

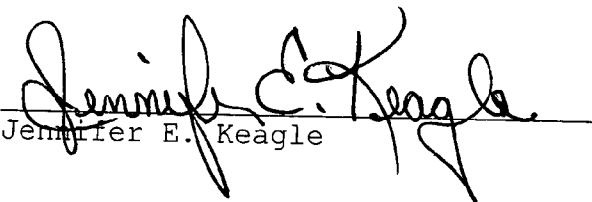
3. Petitioner believes and therefore avers that the suspension of her operating privileges by the Department of Transportation, Commonwealth of Pennsylvania, is improper and without legal basis for the following reason:

At the time of the incident, Your Petitioner was properly insured by Safe Auto Insurance Company. Attached

hereto and marked Exhibit "B" is a copy of said Certificate of Insurance.

WHEREFORE, Petitioner prays that this Court enter an Order fixing the time and place of a hearing to determine whether the operating privileges of Petitioner should be suspended or the suspension should be set aside as improper and invalid.

Respectfully submitted,


Jennifer E. Keagle

Date: 6-12-01

VERIFICATION

I, Jennifer E. Keagle, verify
that the statements made herein are true and correct. I
understand that false statements herein are made subject to
penalties of 18 Pa.C.S. §4904, relating to unsworn falsification
to authorities.

Date:

6-12-01

Jennifer E. Keagle

IN THE COURT OF COMMON PLEAS OF JEFFERSON COUNTY, PENNSYLVANIA
CIVIL DIVISION

COMMONWEALTH OF PENNSYLVANIA *
DEPARTMENT OF TRANSPORTATION *

-vs-

JENNIFER E. KEAGLE

No. 01-907-CO

ORDER

AND NOW, this 2nd day of August, 2001, upon consideration of the within Petition for Appeal from Suspension of Operating Privileges and on motion by Petitioner named above, supersedes of the suspension of the operating privileges of Petitioner, as set forth in the Official Notice of the Director of the Bureau of Driver Licensing, Department of Transportation, mail date May 18, 2001, is hereby granted.

Written notice no later than sixty (60) days prior to the hearing shall be given to the Director of the Bureau of Driver Licensing, Department of Transportation, of the time and place of the hearing.

The Court Administrator's Office is directed to schedule the above hearing on the next regularly scheduled date for License Suspension Hearings.

BY THE COURT:

Judge

FILED

AUG 03 2001
11:44 AM
William A. Shaw
Prothonotary
ICC Com. Pa

IN THE COURT OF COMMON PLEAS OF JEFFERSON COUNTY, PENNSYLVANIA
CIVIL DIVISION

COMMONWEALTH OF PENNSYLVANIA *

DEPARTMENT OF TRANSPORTATION *

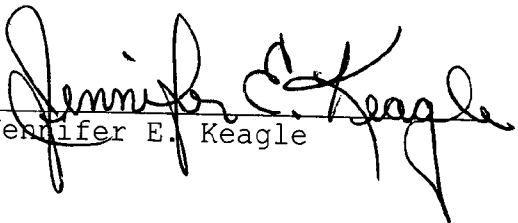
-vs-

No.

JENNIFER E. KEAGLE *

CERTIFICATE OF SERVICE

AND NOW, this 4th day of June, 2001, I, RICHARD
H. MILGRUB, hereby certify that I have this date, served a copy
of the foregoing document, by causing same to be mailed by
Certified Mail, Return Receipt Requested, to the Pennsylvania
Department of Transportation, Office of Chief Counsel, Third
Floor, Riverfront Office Center, Harrisburg, PA 17104-2516.


Jennifer E. Keagle

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF TRANSPORTATION
Bureau of Driver Licensing
Harrisburg, PA 17123
MAY 18, 2001

JENNIFER E KEAGLE
63 MAIN STREET
FALLS CREEK PA 15840

011319283961110 001
05/11/2001
20361599
09/29/1958

Dear Motorist:

Your driving privilege is scheduled to be suspended on 06/22/2001, because you failed to produce proof of financial responsibility on 04/06/2001, the date of your traffic offense.

1. Your driving privilege will be suspended for three months effective 06/22/2001 at 12:01 A.M. as authorized by Section 1786(d) of the Vehicle Code.

Please see the enclosed application for restoration fee information.

2. You will be required to return any current driver's license or learner's permit and/or temporary drivers license (camera card) in your possession.

3. You will be required to provide the Department with proof that all motor vehicles registered in your name are covered by a motor vehicle liability insurance policy or by a program of self-insurance approved by the Department.

You will not be permitted to operate a motor vehicle until you have been advised in writing by this Bureau that your privilege has been reinstated.

If you do not comply with this notice, this Bureau will refer this matter to the Pennsylvania State Police for prosecution under Section 1571 (A) of the Vehicle Code.

EFFECTIVE DATE OF SUSPENSION: 06/22/2001 12:01 A.M.

"A"

In order to comply with this sanction you are required to return any current driver's license, learner's permit and/or temporary driver's license (camera card) in your possession no later than the effective date listed. If you cannot comply with the requirements stated above, you are required to submit a DL16LC Form or a sworn affidavit stating that you are aware of the sanction against your driving privilege. Failure to comply with this notice shall result in this Bureau referring this matter to the Pennsylvania State Police for prosecution under SECTION 1571(a)(4) of the Vehicle Code.

Although the law mandates that your driving privilege is under suspension even if you do not surrender your license, Credit will not begin until all current driver's license product(s), the DL16LC Form, or a letter acknowledging your sanction is received in this Bureau.

WHEN THE DEPARTMENT RECEIVES YOUR LICENSE OR ACKNOWLEDGEMENT, WE WILL SEND YOU A RECEIPT. IF YOU DO NOT RECEIVE THIS RECEIPT WITHIN 15 DAYS CONTACT THE DEPARTMENT IMMEDIATELY. OTHERWISE, YOU WILL NOT BE GIVEN CREDIT TOWARD SERVING THIS SANCTION.

APPEAL

You have the right to appeal this action to the Court of Common Pleas (Civil Division) within 30 days of the mail date, MAY 18, 2001, of this letter. If you file an appeal in the County Court, the Court will give you a time-stamped certified copy of the appeal. In order for your appeal to be valid, you must send this time-stamped certified copy of the appeal by certified mail to:

Pennsylvania Department of Transportation
Office of Chief Counsel
Third Floor, Riverfront Office Center
Harrisburg, PA 17104-2516

011319283961110

Sincerely,

Rebecca L. Bickley

Rebecca L. Bickley, Director
Bureau of Driver Licensing

SEND FEE/LICENSE/DL-16LC/TO:
Department of Transportation
Bureau of Driver Licensing
P.O. Box 68693
Harrisburg, PA 17106-8693

INFORMATION (7:00 AM TO 9:00 PM)
IN STATE 1-800-932-4600
OUT-OF-STATE 717-391-6190
TDD IN STATE 1-800-228-0676
TDD OUT-OF-STATE 717-391-6191

BY: SAFE AUTO INSURANCE CO.

31-231-8000

NOV 27 1999 15:03

PA00018886A-00



3883 East Broad Street
Columbus, OH 43213-1129
1-614/231-0200
1-800/SAFE-AUTO
1-800/723-3288
OPEN 24 HOURS, 7 DAYS

Pennsylvania Certificate of Insurance

Policy No. : PA00018886A-00

Policy Period. From 11/27/2000 14:03:00

To 05/27/2001 00:01:00 *

NAMED INSURED.

Standard time at the address of the named insured as stated herein.

JENNIFER E KEAGLE
PO BOX 234
FALLS CREEK PA 15840

VEH #	YEAR	MAKE MODEL	BODY TYPE	SERIAL NUMBER	SYM	TERR	DRIVER	PTS
1	1990	DODGE DAYTONA ES	2H	1B3XG4439LG456758	13	19	F S 42	0
2	1987	HONDA CIVIC 1500 CRX	2H	JHMEC1426HS046476	12	19	M S 19	0

COVERAGE

BODILY INJURY

LIMITS OF LIABILITY

\$ 15,000 EACH PERSON/
\$ 30,000 EACH ACCIDENT
\$ 10,000 EACH ACCIDENT

PROPERTY DAMAGE

FIRST PARTY BENEFITS

MEDICAL EXPENSE

UNINSURED MOTORIST

BODILY INJURY UNSTACKED

UNDERINSURED MOTORIST

BODILY INJURY UNSTACKED

\$ 5,000 EACH PERSON
\$ 15,000 EACH PERSON/
\$ 30,000 EACH ACCIDENT
\$ 15,000 EACH PERSON/
\$ 30,000 EACH ACCIDENT

ADDITIONAL DRIVER: ERIC D BENNETT

OWNER:

ERIC D BENNETT 7 E SECOND ST FALLS CREEK PA 15840

Underwriting Company: Safe Auto Insurance Company 3883 East
Broad Street Columbus, Ohio 43213
(614) 231-0200

Signature of Authorized
Company Representative

This policy may be cancelled back to the inception date and time for false or misleading information on the application. If the initial premium
payment is not honored upon presentation to the financial institution, the policy will be deemed void from its inception.

This policy is only in force if all payments have been paid in full and on time.



3883 East Broad Street
Columbus, OH 43213-1129
1-614/231-0200
1-800/SAFE-AUTO
1-800/723-3288
OPEN 24 HOURS, 7 DAYS

Pennsylvania Certificate of Insurance

Policy No. PA00018886A-00

Policy Period From 11/27/2000 14:03:00

To 05/27/2001 00:01:00

NAMED INSURED.

Standard time at the address of the named insured as stated herein.

JENNIFER E KEAGLE
PO BOX 234
FALLS CREEK PA 15840

VEH #	YEAR	MAKE MODEL	BODY TYPE	SERIAL NUMBER	SYM	TERR	DRIVER	PTS
1	1990	DODGE DAYTONA ES	2H	1B3XG4439LG456758	13	19	F S 42	0
2	1987	HONDA CIVIC 1500 CRX	2H	JHMEC1426HS046476	12	19	M S 19	0

COVERAGE

BODILY INJURY

PROPERTY DAMAGE

FIRST PARTY BENEFITS

MEDICAL EXPENSE

UNINSURED MOTORIST

BODILY INJURY UNSTACKED

UNDERINSURED MOTORIST

BODILY INJURY UNSTACKED

LIMITS OF LIABILITY

\$ 15,000 EACH PERSON/

\$ 30,000 EACH ACCIDENT

\$ 10,000 EACH ACCIDENT

\$ 5,000 EACH PERSON

\$ 15,000 EACH PERSON/

\$ 30,000 EACH ACCIDENT

\$ 15,000 EACH PERSON/

\$ 30,000 EACH ACCIDENT

ADDITIONAL DRIVER: ERIC D BENNETT

LIENHOLDER:

ERIC D BENNETT 7 E SECOND ST FALLS CREEK PA 15840

Underwriting Company: Safe Auto Insurance Company 3883 East
Broad Street Columbus, Ohio 43213
(614) 231-0200

Signature of Authorized
Company Representative

This policy may be cancelled back to the inception date and time for false or misleading information on the application. If the initial premium payment is not honored upon presentation to the financial institution, the policy will be deemed void from its inception.

Policy is only in force if all payments have been paid in full and on time.

FILED

JUN 12 2001
3:30 PM
William A. Shaw
Prothonotary
PO
80.

2 CENTS 4/0 TO JENNIFER
1 CENT TO C/A

IN THE COURT OF COMMON PLEAS
OF CLEARFIELD COUNTY, PENNSYLVANIA
CIVIL DIVISION

COMMONWEALTH OF PENNSYLVANIA :
VS : NO. 01-907-CD
JENNIFER E. KEAGLE :

O R D E R

NOW, this 19th day of December, 2003, this being the day and date set for hearing in the above-captioned appeal from license suspension, it is the Order of this Court that said appeal be CONTINUED until the next scheduled list of license suspension appeals.

BY THE COURT.

President Judge

FILED

DEC 23 2003

William A. Shaw
Prothonotary/Clerk of Courts

FILED

DEC 23 2003

William A. Shaw
Prothonotary/Clerk of Courts

2cc Atty. Kuhar

1cc Des.

7 E. Second St.



DuBois, PA 15801

7004 0550 0000 7176 3472

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here
#01-00710

Sent To	Jennifer E. Keagle
Street, Apt. No.	
or PO Box No.	Second Street
City, State, ZIP+4	DuBois, PA 15801

PS Form 3800, June 2002 See Reverse for Instructions

Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may ONLY be combined with First-Class Mail® or Priority Mail®.
- Certified Mail is *not* available for any class of international mail.
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS® postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "*Restricted Delivery*".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.
Internet access to delivery information is not available on mail addressed to APOs and FPOs.

CA

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY,
PENNSYLVANIA
CIVIL DIVISION

COMMONWEALTH OF PENNSYLVANIA :
DEPARTMENT OF TRANSPORTATION :

vs.

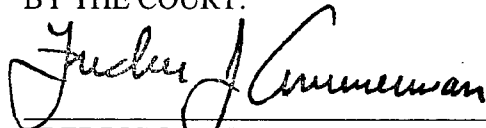
JENNIFER E. KEAGLE

: No. 01-907-00
:
:
:

ORDER

AND NOW, this 15th day of October, 2004, it is the ORDER of the Court that hearing on Plaintiff's License Suspension Appeal in the above matter has been scheduled for **Wednesday, November 10, 2004 at 9:30 A.M.** before the Honorable John K. Reilly, Jr., Senior Judge, Specially Presiding, in the Clearfield County Courthouse, Clearfield, PA. Please report to the Court Administrator's Office. You will be directed from there where these hearing will be heard.

BY THE COURT:



FREDRIC J. AMMERMAN
President Judge

FILE
OCT 15 2004
Willia
Prothonotary

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

010101A. 0005 2723 9956

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To	Jennifer E. Keagle
Street, Apt. No., or PO Box No.	10101A. 0005 2723 9956
City, State, Zip	PA 15801

PS Form 3800, January 2001 See Reverse for Instructions

Certified Mail Provides:

- ☐ A mailing receipt
- ☐ A unique identifier for your mailpiece
- ☐ A signature upon delivery
- ☐ A record of delivery kept by the Postal Service for two years

Important Reminders:

- ☐ Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.
- ☐ Certified Mail is not available for any class of international mail.
- ☐ NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- ☐ For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.
- ☐ For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "*Restricted Delivery*".
- ☐ If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

PS Form 3800, January 2001 (Reverse)

102595-01-M-1049

SENDER COMP. 7001 2510 0005 2723 9963 THIS SECTION ON DELIVERY

7001 2510 0005 2723 9963

- item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Donna E. Scott
209 East Walnut Street
Clearfield, PA 16830

☒ Agent
☐ Addressee
B. Received by (Printed Name) *Donna E. Scott*
C. Date of Delivery *NOV 20 2003*
D. Is delivery address different from item 1? ☒ Yes ☐ No
If YES, enter delivery address below:
303 Reed St

3. Service Type

- ☒ Certified Mail
- ☐ Registered
- ☐ Insured Mail
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label) 7001 2510 0005 2723 9963

PS Form 3811, August 2001

Domestic Return Receipt

102595-01-M-2509

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

Office of Court Administrator
Suite 228, 230 East Market Street
Clearfield, PA 16830

Not Lia. Supp.

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7001 2510 0005 0222 0966

0 9 7 6 6 0 2 2 2 0 0 0 5 0 2 2 2 0 9 6 6

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

Sent To Donna E. Scott
Street No. 100
or PO Box No. East Walnut Street
City, State, Zip Code Springfield, PA 16830

Certified Mail Provides:

- ❑ A mailing receipt
- ❑ A unique identifier for your mailpiece
- ❑ A signature upon delivery
- ❑ A record of delivery kept by the Postal Service for two years

Important Reminders:

- ❑ Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.
- ❑ Certified Mail is not available for any class of international mail.
- ❑ NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- ❑ For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.
- ❑ For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".
- ❑ If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

PS Form 3811, August 2001

Domestic Return Receipt

102595-01-M-2509

7001 2510 0005 2723 9895

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Tina M. Runyon

205 Forest Avenue

DuBois, PA 15801

2. Article Number

(Transfer from service label)

7001 2510 0005 2723 9895

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811, August 2001

Domestic Return Receipt

102595-01-M-2509

PS Form 3811, August 2001

Domestic Return Receipt

102595-01-M-2509

7001 2510 0005 2723 9895

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Tina M. Runyon

205 Forest Avenue

DuBois, PA 15801

2. Article Number

(Transfer from service label)

7001 2510 0005 2723 9895

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

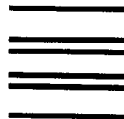
☐ Yes

PS Form 3811, August 2001

Domestic Return Receipt

102595-01-M-2509

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. 5710



• Sender: Please print your name, address, and ZIP+4th in this box.
Office of Court Administrator
Suite 228, 230 East Market Street
Clearfield, PA 16830

mt/lia. Sup.

Certified Mail Provides:

- ❑ A mailing receipt
- ❑ A unique identifier for your mailpiece
- ❑ A signature upon delivery
- ❑ A record of delivery kept by the Postal Service for two years

Important Reminders:

- ❑ Certified Mail may **ONLY** be combined with First-Class Mail or Priority Mail.
- ❑ Certified Mail is *not* available for any class of international mail.
- ❑ **NO INSURANCE COVERAGE IS PROVIDED** with Certified Mail. For valuables, please consider insured or Registered Mail.
- ❑ For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.
- ❑ For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".
- ❑ If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

PS Form 3800, January 2001 (Reverse)

102595-01-M-1049

SENDER: 7001 2510 0005 2723 9994

■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

■ Print your name and address on the reverse so that we can return the card to you.

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Lawrence D. Nicklas
R.R. #1, Box 40-A
Woodland, PA 16881

PLACE STICKER AT TOP OF ENVELOPE TO IMPROVE DELIVERY

CTION ON DELIVERY

A. Signature
Beverly A. Nicklas Agent

B. Received by (Printed Name)
Beverly A. Nicklas

C. Date of Delivery
11-20-03

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

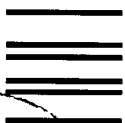
3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label) 7001 2510 0005 2723 9994

PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

UNITED STATES POSTAL SERVICE



WOODBURN

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Office of Court Administrator, AM
Suite 228, 230 East Market Street
Clearfield, PA 16830

Wk / Lia. Sesp.

4666 E222 5000 0752 7002

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Postmark
Here

Sent To: **Lawrence D. Nicklas**
 Street/Post Office: **Street/Post Office 1, Box 40-A**
 City/State/Zip: **Woodland, CA 95691**

See Reverse for Instructions

Certified Mail Provides:

- ❑ A mailing receipt
- ❑ A unique identifier for your mailpiece
- ❑ A signature upon delivery
- ❑ A record of delivery kept by the Postal Service for two years

Important Reminders:

- ❑ Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.
- ❑ Certified Mail is not available for any class of international mail.
- ❑ NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- ❑ For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.
- ❑ For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".
- ❑ If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

NOV 18 2004

OFFICE OF COURT ADMINISTRATOR
CLEARFIELD COUNTY COURTHOUSE
230 EAST MARKET STREET
CLEARFIELD, PA 16830

ADDRESS FOLD HERE
CERTIFIED MAIL™



7004 0550 0000 7176 3472



FILED E6/L
013:34/BN
NOV 02 2004

William A. Shaw
Prothonotary/Clerk of Courts

Jennifer E. Keagle
7 East Second Street
DuBois, PA 15801

NAME
1st Notice
MS
10-18-04
A 52

A ☐ C ☐ S ☐
☐ INSUFFICIENT ADDRESS
☐ ATTEMPTED NOT KNOWN
☐ NO SUCH NUMBER/STREET
☐ NOT DELIVERABLE AS ADDRESSED
☐ UNABLE TO FORWARD

OTHER



UNCLAIMED

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jennifer E. Keagle
7 East Second Street
DuBois, PA 15801

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes
☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number
(Transfer from service label)

7004 0550 0000 7176 3472

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-15-40

SPU

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY,
PENNSYLVANIA
CIVIL DIVISION

COMMONWEALTH OF PENNSYLVANIA :
DEPARTMENT OF TRANSPORTATION :

vs.

JENNIFER E. KEAGLE

No. 01-907-CD

ORDER

AND NOW, this 15 day of October, 2004, it is the ORDER of the Court that hearing on Plaintiff's License Suspension Appeal in the above matter has been scheduled for **Wednesday, November 10, 2004 at 9:30 A.M.** before the Honorable John K. Reilly, Jr., Senior Judge, Specially Presiding, in the Clearfield County Courthouse, Clearfield, PA. Please report to the Court Administrator's Office. You will be directed from there where these hearing will be heard.

BY THE COURT:

/s/ Fredric J. Ammerman

FREDRIC J. AMMERMAN
President Judge

I hereby certify this to be a true
and attested copy of the original
statement filed in this case.

OCT 15 2004

Attest.

William L. Shaw
Prothonotary/
Clerk of Courts

(A)

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA
CIVIL DIVISION

Commonwealth of Pennsylvania, Dept. of Transportation
Plaintiff

vs.

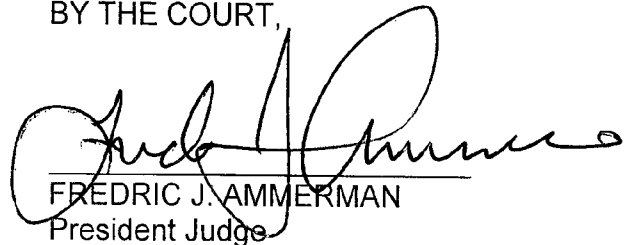
Jennifer E. Keagle
Defendant

*
*
* NO. 01-907-CD
*
*

ORDER

NOW, this 24th day of July, 2007, it is the ORDER of this Court that the above-captioned case be and is hereby dismissed due to inactivity.

BY THE COURT,


FREDRIC J. AMMERMAN
President Judge

FILED *icc Atty Kuhar*
01/16/07
JUL 24 2007 *icc Def.-*
7 E. Second St.
DuBois, PA.
William A. Shaw
Prothonotary/Clerk of Courts *15801*

(62)