

04-1525-CD
NATIONAL City BANK

VS. DEBRA A. KLEBACHA, et al.

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

NATIONAL CITY BANK

Plaintiff

No. 04-1525-LD

vs.

COMPLAINT IN CIVIL ACTION

DEBRA A. KLEBACHA D/B/A
D D LEGS

Defendant

FILED ON BEHALF OF
Plaintiff

COUNSEL OF RECORD OF
THIS PARTY:

William T. Molczan, Esquire
PA I.D. #47437
WELTMAN, WEINBERG & REIS CO., L.P.A.
2718 Koppers Building
436 Seventh Avenue
Pittsburgh, PA 15219
(412) 434-7955

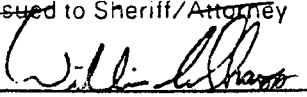
WWR#03873645

FILED

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SEP 30 2004

12-18-04 Document
Reinstated/Reissued to Sheriff/Attorney
for service.


Deputy Prothonotary

William A. Shaw
Prothonotary

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

NATIONAL CITY BANK

Plaintiff

vs.

Civil Action No.

DEBRA A. KLEBACHA D/B/A
D D LEGS

Defendant

COMPLAINT AND NOTICE TO DEFEND

You have been sued in court. If you wish to defend against the claims set forth in the following pages, you must take action within twenty (20) days after this complaint and notice are served, by entering a written appearance personally or by an attorney and filing in writing with the court your defenses or objections to the claims set forth against you. You are warned that if you fail to do so the case may proceed without you and a judgment may be entered against you by the court without further notice for any money claimed in the complaint or for any other claim or relief requested by the plaintiff. You may lose money or property or other rights important to you.

YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. OF YOU DO NOT HAVE A LAWYER OR CANNOT AFFORD ONE, GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW TO FIND OUT WHERE YOU CAN GET LEGAL HELP

IF YOU CANNOT AFFORD TO HIRE A LAWYER, THIS OFFICE MAY BE ABLE TO PROVIDE YOU WITH INFORMATION ABOUT AGENCIES THAT MAY OFFER LEGAL SERVICES TO ELIGIBLE PERSONS AT A REDUCED FEE OR NO FEE.

CLEARFIELD LAWYER REFERRAL SERVICE

Court Administrator
Clearfield County Courthouse
230 East Market Street, Suite 228
Clearfield, PA 16830
(814) 765-2641, ext. 1300-1301

COMPLAINT

1. Plaintiff is a corporation with offices located at 1 National City Parkway, Kalamazoo, MI 49009.

2. Defendant, Debra A. Klebacha, is an adult individual with a last known address of Treasure Lake Box 283, Dubois, PA 15801.

3. On or about November 24, 1995, Defendant, Debra A. Klebacha, applied for and was granted a revolving line of credit by Plaintiff, a true and correct copy of the Business Line of Credit Agreement, the terms and conditions of which were agreed upon by the parties, is attached hereto, marked as Exhibit "1", and made a part hereof.

4. Defendant made use of such credit granted by Plaintiff and has currently a balance due and owing to Plaintiff, as of August 30, 2004, in the amount of \$5,656.94.

5. Defendant defaulted under the terms of the parties' agreement by failing to make the required payments to Plaintiff when due.

6. By the terms of the parties' agreement, more specifically the "acceleration clause" therein, Defendant's default made the entire balance of the loan immediately due and payable to Plaintiff.

7. Plaintiff avers that the written Agreement between the parties provides that Plaintiff is entitled to the addition of finance charges at a variable rate.

8. Plaintiff avers that it is entitled to finance charges at the rate of 11.25% per annum on the unpaid balance.

9. Plaintiff avers that finance charges calculated at the aforesaid rate from April 30, 2004 to August 30, 2004 amount to \$212.71.

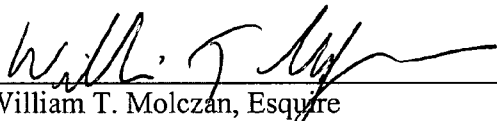
10. Plaintiff avers that the Agreement between the parties provides that Defendant will pay Plaintiff's reasonable attorneys' fees incurred in enforcing said Agreement.

11. Plaintiff avers that such attorneys' fees amount to \$1,000.00.

12. Although repeatedly requested to do so by Plaintiff, Defendant has willfully failed and/or refused to pay the principal balance, finance charges, late fees, attorneys' fees or any part thereof to Plaintiff.

WHEREFORE, Plaintiff demands Judgment in its favor and against Defendant Debra A. Klebaha D/B/A D D Legs, individually in the amount of \$5,869.65 with continuing attorneys' fees, late fees and finance charges thereon at the rate of 11.25% per annum plus costs.

WELTMAN, WEINBERG & REIS, CO., L.P.A.



William T. Molczan, Esquire

PA I.D. #47437

WELTMAN, WEINBERG & REIS CO., L.P.A.

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WWR#:03873645

Integra Bank

Business Line Of Credit Agreement

Date November 24 19 95

DuBois Office

Business Line of Credit Account No. 38515218001

Maximum Credit \$ 5,000.00

Monthly Payment Date: 15th Day of each Month

As used herein, the term "Undersigned" refers individually and collectively to all signers of this Agreement including, in the case of any partnership, all general partners of such partnership individually and collectively, whether or not such partners signed this Agreement. The Undersigned are each jointly and severally bound by the terms hereof, and, with respect to any partnership signing this Agreement, each general partner shall be bound hereby both in such general partner's individual and partnership capacities.

Undersigned may borrow money from time to time from Integra Bank ("Bank") in accordance with the terms and conditions of this Agreement. Undersigned hereby represents and warrants that any borrowings hereunder shall be primarily for a business, commercial or agricultural purpose. Bank will furnish Undersigned with a supply of checks to be used in making borrowings hereunder. Undersigned may borrow money by issuing such checks drawn on Bank in amounts of \$500.00 or more. Payment of which by Bank shall constitute the making of loans hereunder. Each loan will be subject to the approval of Bank. Undersigned will not issue any check or obtain any loan which is in an amount less than \$500.00 or which would cause the principal amount of borrowings hereunder to exceed the Maximum Credit indicated above. If Undersigned does so, Bank may make, or decline to make, the loan at its sole option.

Undersigned promises to pay Bank the principal amount of each loan made hereunder and any other principal indebtedness evidenced hereby together with interest (based upon a year of 365 days or 366 days, as the case may be, accruing from the date the loan is made or the principal indebtedness is advanced by Bank, at a rate per annum which is 11.75 % above Bank's Prime Rate, such rate to change from time to time as of the effective date of each announced change in such Prime Rate. "Prime Rate" shall mean the interest rate per annum announced from time to time by Integra Financial Corporation, at its offices in Pittsburgh, Pennsylvania as its Prime Rate. In no event will the rate charged exceed the maximum rate permitted by state or federal statutes, rules, or regulations. The finance charge will be computed at a starting rate of 11.75 %. This rate is subject to change as stated above.

Any outstanding principal balance shall continue to accrue interest at the rate shown above after default, acceleration, or entry of judgment (whether by confession or otherwise) against Undersigned, and such rate shall apply to amounts owed under this Agreement or under the judgment until paid.

If any required payment is not made in full within 15 days after the date that it is due, Undersigned will pay a late charge of 5% of the payment that has not been paid or \$15.00, whichever is less.

CREDIT INSURANCE IS NOT REQUIRED. Credit Life Insurance is not required to obtain credit, and will not be provided unless Borrower(s) sign(s) below and agree(s) to pay the additional cost(s). Borrower(s) may be required to apply for Credit Life Insurance to the insurer, Union Security Life Insurance Company, Atlanta, Georgia. This maximum Credit Life Insurance available is \$50,000.00. Credit Life Insurance will terminate at the end of the billing cycle in which any insured Borrower becomes 65 years of age.

By signing, Borrower requests Single Credit Life Insurance, which costs \$_____ per day for each \$100.00 of the outstanding principal balance at the end of the day in years of 365 days, and \$_____ per day for each \$100.00 of the outstanding principal balance at the end of the day in years of 366 days.

Signature of Borrower to be insured.

Age _____

By signing, Borrowers request Joint Credit Life Insurance, which costs \$_____ per day for each \$100.00 of the outstanding principal balance at the end of the day in years of 365 days, and \$_____ per day for each \$100.00 of the outstanding principal balance at the end of the day in years of 366 days.

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Notwithstanding anything herein to the contrary, the outstanding principal amount of all loans made to Undersigned under or pursuant to this Agreement, together with interest thereon as provided in this Agreement, shall be due and payable on the earliest of (1) the date on which Bank makes written demand for payment on Undersigned, (2) the occurrence of any event of default described in this Agreement and (3) the date on which the outstanding principal becomes due and payable pursuant to the applicable payment option indicated below.

☒ Lender will send Undersigned a monthly statement for the amount due under the terms of the Agreement and Undersigned will pay the amount due to Lender or its order, at any of its offices, on or before the payment date shown on the statement.

☐ Undersigned authorizes Lender to deduct the amount due under the terms of the Agreement from Checking Account No. _____ on the Monthly Payment Date. Undersigned will maintain sufficient funds in Undersigned's checking account to cover the full amount of the payment required on any Monthly Payment Date.

The minimum required monthly payment will be determined at the close of each billing cycle by one of the payment plans described below. Bank reserves the right to change the payment plans described below, provided that Bank gives the Undersigned any notice required by law. Undersigned has chosen the payment plan checked.

☐ **Variable Payment Plan:** To determine the minimum required monthly payment amount, Bank will first multiply the outstanding principal amount of borrowings hereunder by .03 to find the minimum principal payment. To that amount, Bank will add any interest charges, late charges and any other fees (and credit life insurance premiums, if applicable) accrued during the billing cycle to determine the minimum required monthly payment. The minimum principal payment shall not be less than \$300.00; however, the minimum required monthly payment shall not be more than the total amount that Undersigned owes the Bank.

☐ **Term Variable Payment Plan:** To determine the minimum required monthly payment amount, Bank will first divide Undersigned's total outstanding principal amount of borrowings hereunder (calculated as of the most recent borrowing) by 60, to find the minimum principal payment. To that amount, Bank will add any finance charges, late charges and any other fees (and credit life insurance premiums, if applicable) accrued during the billing cycle to determine the minimum required monthly payment. The minimum principal payment shall not be less than \$30.00; however, the minimum required monthly payment shall not be more than the total amount that Undersigned owes the Bank.

☒ **Interest Only Payment Plan:** The minimum required monthly payment amount will equal the total finance charges, late charges and any other fees (and credit life insurance premiums, if applicable) accrued during the billing cycle. If checked ☐, it shall be a requirement of this repayment option that on an annual basis principal shall remain at a zero balance for a period of 30 continuous days. Any past due amount will also be added to the minimum required monthly payment. Bank will determine the method by which payments are applied.

Undersigned agrees that Bank shall have, and there are hereby created in favor of Bank, the following security interests:

(CHECK APPLICABLE BOXES)

☐ (a) A Uniform Commercial Code security interest in all of Undersigned's equipment, whether now owned or hereafter acquired, wherever located, including machinery, motor vehicles, furniture, and fixtures, together with all attachments, accessories, and parts attached hereto, installed herein, or kept, used, or intended to be used in connection therewith, as well as all substitutions therefor, renewals or replacements thereof, and improvements or additions thereto; and the proceeds (cash and non-cash) of all the foregoing.

☐ (b) A Uniform Commercial Code security interest in the collateral described below, together with all attachments, accessories, and parts used or intended to be used with the described property, whether now owned or hereafter acquired, and the proceeds (cash and non-cash) of all the foregoing.

(SEE DETAILED DESCRIPTION OF COLLATERAL ATTACHED HERETO.)

☐ (c) A Uniform Commercial Code security interest in all inventory of goods, now owned or hereafter acquired and held for sale or lease or to be furnished under contracts of service, and all raw materials work in process, or materials used or consumed in the conduct of Undersigned's business; together with all attachments, accessories, and parts attached hereto, installed herein, or kept, used, or intended to be used in connection therewith, as well as all substitutions therefor, renewals or replacements thereof, and improvements or additions thereto; and the proceeds (cash and non-cash) of all the foregoing.

☐ (d) A Uniform Commercial Code security interest in all of Undersigned's rights to the payment of money however evidenced or arising, including each existing and future account, contract right, general intangible, instrument, and document as those terms are defined by the Pennsylvania Uniform Commercial Code, with all trademarks, copyrights, good will, names, patents, licenses, inventions, choices in action, and goods giving rise to Undersigned's right to the payment of money, including such goods in which Undersigned has retained a security interest or which have been reclaimed returned or repossessed all documents of title and warehouse receipts, and all book entries, records, and files relating to the foregoing; and the proceeds (cash and non-cash) of all the foregoing and any insurance policies relating thereto.

☐ (e) A Uniform Commercial Code security interest in the securities described below; together with all cash, stock, or other dividends paid upon such securities; all securities received in addition to or in exchange for such securities; all subscription rights incident to such securities; any other distribution in respect of such securities in any form; and the proceeds (cash and non-cash) of the foregoing.

(SEE DETAILED DESCRIPTION OF COLLATERAL ATTACHED HERETO.)

☐ (f) This Business Line of Credit Agreement is secured by a mortgage dated _____, 19____, from _____ as Mortgagor, to Integra Bank/ _____ as Mortgagee, on certain _____ premises located at _____ County, _____ State, as more fully set forth therein.

☐ (g) Other:

☐ A security interest in all deposit accounts, credits, securities, moneys, or other property of Undersigned which may at any time be in the possession of, delivered to, or owed by Bank, including any proceeds or return or unearned premiums of insurance, and the proceeds of all the foregoing property.

Said security interests shall secure (i) the payment of all amounts which are due or may become due under this Agreement, (ii) all costs and expenses incurred by Bank in the collection of the same, (iii) all future advances made by Bank for loans, insurance, and repairs to or maintenance of the above collateral, and (iv) any other indebtedness, liability, or obligation of Undersigned to Bank, past, present, or future direct or indirect, absolute or contingent, joint, or several, now due or to become due and whether owed by drawer, maker, endorser, guarantor, surety, or otherwise. In addition to all rights given to Bank pursuant to this Agreement, Bank shall have all the rights and remedies of a secured party under the Pennsylvania Uniform Commercial Code, except to the extent that such law does not apply to certain types of transactions or collateral, in which case applicable law shall govern. Undersigned shall bear the risk of loss of, damage to, or destruction of the collateral.

Collateral securing other obligations of Undersigned to Bank may also secure amounts due under this Agreement.

THE UNDERSIGNED HEREBY EMPOWERS THE PROTHONOTARY OR ANY ATTORNEY OF ANY COURT OF RECORD WITHIN THE UNITED STATES OR ELSEWHERE TO APPEAR FOR THE UNDERSIGNED AND TO CONFESS JUDGMENT AS OFTEN AS NECESSARY AGAINST THE UNDERSIGNED IN FAVOR OF THE HOLDER HEREOF, AS OF ANY TERM, FOR THE ABOVE SUM PLUS INTEREST DUE UNDER THE TERMS HEREOF TOGETHER WITH COSTS OF SUIT AND AN ATTORNEY'S COMMISSION OF 20% OR \$500, WHICHEVER IS GREATER, WITH RELEASE OF ALL ERRORS. THE UNDERSIGNED WAIVES ALL LAWS EXEMPTING REAL OR PERSONAL PROPERTY FROM EXECUTION.

Undersigned will provide financial information a other relevant information to Bank on an annual basis or upon Bank's request, including tax returns and/or without limitation balance sheets and income statements in form and content satisfactory to Bank. Failure to comply may result in termination of this credit line.

This Agreement shall not become effective until accepted and approved by Bank in the space provided below.

THIS AGREEMENT IS SUBJECT TO THE ADDITIONAL PROVISIONS ON THE REVERSE SIDE HEREOF, THE SAME BEING INCORPORATED HEREIN AND MADE A PART HEREOF.

WITNESS the due execution hereof.

ATTEST/WITNESS:

Stan Kaizer
(Name and Title)

(Corporate Seal)

Accepted and approved November 24, 19 95

INTEGRA BANK

BY: Stan Kaizer

MADE SING

(Individual)

(Residence Address)

(Individual)

(Residence Address)

(Individual)

(Residence Address)

(Individual)

(Residence Address)

(Individual)

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(Residence Address)

(Individual)

(Residence Address)

(Individual)

(Residence Address)

(Individual)

Exhibit
"1"

D D Legs

(Copies of or Other Entry)

By: Debra A. Klabach
Debra A. Klabach (Name and Title) Proprietor
Box 027 DuBois Mail, DuBois, PA 15801
Business Address

VERIFICATION

The undersigned does hereby verify subject to the penalties of 18 PA. C.S. 4904 relating to unsworn falsifications to authorities, that he/she is Sara Huseman
(NAME)

Representative of National City plaintiff herein, that
(TITLE) (COMPANY)

he/she is duly authorized to make this verification, and that the facts set forth in the foregoing Complaint are true and correct to the best of his/her knowledge, information and belief.

Sara Huseman
(SIGNATURE)

Date: 10/05/2005

Clearfield County Court of Common Pleas

User: LBENDER

Time: 09:03 AM

Hearings by Judge

Page 3 of 7

CT COMMON PLEAS,

All Case Types

From 10/10/2005 08:00 AM to 10/14/2005 05:00 PM

Paul E. Cherry

Begin Date and Time End Date and Time

10/10/2005 01:30 PM 10/10/2005 02:30 PM

Donald P. Stiles, etal.vs.Kristen Witherow

Case: 2004-00077-CD

Custody Modification Hearing

Courtroom:

Plaintiffs: Stiles, Donald P.

Attorney: Hugney-Shope, Barbara J.

Stiles, Karen E.

Attorney: Hugney-Shope, Barbara J.

Defendant: Witherow, Kristen

Days to Speedy Trial:

Speedy Trial Date:

Attorney: Neiswender, Frederick M.

10/10/2005 01:30 PM 10/10/2005 01:30 PM

William Kitt Bumbarger vs .Vicky Lynne Bumbarger

Case: 1993-01435-CD

Custody Conference

Courtroom:

Plaintiff: Bumbarger, William Kitt

Attorney: Blakley, Benjamin S. III

Defendant: Bumbarger, Vicky Lynne

Days to Speedy Trial:

Speedy Trial Date:

Attorney: Pentz, Chris A.

Attorney: Foor, Robin J.

Date: 11/01/2005

Time: 03:38 PM

Page 1 of 1

Clearfield County Court of Common Pleas

ROA Report

User: LBENDER

Case: 2004-01525-CD

Current Judge: Fredric Joseph Ammerman

National City Bank vs. Debra Ann Klebacha

Civil Other

Date		Judge
09/30/2004	✓ Filing: Civil Complaint Paid by: Molczan, William T. (attorney for National City Bank) Receipt number: 1887472 Dated: 09/30/2004 Amount: \$85.00 (Check) 1 CC to Shff.	No Judge
11/16/2004	✓ Sheriff Return, Now Nov. 16, 2004 return the within Complaint "not served, time expired" as to Debra A. Klebacha d/b/a DD Legs, Defendant. Attempted not home. So Answers, Chester A. Hawkins, Sheriff by s/ Marilyn Hamm	No Judge
12/10/2004	✓ Filing: Reissue Writ/Complaint Paid by: Molczan, William T. (attorney for National City Bank) Receipt number: 1892035 Dated: 12/10/2004 Amount: \$7.00 (Check). Filed by s/ William T. Molczan, Esquire. 1 Reinstated complaint to Shff.	No Judge
01/28/2005	✓ Answer and New Matter filed. by Atty. King 2 Cert. copies to Atty.	No Judge
	✓ Sheriff Return, Jan. 7, 2005 Papers served on Defendant(s). So Answers, Chester A. Hawkins, Sheriff by s/Marilyn Hamm	No Judge
02/09/2005	✓ Reply To New Matter, filed by s/ James C. Warmbrodt, Esquire. No CC	No Judge
10/03/2005	✓ Motion For Summary Judgment, filed by s/ James C. Warmbrodt, Esquire. No CC	No Judge
10/12/2005	✓ Order AND NOW, this 11th day of October, 2005, upon consideration of Plaintiff's Motion for Summary Judgment filed in the above matter, it is the Order of the Court that argument has been scheduled for the 10th day of November 2005 at 1:30 p.m. BY THE COURT: /s/ Fredric J. Ammerman, P. Judge. 1CC Attys: Molczan and King	Fredric Joseph Ammerman

In The Court of Common Pleas of Clearfield County, Pennsylvania

NATIONAL CITY BANK

VS.

KLEBACHA, DEBRA A. d/b/a D D LEGS

COMPLAINT

Sheriff Docket #

16396

04-1525-CD

SHERIFF RETURNS

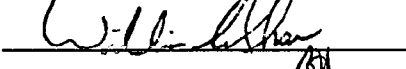
NOW NOVEMBER 16, 2004 RETURN THE WITHIN COMPLAINT "NOT SERVED, TIME EXPIRED" AS TO DEBRA A. KLEBACHA d/b/a D D LEGS, DEFENDANT. ATTEMPTED NOT HOME.

Return Costs


Cost	Description
42.87	SHERIFF HAWKINS PAID BY: ATT CK# 8164571
10.00	SURCHARGE PAID BY: ATTY CK# 8165487

Sworn to Before Me This

16th Day Of November 2004


WILLIAM A. SHAW
Prothonotary
My Commission Expires
1st Monday in Jan. 2006
Clearfield Co., Clearfield, PA

So Answers,


Chester A. Hawkins
Sheriff

FILED ^{66K}

01:53 PM
NOV 16 2004

William A. Shaw
Prothonotary/Clerk of Courts

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

NATIONAL CITY BANK

Plaintiff

vs.

Civil Action No.

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D D LEGS

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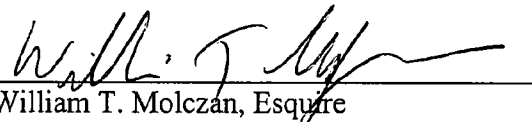
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WWR#:03873645

Integra Bank

Business Line Of Credit Agreement

Date November 24 1995

DuBois Office

Business Line of Credit Account No. 38515218001

Maximum Credit \$ 5,000.00

Monthly Payment Date: 15th Day of each Month

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Signature of Borrower to be insured.

Age _____

Signature of Borrowers to be insured.

Age _____

Notwithstanding anything herein to the contrary, the outstanding principal amount of all loans made to Undersigned under or pursuant to this Agreement, together with interest thereon as provided in this Agreement, shall be due and payable on the earliest of (1) the date on which Bank makes written demand for payment of Undersigned, (2) the occurrence of any event of default described in this Agreement and (3) the date on which the outstanding principal becomes due and payable pursuant to the applicable payment option indicated below.

☒ Lender will send Undersigned a monthly statement for the amount due under the terms of the Agreement and Undersigned will pay the amount due to Lender or its order, at any of its offices, on or before the payment date shown on the statement.

☐ Undersigned authorizes Lender to deduct the amount due under the terms of the Agreement from Checking Account No. _____ on the Monthly Payment Date. Undersigned will maintain sufficient funds in Undersigned's checking account to cover the full amount of the payment required on any Monthly Payment Date.

The minimum required monthly payment will be determined at the close of each billing cycle by one of the payment plans described below. Bank reserves the right to change the payment plans described below, provided that Bank gives the Undersigned any notice required by law. Undersigned has chosen the payment plan checked.

☐ **Variable Payment Plan:** To determine the minimum required monthly payment amount, Bank will first multiply the outstanding principal amount of borrowings hereunder by .03 to find the minimum principal payment. To that amount, Bank will add any interest charges, late charges and any other fees (and credit life insurance premiums, if applicable) accrued during the billing cycle to determine the minimum required monthly payment. The minimum principal payment shall not be less than \$300.00; however, the minimum required monthly payment shall not be more than the total amount that Undersigned owes the Bank.

☐ **Term Variable Payment Plan:** To determine the minimum required monthly payment amount, Bank will first divide Undersigned's total outstanding principal amount of borrowings hereunder (calculated as of the most recent borrowing) by 60, to find the minimum principal payment. To that amount, Bank will add any finance charges, late charges and any other fees (and credit life insurance premiums, if applicable) accrued during the billing cycle to determine the minimum required monthly payment. The minimum principal payment shall not be less than \$50.00; however, the minimum required monthly payment shall not be more than the total amount that Undersigned owes the Bank.

☒ **Interest Only Payment Plan:** The minimum required monthly payment amount will equal the total finance charges, late charges and any other fees (and credit life insurance premiums, if applicable) accrued during the billing cycle. If checked ☐, it shall be a requirement of this repayment option that on an annual basis principal shall remain at a zero balance for a period of 30 continuous days. Any past due amount will also be added to the minimum required monthly payment. Bank will determine the method by which payments are applied.

Undersigned agrees that Bank shall have, and there are hereby created in favor of Bank, the following security interests:

(CHECK APPLICABLE BOXES)

☐ (a) A Uniform Commercial Code security interest in all of Undersigned's equipment, whether now owned or hereafter acquired, wherever located, including machinery, motor vehicles, furniture, and fixtures, together with all attachments, accessories, and parts attached thereto, installed herein, or kept, used, or intended to be used in connection therewith, as well as all substitutions therefor, renewals or replacements thereof, and improvements or additions thereto, and the proceeds (cash and non-cash) of all the foregoing.

☐ (b) A Uniform Commercial Code security interest in the collateral described below, together with all attachments, accessories, and parts used or intended to be used with the described property, whether now owned or hereafter acquired, wherever located, including machinery, motor vehicles, furniture, and fixtures, together with all attachments, accessories, and parts attached thereto, installed herein, or kept, used, or intended to be used in connection therewith, as well as all substitutions therefor, renewals or replacements thereof, and improvements or additions thereto, and the proceeds (cash and non-cash) of all the foregoing. (SEE DETAILED DESCRIPTION OF COLLATERAL ATTACHED HERETO.)

☐ (c) A Uniform Commercial Code security interest in all inventory of goods, now owned or hereafter acquired and held for sale or lease or to be furnished under contracts of service, and all raw materials work in process, or materials used or consumed in the conduct of Undersigned's business; together with all attachments, accessories, and parts, attached thereto, installed herein, or kept, used, or intended to be used in connection therewith, as well as all substitutions therefor, renewals or replacements thereof, and improvements or additions thereto, and the products and proceeds (cash and non-cash) of all the foregoing.

☐ (d) A Uniform Commercial Code security interest in all of Undersigned's rights to the payment of money however evidenced or arising, including each existing and future account, contract right, general intangible, instrument, and document as those terms are defined by the Pennsylvania Uniform Commercial Code, with all trademarks, copyrights, good will, name, patents, licenses, inventions, choses in action, and goods, giving rise to Undersigned's right to the payment of money including such goods in which Undersigned has retained a security interest or which have been reclaimed returned or repossessed all documents of title and warehouse receipts, and all book entries, records, and files relating to the foregoing; and the proceeds (cash and non-cash) of all the foregoing and any insurance policies relating thereto.

☐ (e) A Uniform Commercial Code security interest in the securities described below, together with all cash, stock, or other dividends paid upon such securities; all securities received in addition to or in exchange for such securities; all exercise rights incident to such securities; any other distribution in respect of such securities in any form; and the proceeds (cash and non-cash) of the foregoing. (SEE DETAILED DESCRIPTION OF COLLATERAL ATTACHED HERETO.)

☐ (f) This Business Line of Credit Agreement is secured by a mortgage dated _____, 19____ from _____ as Mortgagor, to Integra Bank/ _____ as Mortgagee, on certain _____ premises located at _____ County _____ State, as more fully set forth therein.

☐ (g) Other:

☐ A security interest in all deposit accounts, credits, securities, moneys, or other property of Undersigned which may at any time be in the possession of, delivered to, or owed by Bank, including any proceeds or return or unearned premiums of insurance, and the proceeds of all the foregoing property.

Said security interests shall secure (i) the payment of all amounts which are due or may become due under this Agreement, (ii) all costs and expenses incurred by Bank in the collection of the same, (iii) all future advances made by Bank to or maintenance of the above collateral, and (iv) any other indebtedness, liability, or obligation of Undersigned to Bank, past, present, or future direct or indirect, absolute or contingent, individual, joint, or several, now due or to become due and whether owed as drawer, maker, endorser, guarantor, surety, or otherwise. In addition to all rights given to Bank pursuant to this Agreement, Bank shall have all the rights and remedies of a secured party under the Pennsylvania Uniform Commercial Code, except to the extent that such law does not apply to certain types of transactions or collateral, in which case applicable law shall govern. Undersigned shall bear the risk of loss of, damage to, or destruction of the collateral.

Collateral securing other obligations of Undersigned to Bank may also secure amounts due under this Agreement.

THE UNDERSIGNED HEREBY EMPOWERS THE PROTHONOTARY OR ANY ATTORNEY OF ANY COURT OF RECORD WITHIN THE UNITED STATES OR ELSEWHERE TO APPEAR FOR THE UNDERSIGNED AND TO CONFESS JUDGMENT AS OFTEN AS NECESSARY AGAINST THE UNDERSIGNED IN FAVOR OF THE HOLDER HEREOF, AS IF ANY TERM, FOR THE ABOVE SUM PLUS INTEREST DUE UNDER THE TERMS HEREOF TOGETHER WITH COSTS OF SUIT AND AN ATTORNEY'S COMMISSION OF 20% OR \$500, WHICHEVER IS GREATER, WITH RELEASE OF ALL ERRORS. THE UNDERSIGNED WAIVES ALL LAWS EXEMPTING REAL OR PERSONAL PROPERTY FROM EXECUTION.

Undersigned will provide financial information a other relevant information to Bank on an annual basis or upon Bank's request, including tax returns and/or without limitation balance sheets and income statements in form and content satisfactory to Bank. Failure to comply may result in termination of this credit line.

This Agreement shall not become effective until accepted and approved by Bank in the space provided below.

THIS AGREEMENT IS SUBJECT TO THE ADDITIONAL PROVISIONS ON THE REVERSE SIDE HEREOF, THE SAME BEING INCORPORATED HEREIN AND MADE A PART HEREOF.

WITNESS the due execution hereof.

(Individual)
(Residence Address)
(SEAL)

(Individual)
(Residence Address)
(SEAL)

(Individual)
(Residence Address)
(SEAL)

(Individual)
(Residence Address)
(SEAL)

(Individual)
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(Individual)
(Residence Address)
(SEAL)

(Individual)
(Residence Address)
(SEAL)

(Individual)
(Residence Address)
(SEAL)

Exhibit
"1"

Accepted and approved November 24 1995

INTEGRA BANK

BY: Stan Kaizer
Stan Kaizer

1000 005

D D Legs

(Signature of Other Party)

(Name and Title)

Business Address

VERIFICATION

The undersigned does hereby verify subject to the penalties of 18 PA. C.S. 4904 relating to unsworn falsifications to authorities, that he/she is Sara Hossain
(NAME)

Representative of National City plaintiff herein, that
(TITLE) (COMPANY)

he/she is duly authorized to make this verification, and that the facts set forth in the foregoing Complaint are true and correct to the best of his/her knowledge, information and belief.

Sara Hossain
(SIGNATURE)

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

NATIONAL CITY BANK

Plaintiff

vs.

DEBRA A. KLEBACHA D/B/A D D LEGS

Defendant

No. 04-1525 CD

PRAECIPE TO REINSTATE COMPLAINT

FILED ON BEHALF OF
Plaintiff

COUNSEL OF RECORD OF
THIS PARTY:

William T. Molczan, Esquire
PA I.D. #47437
WELTMAN, WEINBERG & REIS, CO., L.P.A.
2718 Koppers Building
436 Seventh Avenue
Pittsburgh, PA 15219
(412) 434-7955

WWR#03873645

FILED *EC*
m 1:33 pm pd 7.00
1 reinstated compl
2/18
DEC 10 2004

William A. Shaw
Prothonotary

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

NATIONAL CITY BANK

Plaintiff

vs.

Civil Action No. 04-1525 CD

DEBRA A. KLEBACHA D/B/A D D LEGS

Defendant

PRAECIPE TO REINSTATE COMPLAINT

Kindly reinstate the Complaint. in the above captioned matter.

WELTMAN, WEINBERG & REIS CO., L.P.A.

By: 

William T. Molczan, Esquire

PA I.D. #47437

WELTMAN, WEINBERG & REIS CO., L.P.A.

2718 Koppers Building

436 Seventh Avenue

Pittsburgh, PA 15219

(412) 434-7955

WWR #03873645

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

NATIONAL CITY BANK,
Plaintiff

vs.

DEBRA A. KLEBACHA D/B/A
D D LEGS,
Defendant

NO. 04-1525-C.D.

Type of Case: Civil

Type of Pleading: Answer with New
Matter

Filed on behalf of: Defendant

Counsel of Record for this Party:
David P. King, Esquire
23 Beaver Drive
P. O. Box 1016
DuBois, PA 15801
(814) 371-3760

Supreme Court No. 22980

FILED

JAN 21 2005

01/11/05
William A. Shaw

Prothonotary/Clerk of Courts

2 CENTS TO ATT. ,

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

NATIONAL CITY BANK,	:	
Plaintiff	:	
	:	
vs.	:	No. 04-1525-C.D.
	:	
DEBRA A. KLEBACHA D/B/A	:	
D D LEGS,	:	
Defendant	:	

NOTICE

You have been sued in Court. If you wish to defend against the claims set forth in the following pages, you must take action within twenty (20) days after this Answer with New Matter and Notice are served, by entering a written appearance personally or by Attorney and filing in writing with the Court your defenses or objections to the claims set forth against you. You are warned that if you fail to do so the case may proceed without you and a judgment may be entered against you by the Court without further notice for any money claimed in the Answer with New Matter or for any other claim or relief requested by the Defendant. You may lose money or property or other rights important to you.

YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO
NOT HAVE A LAWYER OR CANNOT AFFORD ONE, GO TO OR TELEPHONE
THE OFFICE SET FORTH BELOW TO FIND OUT WHERE YOU CAN GET LEGAL HELP.

David S. Meholick, Court Administrator
Clearfield County Courthouse
230 East Market Street, Suite 228
Clearfield, PA 16830
(814) 765-2641 Ext. 5982

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

NATIONAL CITY BANK,	:
Plaintiff	:
	:
vs.	: NO. 04-1525-C.D.
	:
DEBRA A. KLEBACHA D/B/A	:
D D LEGS,	:
Defendant	:

ANSWER

AND NOW, comes the Defendant, DEBRA A. KLEBACHA D/B/A D D LEGS, through her Attorney, David P. King, and files the following response to Plaintiff's Complaint as follows:

1. Admitted.
2. Admitted.
3. Admitted.
4. It is denied that the Defendant is indebted to the Plaintiff in the amount so stated, and strict proof of the same is required.
5. The averments in Plaintiff's Paragraph 5 are admitted as to default by the Defendant, but denied if the same infers that the amount alleged owed to the Plaintiff is as stated in Paragraph 4 above, and denied also for the reasons as set forth in the New Matter that appears hereafter.
6. The averments in Plaintiff's Paragraph 6 require no responsive pleading, as the agreement speaks for itself, and Plaintiff's allegation is a legal conclusion.
7. Defendant answers the averments in Plaintiff's Paragraph 7 in the same manner as her answer in Paragraph 6.

8. Defendant answers the averments in Plaintiff's Paragraph 8 in the same manner as set forth in her answer to Paragraphs 7 and 6 above mentioned.

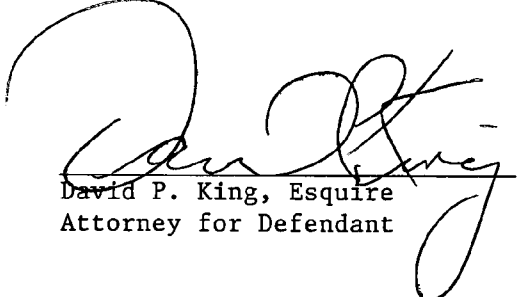
9. Defendant avers that the finance charge as calculated in Plaintiff's Paragraph 9 is inaccurate, inappropriate and otherwise denies that the same is owed in accordance therewith.

10. The averments in Plaintiff's Paragraph 10 are denied in that the provision for reasonable attorney's fees would be inapplicable in the present situation.

11. Defendant answers that attorney's fees of \$1,000.00 are not fair, reasonable, nor are they recoverable for all of the reasons as set forth above and hereafter.

12. It is admitted that the Defendant has not made payment, but denied in that the same infers that the Defendant is indebted to the Plaintiff for the reasons as set forth above and hereafter.


WHEREFORE, Defendant prays your Honorable Court to enter Judgment in her favor and against the Plaintiff.


David P. King, Esquire
Attorney for Defendant

NEW MATTER

13. Defendant avers that notwithstanding the allegations of the Plaintiff, any debt alleged owed by the Defendant to the Plaintiff is not recoverable, because of the Statute of Limitations which would be a bar to recovery.

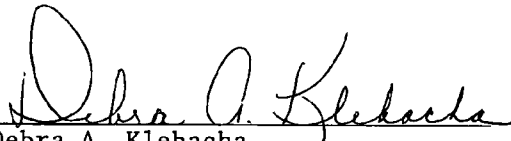
WHEREFORE, Defendant prays your Honorable Court to enter Judgment
in her favor and against the Plaintiff.



David P. King, Esquire
Attorney for Defendant

I verify that the statements made in this Answer and New Matter are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. §4904, relating to unsworn falsification to authorities.

Date: January 27, 2005


Debra A. Klebacha
Defendant

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA

DOCKET # 100057
NO: 04-1525-CD
SERVICE # 1 OF 1
COMPLAINT

PLAINTIFF: NATIONAL CITY BANK
vs.
DEFENDANT: DEBRA A. KLEBACHA d/b/a D D LEGS

SHERIFF RETURN

NOW, January 07, 2005 AT 9:57 AM SERVED THE WITHIN COMPLAINT ON DEBRA A. KLEBACHA d/b/a D D LEGS DEFENDANT AT TREASURE LAKE BOX 283, DUBOIS, CLEARFIELD COUNTY, PENNSYLVANIA, BY HANDING TO ERIC HAZUDA, ADULT AT RESIDENCE A TRUE AND ATTESTED COPY OF THE ORIGINAL COMPLAINT AND MADE KNOWN THE CONTENTS THEREOF.

SERVED BY: HUNTER / DEHAVEN

FILED
JAN 28 2005
09:15
William A. Shaw
Prothonotary, Clerk of Courts

PURPOSE	VENDOR	CHECK #	AMOUNT
SURCHARGE	WELTMAN	8192610	10.00
SHERIFF HAWKINS	WELTMAN	8192610	38.64

Sworn to Before Me This

28th Day of Jan 2005


WILLIAM A. SHAW
Prothonotary
My Commission Expires
1st Monday in Jan. 2006
Clearfield Co., Clearfield, PA

So Answers,


Chester A. Hawkins
Sheriff

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

NATIONAL CITY BANK,

Plaintiff

vs.

DEBRA A. KLEBACHA d/b/a D D LEGS,

Defendant

No. 04-1525 CD

REPLY TO NEW MATTER

FILED ON BEHALF OF
Plaintiff

COUNSEL OF RECORD OF
THIS PARTY:

JAMES C. WARMBRODT
PA I.D. #42524
Weltman, Weinberg & Reis Co., L.P.A.
2718 Koppers Building
436 7th Avenue
Pittsburgh, PA 15219
(412) 434-7955

WWR#03873645

FILED
m 1:41 PM NOCC

FEB 09 2005

William A. Shaw
Prothonotary

FILED
m 1:41 PM NOCC

FEB 09 2005

William A. Shaw
Prothonotary

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

NATIONAL CITY BANK,

Plaintiff

No. 04-1525 CD

vs.

DEBRA A. KLEBACHA d/b/a D D LEGS,

Defendant

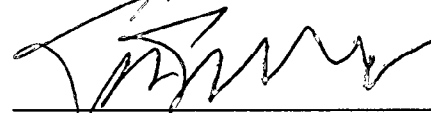
REPLY TO NEW MATTER

AND NOW, comes Plaintiff, National City Bank, by and through its counsel, WELTMAN, WEINBERG & REIS, CO., L.P.A., and files the within Reply to New Matter, averring in support thereof the following:

13. The averments contained in Paragraph 13 of Defendant's New Matter constitute conclusions of law to which no response is required.

WHEREFORE, Plaintiff demands judgment in its favor and against the Defendant in the amounts demanded in its Complaint.

WELTMAN, WEINBERG & REIS, CO., L.P.A.



JAMES C. WARMBRODT

PA J.D. #42524

Weltman, Weinberg & Reis Co., L.P.A.

2718 Koppers Building

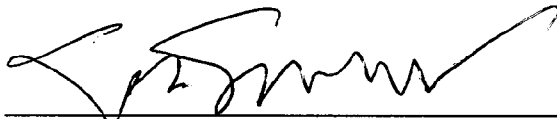
436 7th Avenue

Pittsburgh, PA 15219


(412) 434-7955

VERIFICATION

The undersigned does hereby verify subject to the penalties of 18 Pa.C.S. Section 4904 relating to unsworn falsification to authorities, he is an attorney for the Plaintiff herein; makes this Verification based upon the facts as supplied to him by the Plaintiff and/or its agents and because the Plaintiff is outside the jurisdiction of the court and the Plaintiff's Verification cannot be obtained within the time allowed for filing of this Reply to New Matter and that the facts set forth in the foregoing Reply to New Matter are true and correct to the best of his knowledge, information and belief.



James C. Warmbrodt, Esquire
Attorney for Petitioner



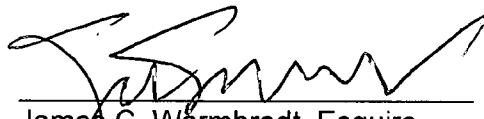
CERTIFICATE OF SERVICE

The undersigned hereby certifies that true and correct copies of the within Plaintiff's Reply to New Matter mailed to the following on this 7th day of February, 2005 by first class, U.S. Mail, postage pre-paid:

David P. King, Esquire
PO Box 1016
23 Beaver Drive
DuBois, PA 15801

Respectfully Submitted:

WELTMAN, WEINBERG & REIS CO., L.P.A.



James C. Warmbrodt, Esquire
Pa. J.D. #42524
Attorneys for Plaintiff
2718 Koppers Building
436 Seventh Avenue
Pittsburgh, PA 15219
(412) 434-7955

CA

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

NATIONAL CITY BANK,

Plaintiff,

Case No.: 04-1525-CD

v.

TYPE OF PLEADING:
**MOTION FOR SUMMARY
JUDGMENT**

DEBRA A. KLEBACHA,
D/B/A D D LEGS

Defendant.

FILED ON BEHALF OF:
Plaintiff

COUNSEL OF RECORD OF
THIS PARTY:

James C. Warmbrodt, Esquire
PA I.D. # 42524
WELTMAN, WEINBERG & REIS CO., L.P.A.
2718 Koppers Building
436 Seventh Avenue
Pittsburgh, PA 15219
(412) 434-7955
WWR # 03873645

64 FILED 10 CC
M/11-29/04
OCT 03 2005

Prothonotary, Clerk of Courts

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

NATIONAL CITY BANK,

Plaintiff,

Case No.: 04-1525-CD

v.

DEBRA A. KLEBACHA,
D/B/A D D LEGS

Defendant.

PLAINTIFF'S MOTION FOR SUMMARY JUDGMENT

AND NOW COMES, Plaintiff, by and through its counsel, Weltman, Weinberg & Reis, Co., L.P.A., and hereby files this Motion for Summary Judgment against the defendant. In support thereof, Plaintiff avers as follows:

1. On or about September 30, 2004, Plaintiff filed a Complaint against Defendant for payment of credit card debt. A true and correct copy of the Complaint is attached hereto as Exhibit "A" and made a part hereof.

2. After the Complaint was re-instated, on or about January 28, 2005, Defendant filed an Answer and New Matter to Plaintiff's Complaint. A true and correct copy of Defendant's Answer and New Matter is attached hereto as Exhibit "B" and made a part hereof.

3. In her New Matter, Defendant plead that any debt alleged owed is not recoverable because of the Statute of Limitations, which would be a bar to recovery.

4. On or about February 7, 2005, Plaintiff filed a Reply to Defendant's Answer and New Matter. A true and correct copy of the Reply to Defendant's Answer and New Matter is attached hereto as Exhibit "C" and made a part hereof.

5. The pleadings in this matter are closed.

6. On or about March 16, 2005, the undersigned sent a letter to Defendant's counsel forwarding the requested copies of the statements on the account. The statements indicated that Defendant last made a payment on the account on September 30, 2003, within the Statute of Limitations period. See Exhibit "D."

7. On or about May 10, 2005, Plaintiff served upon Defendant a Request for Admissions. A true and correct copy of same is attached hereto as Exhibit "E" and made a part hereof.

8. No response to the discovery requests has been received.

9. Plaintiff's requests for admissions are now deemed admitted under Pennsylvania Rule of Civil Procedure 4014(b).

10. Defendant has admitted that attached to the discovery requests at Exhibit "1" is a true and correct copy of the Business Credit Application for account no. 4489709860011335 signed by the Defendant.

11. Defendant has admitted that she is required to make monthly payments to Plaintiff on any outstanding balances owed on the subject revolving business line of credit account no. 4489709860011335.

12. Defendant has admitted that Exhibit "2" contains true and correct copies of the statements for account no. 4489709860011335 showing all charges and payments on this account from February 20, 1998 through March 24, 2004.

13. Defendant has admitted that she has made no payment on the revolving business line of credit since September 30, 2003.

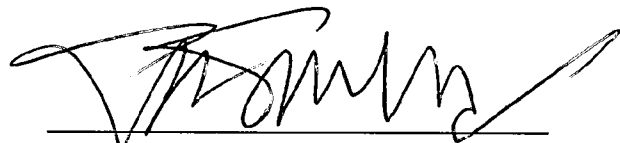
14. Defendant has admitted that she has not submitted any written dispute as to any accounting inaccuracy concerning the amounts demanded by the Plaintiff on the revolving business line of credit account no. 4489709860011335.

15. Defendant has admitted that the balance owed by the Defendant to the Plaintiff on the subject revolving business line of credit account no. 4489709860011335 as of August 30, 2004 was \$5,656.94.

16. There are no meritorious defenses against this action and Plaintiff is entitled to judgment as a matter of law against Defendant Debra A Klebacha, D/B/A D D Legs.

WHEREFORE, Plaintiff respectfully requests that this Court grant Summary Judgment in favor of the Plaintiff and against the Defendant, Debra A Klebacha, D/B/A D D Legs, in the amount of \$5,656.94 plus interest at the legal interest rate of 6% per annum from the date of the judgment, plus costs.

Respectfully Submitted:



James C. Warmbrodt, Esquire
PA I.D. # 42524
WELTMAN, WEINBERG & REIS CO., L.P.A.
2718 Koppers Building
436 Seventh Avenue
Pittsburgh, PA 15219
(412) 434-7955
WWR # 03873645

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

NATIONAL CITY BANK

Plaintiff

vs.

DEBRA A. KLEBACHA D/B/A
D D LEGS

Defendant

No. 04-1525-CD

COMPLAINT IN CIVIL ACTION

FILED ON BEHALF OF
Plaintiff

COUNSEL OF RECORD OF
THIS PARTY:

William T. Molczan, Esquire
PA I.D. #47437
WELTMAN, WEINBERG & REIS CO., L.P.A.
2718 Koppers Building
436 Seventh Avenue
Pittsburgh, PA 15219
(412) 434-7955

WWR#03873645

EXHIBIT

A

FILED

SEP 30 2004

William A. Shaw
Prothonotary

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

NATIONAL CITY BANK

Plaintiff

vs.

Civil Action No.

DEBRA A. KLEBACHA D/B/A
D D LEGS

Defendant

COMPLAINT AND NOTICE TO DEFEND

You have been sued in court. If you wish to defend against the claims set forth in the following pages, you must take action within twenty (20) days after this complaint and notice are served, by entering a written appearance personally or by an attorney and filing in writing with the court your defenses or objections to the claims set forth against you. You are warned that if you fail to do so the case may proceed without you and a judgment may be entered against you by the court without further notice for any money claimed in the complaint or for any other claim or relief requested by the plaintiff. You may lose money or property or other rights important to you.

YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. OF YOU DO NOT HAVE A LAWYER OR CANNOT AFFORD ONE, GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW TO FIND OUT WHERE YOU CAN GET LEGAL HELP

IF YOU CANNOT AFFORD TO HIRE A LAWYER, THIS OFFICE MAY BE ABLE TO PROVIDE YOU WITH INFORMATION ABOUT AGENCIES THAT MAY OFFER LEGAL SERVICES TO ELIGIBLE PERSONS AT A REDUCED FEE OR NO FEE.

CLEARFIELD LAWYER REFARRAL SERVICE

Court Administrator
Clearfield County Courthouse
230 East Market Street, Suite 228
Clearfield, PA 16830
(814) 765-2641, ext. 1300-1301

COMPLAINT

1. Plaintiff is a corporation with offices located at 1 National City Parkway, Kalamazoo, MI 49009.
2. Defendant, Debra A. Klebacha, is an adult individual with a last known address of Treasure Lake Box 283, Dubois, PA 15801.
3. On or about November 24, 1995, Defendant, Debra A. Klebacha, applied for and was granted a revolving line of credit by Plaintiff, a true and correct copy of the Business Line of Credit Agreement, the terms and conditions of which were agreed upon by the parties, is attached hereto, marked as Exhibit "1", and made a part hereof.
4. Defendant made use of such credit granted by Plaintiff and has currently a balance due and owing to Plaintiff, as of August 30, 2004, in the amount of \$5,656.94.
5. Defendant defaulted under the terms of the parties' agreement by failing to make the required payments to Plaintiff when due.
6. By the terms of the parties' agreement, more specifically the "acceleration clause" therein, Defendant's default made the entire balance of the loan immediately due and payable to Plaintiff.
7. Plaintiff avers that the written Agreement between the parties provides that Plaintiff is entitled to the addition of finance charges at a variable rate.

8. Plaintiff avers that it is entitled to finance charges at the rate of 11.25% per annum on the unpaid balance.

9. Plaintiff avers that finance charges calculated at the aforesaid rate from April 30, 2004 to August 30, 2004 amount to \$212.71.

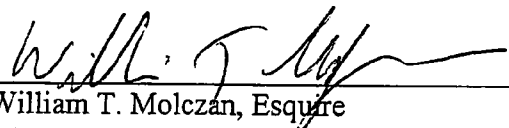
10. Plaintiff avers that the Agreement between the parties provides that Defendant will pay Plaintiff's reasonable attorneys' fees incurred in enforcing said Agreement.

11. Plaintiff avers that such attorneys' fees amount to \$1,000.00.

12. Although repeatedly requested to do so by Plaintiff, Defendant has willfully failed and/or refused to pay the principal balance, finance charges, late fees, attorneys' fees or any part thereof to Plaintiff.

WHEREFORE, Plaintiff demands Judgment in its favor and against Defendant Debra A. Klebaha D/B/A D D Legs, individually in the amount of \$5,869.65 with continuing attorneys' fees, late fees and finance charges thereon at the rate of 11.25% per annum plus costs.

WELTMAN, WEINBERG & REIS, CO., L.P.A.



William T. Molczan, Esquire

PA I.D. #47437

WELTMAN, WEINBERG & REIS CO., L.P.A.

2718 Koppers Building

436 Seventh Avenue

Pittsburgh, PA 15219

(412) 434-7955

WWR#:03873645

Integro Bank

Business Line Of Credit Agreement

Date November 24 19 95

DuBois Office

Business Line of Credit Account No. 38515218001

Maximum Credit \$ 5,000.00

Monthly Payment Due: 15th Day of each Month

As used herein, the term "Undersigned" refers individually and collectively to all signers of this Agreement including, in the case of any partnership, all general partners of such partnership individually and collectively whether or not such partners signed this Agreement. The Undersigned are each jointly and severally bound by the terms hereof, and, with respect to any partnership signing this Agreement, each general partner shall be bound hereby both in such general partner's individual and partnership capacities.

Undersigned may borrow money from time to time from Integro Bank ("Bank") in accordance with the terms and conditions of this Agreement. Undersigned hereby represents and warrants that any borrowing hereunder shall be primarily for a business, commercial or agricultural purpose. Bank will furnish Undersigned with a supply of checks to be used in making borrowings hereunder. Undersigned may borrow money by issuing such checks drawn on Bank in amounts of \$500.00 or more, payments of which by Bank shall constitute the making of loans hereunder. Each loan will be subject to the approval of Bank. Undersigned will not issue any check or obtain any loan which is in an amount less than \$500.00 or which would cause the principal amount of borrowings hereunder to exceed the Maximum Credit indicated above. If Undersigned does so, Bank may make, or decline to make, the loan at its sole option.

Undersigned promises to pay Bank the principal amount of each loan made hereunder and any other principal indebtedness evidenced hereby, together with interest (based upon a year of 365 days or 365 days, as the case may be), accruing from the date the loan is made or the principal indebtedness is evidenced by Bank, at a rate per annum which is 7.25 % above Bank's Prime Rate such rate to change from time to time as the effective date of each announced change in such Prime Rate. "Prime Rate" shall mean the interest rate per annum announced from time to time by Integro Financial Corporation, at its offices in Pittsburgh, Pennsylvania as its Prime Rate. In no event will the rate charged exceed the maximum rate permitted by state or federal statutes, rules, or regulations. The finance charge will be computed at a starting rate of 11.75 %. This rate is subject to change as stated above.

Any outstanding principal balance shall continue to accrue interest at the rate shown above after default, acceleration, or entry of judgment (whether by confession or otherwise) against Undersigned, and such rate shall apply to amounts owed under this Agreement or under the judgment until paid.

If any required payment is not made in full within 15 days after the date that it is due, Undersigned will pay a late charge of 5% of the payment that has not been paid or \$15.00, whichever is less.

CREDIT INSURANCE IS NOT REQUIRED. Credit Life Insurance is not required to obtain credit, and will not be provided unless Borrower(s) sign(s) below and agree(s) to pay the additional cost(s). Borrower(s) may be required to carry Credit Life Insurance to the Insurer, Union Security Life Insurance Company, Atlanta, Georgia. The maximum Credit Life Insurance available is \$50,000.00. Credit Life Insurance will terminate at the end of the billing cycle in which any insured Borrower becomes 65 years of age.

By signing, Borrower requests Single Credit Life Insurance, which costs \$ _____ per day for each \$100.00 of the outstanding principal balance at the end of the day in years of 365 days, and \$ _____ per day for each \$100.00 of the outstanding principal balance at the end of the day in years of 366 days.

By signing, Borrower requests Joint Credit Life Insurance, which costs \$ _____ per day for each \$100.00 of the outstanding principal balance at the end of the day in years of 365 days, and \$ _____ per day for each \$100.00 of the outstanding principal balance at the end of the day in years of 366 days.

Signature of Borrower to be insured.

Age _____

Signature of Borrowers to be insured.

Age _____

Notwithstanding anything herein to the contrary, the outstanding principal amount of all loans made to Undersigned under or pursuant to this Agreement, together with interest thereon as provided in this Agreement, shall be due and payable on the earliest of (1) the date on which Bank makes written demand for payment on Undersigned, (2) the occurrence of any event of default described in this Agreement and (3) the date on which the outstanding principal becomes due and payable pursuant to the applicable payment option indicated below.

☒ Lender will send Undersigned a monthly statement for the amount due under the terms of the Agreement and Undersigned will pay the amount due to Lender or its order, at any of its offices, on or before the payment date shown on the statement.

☐ Undersigned authorizes Lender to deduct the amount due under the terms of the Agreement from: Checking Account No. _____ on the Monthly Payment Date. Undersigned will maintain sufficient funds in Undersigned's checking account to cover the full amount of the payment required on any Monthly Payment Date.

The minimum required monthly payment will be determined at the close of each billing cycle by one of the payment plans described below. Bank reserves the right to change the payment plans described below, provided that Bank gives the Undersigned any notice required by law. Undersigned has chosen the payment plan checked.

☐ Variable Payment Plan: To determine the minimum required monthly payment amount, Bank will first multiply the outstanding principal amount of borrowings hereunder by .03 to find the minimum principal payment. To that amount, Bank will add any interest charges, late charges and any other fees (and credit life insurance premiums, if applicable) accrued during the billing cycle to determine the minimum required monthly payment. The minimum required monthly payment shall not be more than the total amount that Undersigned owes the Bank.

☐ Term Variable Payment Plan: To determine the minimum required monthly payment, Bank will first divide Undersigned's total outstanding principal amount of borrowings hereunder (calculated as of the most recent borrowing) by 60, to find the minimum principal payment. To that amount, Bank will add any finance charges, late charges and any other fees (and credit life insurance premiums, if applicable) accrued during the billing cycle to determine the minimum required monthly payment. The minimum required monthly payment shall not be less than \$30.00; however, the minimum required monthly payment shall not be more than the total amount that Undersigned owes the Bank.

☒ Interest Only Payment Plan: The minimum required monthly payment amount will equal the total finance charges, late charges and any other fees (and credit life insurance premiums, if applicable) accrued during the billing cycle. If checked, ☐ it shall be a requirement of this payment option that on an annual basis principal shall remain at a zero balance for a period of 30 continuous days. Any past due amount will also be added to the minimum required monthly payment. Bank will determine the method by which payments are applied.

Undersigned agrees that Bank shall have, and there are hereby created in favor of Bank, the following security interests:

(CHECK APPLICABLE BOXES)

☐ (a) A Uniform Commercial Code security interest in all of Undersigned's equipment, whether now owned or hereafter acquired, wherever located, including machinery, motor vehicles, furniture, and fixtures; together with all attachments, accessories, and parts attached thereto, installed herein, or kept, used, or intended to be used in connection therewith, as well as all substitutions therefor, renewals or replacements thereof, and improvements or additions thereto; and the proceeds (cash and non-cash) of all the foregoing.

☐ (b) A Uniform Commercial Code security interest in the collateral described below, together with all attachments, accessories, and parts used or intended to be used with the described property, whether now or hereafter installed herein or affixed thereto, as well as all substitutions therefor and replacements thereof, and the proceeds (cash and non-cash) of all the foregoing: (SEE DETAILED DESCRIPTION OF COLLATERAL ATTACHED HERETO.)

☐ (c) A Uniform Commercial Code security interest in all inventory of goods, now owned or hereafter acquired and held for sale or lease or to be furnished under contracts of service, and all raw materials work in process, or materials used or consumed in the conduct of Undersigned's business; together with all attachments, accessories, and parts, attached thereto, installed herein, or kept, used, or intended to be used in connection therewith, as well as all substitutions therefor, renewals or replacements thereof, and improvements or additions thereto; and the proceeds (cash and non-cash) of all the foregoing.

☐ (d) A Uniform Commercial Code security interest in all of Undersigned's rights to the payment of money however evidenced or arising, including each existing and future account, contract right, general intangible, instrument, and document as those terms are defined by the Pennsylvania Uniform Commercial Code, with all trademarks, copyrights, good will, names, patents, licenses, inventions, choses in action, and goods giving rise to Undersigned's right to the payment of money; including such goods in which Undersigned has retained a security interest or which have been retained, returned or repossessed all documents of title and warehouse receipts, and all book entries, records, and files relating to the foregoing; and the proceeds (cash and non-cash) of all the foregoing and any insurance policies relating thereto.

☐ (e) A Uniform Commercial Code security interest in the securities described below, together with all cash, stock, or other dividends paid upon such securities; all securities received in addition to or in exchange for such securities; all subscription rights incident to such securities; any other distribution in respect of such securities in any form; and the proceeds (cash and non-cash) of the foregoing: (SEE DETAILED DESCRIPTION OF COLLATERAL ATTACHED HERETO.)

☐ (f) This Business Line of Credit Agreement is secured by a mortgage dated _____, 19 _____ from _____ as Mortgagor, to Integro Bank/ _____ as Mortgagee, on certain _____ County _____ State, as more fully set forth therein.

☐ (g) Other:

☐ A security interest in all deposit accounts, credits, securities, monies, or other property of Undersigned which may at any time be in the possession of, delivered to, or owed by Bank, including any proceeds or return of unearned premiums of insurance, and the proceeds of all the foregoing property.

Said security interests shall secure (i) the payment of all amounts which are due or may become due under this Agreement, (ii) all costs and expenses incurred by Bank in the collection of the same, (iii) all future advances made by Bank for taxes levies, insurance, and repairs to (or maintenance of the above collateral), and (iv) any other indebtedness, liability, or obligation of Undersigned to Bank, past, present, or future direct or indirect, absolute or contingent, individual, joint, or several, now due or to become due and whether owed as drawer, maker, endorser, guarantor, surety, or otherwise, in addition to all items given to Bank pursuant to this Agreement. Bank shall have all the rights and remedies of a secured party under the Pennsylvania Uniform Commercial Code, except to the extent that such law does not apply to certain types of transactions or collateral, in which case applicable law shall govern. Undersigned shall bear the risk of loss of, damage to, or destruction of the collateral.

Collateral securing other obligations of Undersigned to Bank may also secure amounts due under this Agreement.

THE UNDERSIGNED HEREBY EMPOWERS THE PROTHONOTARY OR ANY ATTORNEY OF ANY COURT OF RECORD WITHIN THE UNITED STATES OR ELSEWHERE TO APPEAR FOR THE UNDERSIGNED AND TO CONFESS JUDGMENT AS OFTEN AS NECESSARY AGAINST THE UNDERSIGNED IN FAVOR OF THE HOLDER HEREOF, AS OF ANY TERM, FOR THE ABOVE SUM PLUS INTEREST DUE UNDER THE TERMS HEREOF TOGETHER WITH COSTS OF SUIT AND A ATTORNEY'S FEE OF 20% OR \$500, WHICHEVER IS GREATER, WITH RELEASE OF ALL ERRORS. THE UNDERSIGNED WAIVES ALL LAWS EXEMPTING REAL OR PERSONAL PROPERTY FROM EXECUTION.

Undersigned will provide financial information a other relevant information to Bank on an annual basis or upon Bank's request, including tax returns and/or without limitation balance sheets and income statements in form and content satisfactory to Bank. Failure to comply may result in termination of this credit line.

This Agreement shall not become effective until accepted and approved by Bank in the space provided below.

THIS AGREEMENT IS SUBJECT TO THE ADDITIONAL PROVISIONS ON THE REVERSE SIDE HEREOF, THE SAME BEING INCORPORATED HEREIN AND MADE A PART HEREOF.

WITNESS the due execution hereof.

(Individual)
(SEAL)

(Residence Address)

(Individual)
(SEAL)

(Residence Address)

ATTEST/WITNESS:

(Name and Title)

(Residence Address)

(Corporate Seal)

Accepted and approved November 24 19 95
INTEGRA BANK
By Stan Kaizer
Stan Kaizer

Business Address

D D Legs

(Signature of Other Party)

By Debra A. Klebach
Debra A. Klebach, Proprietor
Box 022 DuBois Mall, DuBois, PA 15801
Business Address

Exhibit
"1"

VERIFICATION

The undersigned does hereby verify subject to the penalties of 18 PA. C.S. 4904 relating to unsworn falsifications to authorities, that he/she is Sara Husman
(NAME)

Representative of National City plaintiff herein, that
(TITLE) (COMPANY)

he/she is duly authorized to make this verification, and that the facts set forth in the foregoing Complaint are true and correct to the best of his/her knowledge, information and belief.

Sara Husman
(SIGNATURE)

Law Offices
DAVID P. KING
P.O. Box 1016
23 Beaver Drive
DuBois, PA 15801

David P. King, Esq.

Phone (814) 371-3760
Telecopier (814) 371-4874

January 31, 2005

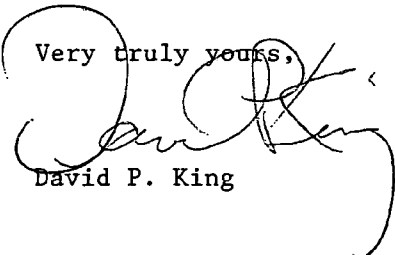
William T. Molczan, Esquire
Weltman, Weinberg & Reis Co., L.P.A.
2718 Koppers Building
436 Seventh Avenue
Pittsburgh, PA 15219

Re: National City Bank vs. Debra A. Klebacha
D/B/A D D Legs
No. 04-1525-CD

Dear Mr. Molczan:

Please find enclosed a certified copy of the Response that we
have filed to your Complaint against Debra A. Klebacha.

Very truly yours,


David P. King

DPK:pp

Enclosure

EXHIBIT

B

03878045
JWW

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

NATIONAL CITY BANK,
Plaintiff

vs.

DEBRA A. KLEBACHA D/B/A
D D LEGS,
Defendant

NO. 04-1525-C.D.

Type of Case: Civil

Type of Pleading: Answer with New
Matter

Filed on behalf of: Defendant

Counsel of Record for this Party:
David P. King, Esquire
23 Beaver Drive
P. O. Box 1016
DuBois, PA 15801
(814) 371-3760

Supreme Court No. 22980

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

JAN 28 2005

Attest.

Debra A. King
Debra A. King
Clerk of Courts

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

NATIONAL CITY BANK,	:	
Plaintiff	:	
	:	
vs.	:	No. 04-1525-C.D.
	:	
DEBRA A. KLEBACHA D/B/A	:	
D D LEGS,	:	
Defendant	:	

NOTICE

You have been sued in Court. If you wish to defend against the claims set forth in the following pages, you must take action within twenty (20) days after this Answer with New Matter and Notice are served, by entering a written appearance personally or by Attorney and filing in writing with the Court your defenses or objections to the claims set forth against you. You are warned that if you fail to do so the case may proceed without you and a judgment may be entered against you by the Court without further notice for any money claimed in the Answer with New Matter or for any other claim or relief requested by the Defendant. You may lose money or property or other rights important to you.

YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO
NOT HAVE A LAWYER OR CANNOT AFFORD ONE, GO TO OR TELEPHONE
THE OFFICE SET FORTH BELOW TO FIND OUT WHERE YOU CAN GET LEGAL HELP.

David S. Meholick, Court Administrator
Clearfield County Courthouse
230 East Market Street, Suite 228
Clearfield, PA 16830
(814) 765-2641 Ext. 5982

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

NATIONAL CITY BANK,	:
Plaintiff	:
	:
vs.	: NO. 04-1525-C.D.
	:
DEBRA A. KLEBACHA D/B/A	:
D D LEGS,	:
Defendant	:

ANSWER

AND NOW, comes the Defendant, DEBRA A. KLEBACHA D/B/A D D LEGS, through her Attorney, David P. King, and files the following response to Plaintiff's Complaint as follows:

1. Admitted.
2. Admitted.
3. Admitted.
4. It is denied that the Defendant is indebted to the Plaintiff in the amount so stated, and strict proof of the same is required.
5. The averments in Plaintiff's Paragraph 5 are admitted as to default by the Defendant, but denied if the same infers that the amount alleged owed to the Plaintiff is as stated in Paragraph 4 above, and denied also for the reasons as set forth in the New Matter that appears hereafter.
6. The averments in Plaintiff's Paragraph 6 require no responsive pleading, as the agreement speaks for itself, and Plaintiff's allegation is a legal conclusion.
7. Defendant answers the averments in Plaintiff's Paragraph 7 in the same manner as her answer in Paragraph 6.

8. Defendant answers the averments in Plaintiff's Paragraph 8 in the same manner as set forth in her answer to Paragraphs 7 and 6 above mentioned.

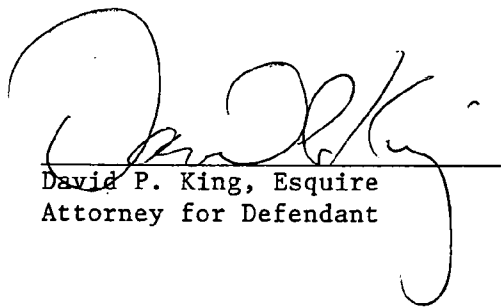
9. Defendant avers that the finance charge as calculated in Plaintiff's Paragraph 9 is inaccurate, inappropriate and otherwise denies that the same is owed in accordance therewith.

10. The averments in Plaintiff's Paragraph 10 are denied in that the provision for reasonable attorney's fees would be inapplicable in the present situation.

11. Defendant answers that attorney's fees of \$1,000.00 are not fair, reasonable, nor are they recoverable for all of the reasons as set forth above and hereafter.

12. It is admitted that the Defendant has not made payment, but denied in that the same infers that the Defendant is indebted to the Plaintiff for the reasons as set forth above and hereafter.

WHEREFORE, Defendant prays your Honorable Court to enter Judgment in her favor and against the Plaintiff.

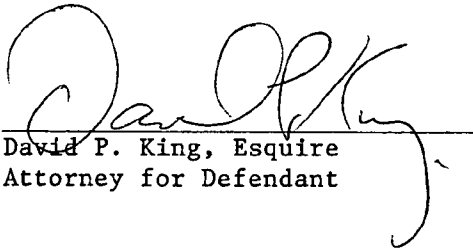


David P. King, Esquire
Attorney for Defendant

NEW MATTER

13. Defendant avers that notwithstanding the allegations of the Plaintiff, any debt alleged owed by the Defendant to the Plaintiff is not recoverable, because of the Statute of Limitations which would be a bar to recovery.

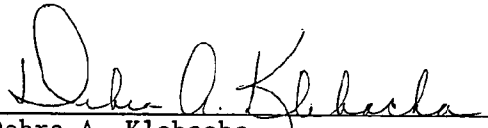
WHEREFORE, Defendant prays your Honorable Court to enter Judgment
in her favor and against the Plaintiff.



David P. King, Esquire
Attorney for Defendant

I verify that the statements made in this Answer and New Matter are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. §4904, relating to unsworn falsification to authorities.

Date: January 27, 2005


Debra A. Klebach
Defendant

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

NATIONAL CITY BANK,

Plaintiff

vs.

DEBRA A. KLEBACHA d/b/a D D LEGS,

Defendant

No. 04-1525 CD

REPLY TO NEW MATTER

FILED ON BEHALF OF
Plaintiff

COUNSEL OF RECORD OF
THIS PARTY:

JAMES C. WARMBRODT
PA I.D. #42524
Weltman, Weinberg & Reis Co., L.P.A.
2718 Koppers Building
436 7th Avenue
Pittsburgh, PA 15219
(412) 434-7955

WWR#03873645

EXHIBIT

C

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

NATIONAL CITY BANK,

Plaintiff

No. 04-1525 CD

vs.

DEBRA A. KLEBACHA d/b/a D D LEGS,

Defendant

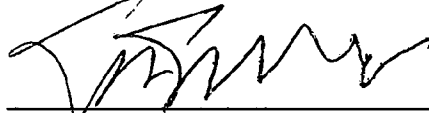
REPLY TO NEW MATTER

AND NOW, comes Plaintiff, National City Bank, by and through its counsel, WELTMAN, WEINBERG & REIS, CO., L.P.A., and files the within Reply to New Matter, averring in support thereof the following:

13. The averments contained in Paragraph 13 of Defendant's New Matter constitute conclusions of law to which no response is required.

WHEREFORE, Plaintiff demands judgment in its favor and against the Defendant in the amounts demanded in its Complaint.

WELTMAN, WEINBERG & REIS, CO., L.P.A.



JAMES C. WARMBRODT
PA I.D. #42524
Weltman, Weinberg & Reis Co., L.P.A.
2718 Koppers Building
436 7th Avenue
Pittsburgh, PA 15219
(412) 434-7955

VERIFICATION

The undersigned does hereby verify subject to the penalties of 18 Pa.C.S. Section 4904 relating to unsworn falsification to authorities, he is an attorney for the Plaintiff herein; makes this Verification based upon the facts as supplied to him by the Plaintiff and/or its agents and because the Plaintiff is outside the jurisdiction of the court and the Plaintiff's Verification cannot be obtained within the time allowed for filing of this Reply to New Matter and that the facts set forth in the foregoing Reply to New Matter are true and correct to the best of his knowledge, information and belief.

A handwritten signature in black ink, appearing to read 'J. Warmbrodt', is written over a horizontal line.

James C. Warmbrodt, Esquire
Attorney for Petitioner

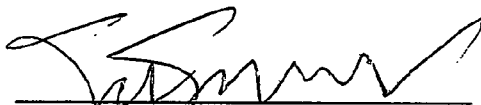
CERTIFICATE OF SERVICE

The undersigned hereby certifies that true and correct copies of the within Plaintiff's Reply to New Matter mailed to the following on this 7th day of February, 2005 by first class, U.S. Mail, postage pre-paid:

David P. King, Esquire
PO Box 1016
23 Beaver Drive
DuBois, PA 15801

Respectfully Submitted:

WELTMAN, WEINBERG & REIS CO., L.P.A.



James C. Warmbrodt, Esquire
Pa. I.D. #42524
Attorneys for Plaintiff
2718 Koppers Building
436 Seventh Avenue
Pittsburgh, PA 15219
(412) 434-7955

WELTMAN, WEINBERG & REIS Co., L.P.A.

ATTORNEYS AT LAW
2718 Koppers Building
436 Seventh Avenue
Pittsburgh, Pennsylvania 15219
412.434.7955
www.weltman.com

BURLINGTON, NJ
609.914.0437
CHICAGO, IL
847.940.9812
CINCINNATI, OH
513.723.2200
CLEVELAND, OH
216.685.1000
COLUMBUS, OH
614.228.7272
DETROIT, MI
248.362.6100
PHILADELPHIA, PA
215.599.1500

JAMES C. WARMBRODT

Attorney at Law
412.338.7113
Fax 412.338.7130
jwarmbrodt@weltman.com

March 16, 2005

David P. King, Esquire
PO Box 1016
23 Beaver Drive
DuBois, PA 15801

RE: National City Bank vs. Klebacha
No: 04-1525-CD
WWR # 03873645

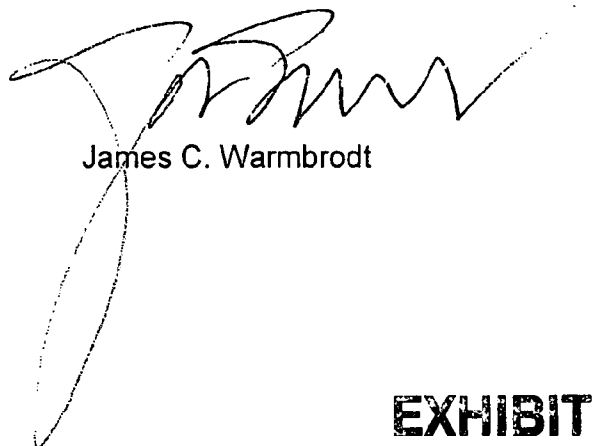
Dear Mr. King:

Per your request, I am forwarding copies of the statements on this account that I have received from my client. As you will notice, your clients made a payment on this account as recently as September 30, 2003. Consequently, it does not appear that your clients will prevail on a statute of limitations defense.

Please review this matter with your clients and get back to me with a reasonable offer to resolve this debt. If I do not hear from you shortly, I intend to proceed with formal discovery.

Thank you for your cooperation.

Very truly yours,



James C. Warmbrodt

JCW/hjk

Enclosure

EXHIBIT

D

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

NATIONAL CITY BANK

Plaintiff,

v.

DEBRA A. KLEBACHA,
D/B/A D D LEGS

Defendant.

NO.: 04-1525-CD

PLAINTIFF'S REQUEST FOR ADMISSIONS

Plaintiff demands that defendant answers and responds to the following Request for Admissions pursuant to Pa. Rules of Civil Procedure 4014.

You are requested to admit the truth of each of the statements of fact hereinafter stated. You are instructed that:

1. These requests are made under Pennsylvania Rules of Civil Procedure 4001, et seq., and each of these matters of which an admission is requested shall be deemed admitted unless your sworn statement in compliance with such Rules is timely made.

2. If you do not admit each of such statements, you must specifically deny each one not admitted or set forth in detail the reasons why you cannot truthfully either admit or deny each such matter.

3. Your answer, signed and properly verified, must be delivered to the undersigned attorney of record for the Plaintiff within **thirty (30)** days after delivery hereof.

4. If you fail or refuse to admit the truth of any such statement of fact and the Plaintiff thereafter proves the truth thereof, you may be required to pay the reasonable expenses incurred in making such proof, including attorneys' fees, witness expenses, etc.

5. If, in response to any of the following statements of fact, it is your position that the statement is true in part or as to some items, but not true in full or as to all items, then answer separately as to each part or item.

6. If you have been sued in more than one capacity or if your answers would be different if answered in any different capacity, such as partner, agent, corporate officer or director or the like, then you are requested to answer separately in each such capacity. Failure to do so constitutes an admission in any such capacity.

7. In these Requests for Admissions:

A. The word "person(s)" means all entities, and, without limiting the generality of the foregoing, includes natural persons, joint owners, associations, companies, partnerships, joint ventures, trusts, and estates;

EXHIBIT

E

B. The word "document(s)" means all written, printed, recorded, graphic, or photographic matter, or, sound reproductions, however produced or reproduced, pertaining to any manner to the subject matter indicated;

C. The words "identity", "identify", "identification", when used with respect to a person(s) means to state the full name and present or last known address and business address of such person(s) and, if an actual person, his present or last known job title, and the name and address of his present or last known employers;

D. The words "identity", "identify" "identification", when used with respect to a date, subject matter, name(s) or person(s) that wrote, signed initialed, dictated or otherwise participated in the creation of the same, the name(s) of the addressee or addressees if any and the name(s) and address(es) of each person who have possession, custody, and control of said document(s). If any such document was, but is no longer in your possession, custody, or control, or in existence, state the date and manner of its disposition; and

E. The word "identify", when used with respect to an act (including an alleged offense), occurrence, statement, or conduct (hereinafter collectively called "act"), means to (1) describe the substance of the event or events constituting such an act, and to state the date when such act occurred; (2) identify each and every person(s) participating in such an act; (3) identify all other person(s) (if any) present when such act occurred; (4) state whether any minutes, notes, memoranda, or other record of such act was made; (5) state whether such record now exists; and (6) identify the person(s) presently having possession, custody or control of such record.

8. Unless otherwise indicated, all Requests herein relate to those certain events, persons, and period of time more fully described in the pleading in this case.

9. These requests are of a continuous nature.

These Requests for Production of Documents shall be deemed continuing so as to require supplemental answers and documents if any information of documents are acquired subsequent to the filing of responses hereto, which information or documents would have been included in the answers and documents produced had it been known or available at the time the answers and the documents provided pursuant hereto were produced. Defendants shall supply such information and documents by supplemental answers and production of documents as soon as such information becomes known or available and in all events, prior to trial of this action.

If objection is made to any requests for production of documents, it is demanded that the requests for which there is no objection be answered and furnished within the aforesaid period.

All documents identified in response hereto shall be organized and labeled to correspond with the request to which it pertains. For all documents produced, list the individual and his or her job title and department from whose files it was produced and the current custodian of said document.

If a document called for is believed to exist or is known to exist, but is in the possession, custody or control of another person or party, the existence of the document, the identity of the possessor, custodian and one in control of such documents shall be provided along with any

applicable common description or citation utilized by the publisher, possessor, custodian or disseminator of such document.

If any document called for by this request is withheld on the basis of any claim of privilege or any similar claim, identify that document as follows: author; addressee; indicated or blind copies, date, subject matter; number of pages; attachments or appendices; all persons to whom distributed, shown or explained; present custodian; and nature of the privilege or similar claim asserted.

REQUEST FOR ADMISSIONS

REQUEST FOR ADMISSION NO. 1:

Attached hereto as Exhibit "1" is a true and correct copy of the Business Credit Application for account no. 4489709860011335 signed by the Defendant.

Admitted _____

Denied _____

If the answer to Request for Admissions No. 1 is "denied," then supply specific written documentation supporting the denial.

REQUEST FOR ADMISSION NO. 2:

Defendant is required to make monthly payments to Plaintiff on any outstanding balances owed on the subject revolving business line of credit account no. 4489709860011335.

Admitted _____

Denied _____

If the answer to Request for Admissions No. 2 is "denied," then supply specific written documentation supporting the denial.

REQUEST FOR ADMISSION NO. 4:

Attached hereto as Exhibit "2" are true and correct copies of the statements for account no. 4489709860011335 showing all charges and payments on this account from February 20, 1998 through March 24, 2004.

Admitted _____

Denied _____

If the answer to Request for Admissions No. 4 is "denied," then supply specific written documentation supporting the denial.

REQUEST FOR ADMISSION NO. 5:

Defendant has made no payment on the revolving business line of credit since September 30, 2003.

Admitted _____

Denied _____

If the answer to Request for Admissions No. 5 is "denied," then supply specific written documentation supporting the denial.

REQUEST FOR ADMISSION NO. 6:

Defendant has not submitted any written dispute as to any accounting inaccuracy concerning the amounts demanded by the Plaintiff on the revolving business line of credit account no. 4489709860011335.

Admitted _____

Denied _____

If the answer to the Request for Admissions No. 6 is "denied," then supply copies of specific written disputes as to any billing inaccuracies.

REQUEST FOR ADMISSION NO. 7:

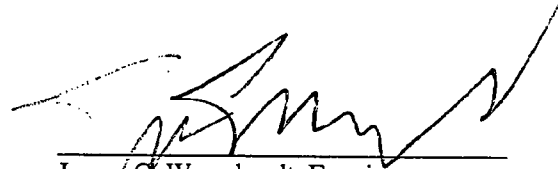
The balance owed by the Defendant to the Plaintiff on the subject revolving business line of credit account no. 4489709860011335 as of August 30, 2004 was \$5,656.94.

Admitted _____

Denied _____

If the answer to the Request for Admissions No. 7 is "denied," then supply copies of specific written disputes as to any billing inaccuracies.

**THIS IS AN ATTEMPT TO COLLECT A DEBT AND ANY INFORMATION
OBTAINED SHALL BE USED FOR THAT PURPOSE.**



James C. Warmbrodt, Esquire
Pa. I.D. #42524
Weltman, Weinberg & Reis Co., L.P.A.
2718 Koppers Bldg.
436 Seventh Avenue
Pittsburgh, PA 15219
(412) 434-7955
WWR: 03873645

Integra Bank

371-6772

BUSINESS CREDIT APPLICATION

Date 11-20-75Office DuBoisLoan Interviewer Stan Kieba

Firm Name

D. O. Lega

Type of Business

Address

Box 022 DuBois Mall DuBois, Pa. 15801Telephone
814-371-8713

Nature of Business

Retail sports-store Nascar

Years in Business

8 yrsPrincipals of Business
(Names)Debra A. KiebachaGeneral Information & History
(Include related business's)8 yrs. Sale of Nascar racing
equipment

Request #1

Amount

5000.00

Term

L.O.C. Integra Prime Plus 2 1/2%

Interest Rate

Purpose

Business purpose

Request #2

Amount

Term

Interest Rate

Purpose

Collateral

None

Collateral

Banking Relationship

Checking ☒

Where

Savings

Other

Are You co-maker or endorser
on any loan or contract? YesNo ☒

Do you rent? Yes

No

Monthly Rental

\$

Are there any unsatisfied judgements

against you? Yes

No ☒

Amount \$

To Whom

Owed?

Have you been declared bankrupt

in the last 10 years? Yes

No ☒

If Yes

Where

Outstanding Debts Include all types of Loan Contracts, Mortgages, Leases, & Credit Cards
(if necessary, attach separate sheet)

Creditor Name & Address	Date Open	Original Amount	Present Balance	Payment	Type of Debt	Collateral
<u>Integra</u>						

Any Credit References Not Listed Above

Everything that I have stated in this application is correct to the best of my knowledge. I understand that Integra Bank/North will retain this application whether or not it is approved. Integra Bank/North is authorized to check my credit and to supply credit information regarding my account upon request.

Debra A. Kiebacha
Applicant's Signature11-25
Date

EXHIBIT

[illegible][illegible]

	FISCAL	DATE
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TRADE REPORTS

OTHER INFORMATION

RECOMMENDATION

OK.

S. K.

OFFICER

DATE

DATE NOTICE SENT _____ DATE OF REVIEW _____ INITIALS OF C.O. _____

- ☐ Value or type of collateral not sufficient
- ☐ Lack of established earnings record
- ☐ Slow or past due in trade or loan payments
- ☐ Inadequate cash flow
- ☐ Unacceptable financial condition

COUNTEROFFER DATE _____

☐ ACCEPTED

THIS OFFER EXPIRES TEN (10) DAYS FROM THE ABOVE DATE.

☐ ACCEPTED

☐ REJECTED

Applicant's Signature _____ DATE: _____

☐ REJECTED Applicant's Signature _____

DISBURSEMENT OF FUNDS CHECK(S) _____ DEPOSIT ACCOUNT # _____

1040

Department of the Treasury - Internal Revenue Service
U.S. Individual Income Tax Return

1994

(99) IRS use only - Do not write or staple in this space.

For the year Jan 1 - Dec 31, 1994, or other tax year beginning

1994, ending

19

OMB No.
1545-0047

Label

Use the
IRS label.
Otherwise,
please print
or type.

Your first name Garv L Klebacha	MI L	Last name Klebacha	Your Social Security No. 208-42-8413
If a joint return, spouse's first name DEBRA Klebacha	MI L	Last name Klebacha	Spouse's Social Security No. 182-44-1035
Home address (number and street). If you have a P.O. box, see instructions. T.L. BOX 283			Apartment no.
City, town or post office. If you have a foreign address, see instructions. DUBOIS, PA 15801			State ZIP Code PA 15801
Do you want \$3 to go to this fund? X			Yes No X
If a joint return, does your spouse want \$3 to go to this fund? X			Yes No X

Presidential
Election
Campaign

Filing Status

1	<input type="checkbox"/> Single
2	<input checked="" type="checkbox"/> Married filing joint return (even if only one had income)
3	<input type="checkbox"/> Married filing separate rtn. Enter spouse's SSN above & full name here.
4	<input type="checkbox"/> Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here.
5	<input type="checkbox"/> Qualifying widow(er) with dependent child (year spouse died = 19).

Check only
one box.

Exemptions

6a	<input checked="" type="checkbox"/> Yourself. If your parent (or someone else) can claim you as a dependent on his or her tax return, do not check box 6a. But be sure to check the box on line 33b on pg 2.	No. of boxes checked on 6a and 6b 2
b	<input checked="" type="checkbox"/> Spouse	
c Dependents:		
(1) Name (first, initial, and last name)	(2) Ch. II under age 1	(3) If age 1 or older, dependent's social security number
JESSICA A. KLEBACHA		196-62-6116
		DAUGHTER
		12
No. of your children on 6c who: * lived with you 1 * didn't live with you due to divorce or separation Dependents on 6c not entered above		
d If your child didn't live with you but is claimed as your dependent under a pre-1985 agreement, check here <input type="checkbox"/>		
e Total number of exemptions claimed 3		

If more than
5 dependents,
see instrs

Income

Attach
Copy B of
your Forms
W-2, W-2G, &
1099-R here.If you did
not get a
W-2, see
instructions.Enclose
but do not
attach any
payment
with your
return.

7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	
8a	Taxable interest income. Attach Schedule B if over \$400.	8a	
b	Tax-exempt interest. Don't include on line 8a.	8b	
9	Dividend income. Attach Schedule B if over \$400.	9	
10	Taxable refunds, credits, or offsets of state and local income taxes	10	
11	Alimony received	11	
12	Business income or (loss). Attach Schedule C or C-EZ	12	6,595.
13	Capital gain or (loss). If required, Attach Schedule D	13	
14	Other gains or (losses). Attach Form 4797	14	
15a	Total IRA distributions	15a	
b	Taxable amount	15b	0.
16a	Total pensions & annuities	16a	
b	Taxable amount	16b	0.
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Sch E	17	5,957.
18	Farm income or (loss). Attach Schedule F	18	
19	Unemployment compensation	19	
20a	Social security benefits	20a	
b	Taxable amount	20b	
21	Other income	21	
22	Add the amounts in the far right column for lines 7 - 21. This is your total income.	22	12,552.
23a	Your IRA deduction	23a	
b	Spouse's IRA deduction	23b	
24	Moving expenses. Attach Form 3903 or 3903-F	24	
25	One-half of self-employment tax	25	888.
26	Self-employed health insurance deduction	26	
27	Keogh retirement plan and self-employed SEP deduction	27	
28	Penalty on early withdrawal of savings	28	
29	Alimony paid. Recipient's SSN	29	
30	Add lines 23a through 29. These are your total adjustments.	30	888.

Adjustments
to IncomeCaution: See
instructions.Adjusted
Gross Income

31	Subtract line 30 from line 22. This is your adjusted gross income. If less than \$25,000 and a child lived with you (less than \$13,000 if a child didn't live with you), see "Earned Income Credit" in instructions.	31	11,664.
----	---	----	----------------

D161

Tax
Computation

32	Amount from line 31 (adjusted gross income)	32	11,664
33 a	Check if: <input type="checkbox"/> You were 65/older, <input type="checkbox"/> Blind; <input type="checkbox"/> Spouse was 65/older, <input type="checkbox"/> Blind	33 a	
	Add the number of boxes checked above and enter the total here	33 b	
	b If your parent (or someone else) can claim you as a dependent, check here	33 b	
	c If you are married filing separately and your spouse itemizes deductions or you are a dual-status alien, see instructions and check here	33 c	
34	Enter the larger of your: Itemized deductions from Schedule A, line 29, or Standard ded shown below for your filing status. But if you checked any box on line 33a or b, see instructions to find your standard ded. If you checked box 33c, your standard deduction is zero. • Single - \$3,800 • Head of household - \$5,600 • Married filing jointly or Qualifying widow(er) - \$6,350 • Married filing separately - \$3,175	34	6,350
35	Subtract line 34 from line 32	35	5,314
36	If line 32 is \$83,850 or less, multiply \$2,450 by the total no. of exemptions claimed on line 6e. If line 32 is over \$83,850, see the instructions for the amount to enter	36	7,350
37	Taxable income. Subtract line 36 from line 35. If line 36 is more than line 35, enter -0-	37	0
38	Tax. Check if from: a <input checked="" type="checkbox"/> Tax Table, b <input type="checkbox"/> Tax Rate Schedules, c <input type="checkbox"/> Capital Gain Tax Worksheet, or, d <input type="checkbox"/> Form 8615, Amount from Form(s) 8814	38	0
39	Additional taxes. Check if from: a <input type="checkbox"/> Form 4970, b <input type="checkbox"/> Form 4972	39	0
40	Add lines 38 and 39	40	0
41	Credit for child and dep care exp. Attach Form 2441	41	
42	Credit for the elderly or the disabled. Attach Sch R	42	
43	Foreign tax credit. Attach Form 1116	43	
44	Other credits. Check if from: a <input type="checkbox"/> Form 3800, b <input type="checkbox"/> Form 8396, c <input type="checkbox"/> Form 8801, d <input type="checkbox"/> Form (spec)	44	
45	Add lines 41 through 44	45	
46	Subtract line 45 from line 40. If line 45 is more than line 40, enter -0-	46	0
47	Self-employment tax. Attach Schedule SE	47	1,774
48	Alternative minimum tax. Attach Form 6251	48	
49	Recapture taxes. Check if from: a <input type="checkbox"/> Form 4255, b <input type="checkbox"/> Form 8611, c <input type="checkbox"/> Form 8828	49	
50	SS and Medicare tax on tip income not reported to employer. Attach Form 4137	50	
51	Tax on qualified retirement plans, including IRAs. If required, att Frm 5329	51	
52	Advance earned income credit payments from Form W-2	52	
53	Add line 46 - 52. This is your total tax	53	1,774
54	Federal income tax withheld. If any is from Form(s) 1099, check	54	
55	1994 estimated tax payments and amount applied from 1993 return	55	
56	Earned income credit. If required, att Sch EIC. Nontaxable earned income: amount and type	56	1,930
57	Amount paid with Form 4868 (extension request)	57	
58	Excess social security and RRTA tax withheld	58	
59	Other payments. Check if from: a <input type="checkbox"/> Form 2439, b <input type="checkbox"/> Form 4136	59	
60	Add lines 54 - 59. These are your total payments	60	1,930
61	If line 60 is more than line 53, subtract line 53 from line 60. This is the amount you overpaid	61	156
62	Amount of line 61 you want Refunded to You	62	156
63	Amt of line 61 you want Applied to Your 1995 Est Tax	63	
64	If line 53 is more than line 60, subtract line 60 from line 53. This is the Amount You Owe	64	
65	Estimated tax penalty. Also include on line 64	65	

If you want the IRS to figure your tax, see instructions.

Credits

Other
Taxes

Payments

Attach Forms W-2, W-2G, and 1099-R on page 1.

Refund or
Amount You
OweSign
Here

Keep a copy of this return for your records.

Paid
Preparer's
Use Only

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation
Spouse's signature, if a joint return, BOTH must sign.	Date	Spouse's occupation
Preparer's signature	Date	Preparer's occupation
Firm's name (or your, if self-employed) and address	Check if self-employed <input checked="" type="checkbox"/>	Preparer's Social Security No.
	EM	
	ZIP Code	

Schedule C
(Form 1040)Profit or Loss From Business
(Sole Proprietorship)

OMB No. 1545-0074

1994

09

Department of the Treasury
Internal Revenue Service (99)Partnerships, joint ventures, etc., must file Form 1065.
Attach to Form 1040 or Form 1041. See instructions for Schedule C (Form 1040).

Name of proprietor

DEBRA Klebacha

Social Security Number (SSN)

182-44-1035

A Principal business or profession, including product or service

SALES, NOVELTY ITEMS

B Enter principal business code

4603

C Business name. If no separate business name, leave blank.

D&D LEGS IMPORTS

D Employer ID no. (EIN), if any

E Business address (include suite or room no.)
City, town or post office, state, & ZIP codeDUBOIS MALL
DUBOIS, PA. 15801F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) _____G Method(s) used to value closing inventory: (1) ☒ Cost (2) ☐ Lower of cost or market (3) ☐ Other (attach explanation) (4) ☐ Does not apply (if checked, skip line H)

Yes No

H Was there any change in determining quantities, costs, or valuations between opening and closing inventory?
If "Yes," attach explanation

I Did you "materially participate" in the operation of this business during 1994? If "No," see instructions for limitations on losses.

X

J If you started or acquired this business during 1994, check here.

Part I Income

1	Gross receipts or sales. Caution: If this income was reported to you on Form W-2 and the 'Statutory employee' box on that form was checked, see the instructions and check here	1	128,352.
2	Returns and allowances	2	
3	Subtract line 2 from line 1	3	128,352.
4	Cost of goods sold (from line 40 on page 2)	4	92,996.
5	Gross profit. Subtract line 4 from line 3	5	35,356.
6	Other income, including federal and state gasoline or fuel tax credit or refund	6	
7	Gross income. Add lines 5 and 6	7	35,356.

Part II Expenses. Enter expenses for business use of your home only on line 30.

8	Advertising	8	1,100.	19	Pension and profit-sharing plans	19	
9	Bad debts from sales or services	9		20	Rent or lease:		
10	Car and truck expenses	10	2,896.	20a	Vehicles, machinery, and equipment	20a	
11	Commissions and fees	11		20b	Other business property	20b	14,400.
12	Depreciation	12		21	Repairs and maintenance	21	1,500.
13	Depreciation and section 179 expense deduction (not included in Part III)	13	1,372.	22	Supplies (not included in Part III)	22	958.
14	Employee benefit programs (other than on line 19)	14		23	Taxes and licenses	23	249.
15	Insurance (other than health)	15		24	Travel, meals, and entertainment:		
16	Interest:			24a	Travel	24a	
16a	Mortgage (paid to banks, etc.)	16a		24b	Meals and entertainment	24b	
16b	Other	16b	36.	24c	Enter 50% of line 24b subject to limitations	24c	
17	Legal and professional services	17		24d	Subtract line 24c from line 24b	24d	
18	Office expense	18		25	Utilities	25	2,726.
28	Total expenses before expenses for business use of home. Add lines 8 through 27 in columns	28		26	Wages (less employment credits)	26	3,324.
29	Tentative profit (loss). Subtract line 28 from line 7	29		27	Other expenses (from line 46 on page 2)	27	200.
30	Expenses for business use of your home. Attach Form 8829	30					
31	Net profit or (loss). Subtract line 30 from line 29.	31					

• If a profit, enter on Form 1040, line 12, and also on Schedule SE, line 2 (statutory employees, see instructions). Fiduciaries, enter on Form 1041, line 3

• If a loss, you must go on to line 32.

32 If you have a loss, check the box that describes your investment in this activity.

• If you checked 32a, enter the loss on Form 1040, line 12, and also on Schedule SE, line 2 (statutory employees, see instructions). Fiduciaries, enter on Form 1041, line 3.

• If you checked 32b, you must attach Form 6198.

32a ☐ All investment is at risk.32b ☐ Some investment is not at risk.

D181 For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule C (Form 1040) 1994

FD-20112 10/21/94

182-44-1035 Page 2

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 10 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file.

42 Of the total number of miles you drove your vehicle during 1994, enter the number of miles you used your vehicle for:

a Business 9,987. b Commuting 2,600. c Other 0.

44 Was your vehicle available for use during off-duty hours? ☒ Yes ☐ No

Part 1	Other	Yes	No
		X	

Part V **Other Expenses.** List below business expenses not included on lines 8 - 26 or line 30.

DUES	200
------	-----

COPY

46	Total other expenses. Enter here and on page 1, line 27.	46	200
----	--	----	-----

Schedule E (Form 1040) 1994

13

Page 2

(Form(s) shown on return. Do not enter name and social security number if shown on page 1.)

Gary L & DEBRA Klebacha

Your Social Security Number

208-42-8413

Note: If you report amounts from farming or fishing on Schedule E, you must enter your gross income from those activities on line 41 below. Real estate professionals must complete line 42 below.

Part III Income or Loss from Partnerships and S Corporations

Note: If you report a loss from an at-risk activity, you must check either column (e) or (f) of line 27 to describe your investment in the activity. See instructions. If you check column (f), you must attach Form 6198.

27	(a) Name	(b) Enter P for partnership; S for S Corporation	(c) Check if foreign partnership	(d) Employer identification number	Investment at Risk? (e) All is at risk (f) Some is not at risk
A	K&D FOODS	P		25-1694633	X
B	P&K ENTERPRISES	P		25-1694632	X
C	P&K ENTERPRISES	P		25-1694632	X
D	K&D FOODS	P		25-1694633	X
E					

Passive Income and Loss		Nonpassive Income and Loss	
(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 expense deduction from Form 4592
A		1,112	
B			
C			
D		1,112	
E			
28 a Totals			
b Totals		2,224	
29 Add columns (h) and (k) of line 28a			29
30 Add columns (g), (i), and (j) of line 28b			30
31 Total partnership and S corporation income or (loss). Combine lines 29 and 30. Enter the result here and include in the total on line 40 below			31

Part III Income or Loss from Estates and Trusts

32	(a) Name	(b) Employer identification number
A		
B		

Passive Income and Loss		Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A			
B			
33 a Totals			
b Totals			
34 Add columns (d) and (f) of line 33a			34
35 Add columns (c) and (e) of line 33b			35
36 Total estate and trust income or (loss). Combine lines 34 and 35. Enter the result here and include in the total on line 40 below			36

Part IV Income or Loss from Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

37	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
38	Combine columns (d) and (e) only. Enter the result here and include in the total on line 40 below				38

Part V Summary

39	Net farm rental income or (loss) from Form 4835. Also, complete line 41 below	39	
40	Total income or (loss). Combine lines 25, 31, 36, 38, and 39. Enter the result here and on Form 1040, line 17	40	5,957
41	Reconciliation of Farming and Fishing Income: Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), line 15b; Schedule K-1 (Form 1120S), line 23; and Schedule K-1 (Form 1041), line 13	41	
42	Reconciliation for Real Estate Professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040 from all rental real estate activities in which you materially participated under the passive activity loss rules	42	

Schedule SE
(Form 1040)

Self-Employment Tax

OMB No. 1545-0074

1994

17

Department of the Treasury
Internal Revenue Service (99)

See instructions for Schedule SE (Form 1040).
Attach to Form 1040.

Name of person with self-employment income (as shown on Form 1040)

Garv L Klebacha

Social security number of person
with self-employment income

208-42-8413

Who Must File Schedule SE

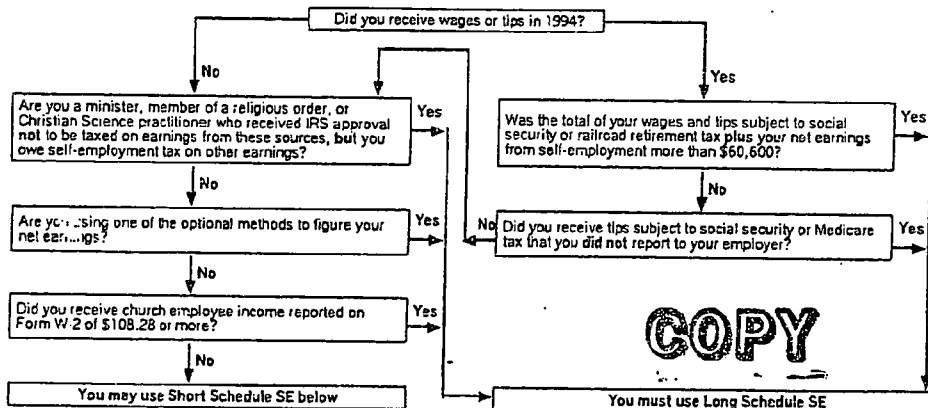
You must file Schedule SE if:

- You had net earnings from self-employment from other than church employee income (line 4 of Short Schedule SE or line 4c of Long Schedule SE) of \$400 or more, or
- You had church employee income of \$108.28 or more. Income from services you performed as a minister or a member of a religious order is not church employee income.

Note: Even if you have a loss or a small amount of income from self-employment, it may be to your benefit to file Schedule SE and use either "optional method" in Part II of Long Schedule SE.

Exception: If your only self-employment income was from earnings as a minister, member of a religious order, or Christian Science practitioner, and you filed Form 4361 and received IRS approval not to be taxed on those earnings, do not file Schedule SE. Instead, write "Exempt-Form 4361" on Form 1040, line 47.

May I use Short Schedule SE or MUST I use Long Schedule SE?



Section A - Short Schedule SE. Caution: Read above to see if you can use Short Schedule SE.

1	Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), line 15a.	1	0.
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; and Schedule K-1 (Form 1065), line 15a (other than farming). Ministers and members of religious orders see instructions for amounts to report on this line. See instructions for other income to report.	2	2,979.
3	Combine lines 1 and 2.	3	2,979.
4	Net earnings from self-employment. Multiply line 3 by 92.35% (.9235). If loss less than \$400, do not file this schedule; you do not owe self-employment tax.	4	2,751.
5	Self-employment tax. If the amount on line 4 is: • \$60,600 or less, multiply line 4 by 15.3% (.153). Enter the result here and on Form 1040, line 47. • More than \$60,600, multiply line 4 by 2.9% (.029). Then, add \$7,514.40 to the result. Enter the total here and on Form 1040, line 47.	5	421.
6	Deduction for one-half of self-employment tax. Multiply line 5 by 50% (.5). Enter the result here and on Form 1040, line 25.	6	211.

D181 For Paperwork Reduction Act Notice, see Form 1040 Instructions.

Schedule SE (Form 1040) 1994

Name of person with self-employment income (as shown on Form 1040)

Gary L Klebacha

Social security number of person
with self-employment income

208-42-8413

Section B - Long Schedule SE

Part I Self-Employment Tax

Note: If your only income subject to self-employment tax is church employee income, skip lines 1 through 4b. Enter -0- on line 4c or more of other net earnings from self-employment, check here and continue with Part I.

A	If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I.	
1	Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), line 15a. Note: Skip this line if you use the farm optional method.	0.
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; and Schedule K-1 (Form 1065), line 15a (other than farming). Ministers and members of religious orders see instructions for amounts to report on this line. See instructions for other income to report. Note: Skip this line if you use the nonfarm optional method.	0.
3	Combine lines 1 and 2.	0.
4a	If line 3 is more than zero, multiply line 3 by 92.35% (.9235). Otherwise, enter amount from line 3.	0.
4b	If you elected one or both of the optional methods, enter the total of lines 15 and 17 here.	
4c	Combine lines 4a and 4b. If less than \$400, do not file this schedule; you do not owe self-employment tax. Exception: If less than \$400 and you had church employee income, enter -0- and continue.	0.
5a	Enter your church employee income from Form W-2. Caution: See the instructions for definition of church employee income.	
5b	Multiply line 5a by 92.35% (.9235). If less than \$100, enter -0-.	0.
6	Net earnings from self-employment. Add lines 4c and 5b.	0.
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 1994.	60,600.00
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation.	
8b	Unreported tips subject to social security tax (from Form 4137, line 9).	
8c	Add lines 8a and 8b.	
9	Subtract line 8c from line 7. If zero or less, enter -0- here and on line 10 and go to line 11.	0.
10	Multiply the smaller of line 6 or line 9 by 12.4% (.124).	0.
11	Multiply line 6 by 2.9% (.029).	0.
12	Self-employment tax. Add lines 10 and 11. Enter here and on Form 1040, line 47.	0.
13	Deduction for one-half of self-employment tax. Multiply line 12 by 50% (.5). Enter the result here and on Form 1040, line 25.	

Part II Optional Methods to Figure Net Earnings

Farm Optional Method. You may use this method only if:

- Your gross farm income(1) was not more than \$2,400, or
- Your gross farm income(1) was more than \$2,400 and your net farm profits(2) were less than

14	Maximum income for optional methods	1,600.00
15	Enter the smaller of: two-thirds (2/3) of gross farm income(1) (not less than zero) or \$1,600. Also, include this amount on line 4b above.	

Nonfarm Optional Method. You may use this method only if:

- Your net nonfarm profits(3) were less than \$1,733 and also less than 72.189% of your gross nonfarm income(4), and
 - You had net earnings from self-employment of at least \$400 in 2 of the prior 3 years.
- Caution: You may use this method no more than five times.

16	Subtract line 15 from line 14.	
17	Enter the smaller of: two-thirds (2/3) of gross nonfarm income(4) (not less than zero) or the amount on line 16. Also, include this amount on line 4b above.	

(1) From Schedule F, line 11, and Schedule K-1 (Form 1065), line 15b.

(2) From Schedule F, line 36, and Schedule K-1 (Form 1065), line 15a.

(3) From Schedule C, line 31; Schedule C-EZ, line 3; and Schedule K-1 (Form 1065), line 15a.

(4) From Schedule C, line 7; Schedule C-EZ, line 1; and Schedule K-1 (Form 1065), line 15c.

Schedule SE
(Form 1040)

Self-Employment Tax

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service (25)

See instructions for Schedule SE (Form 1040).
Attach to Form 1040.

1994

17

Name of person with self-employment income (as shown on Form 1040)

DEBRA Klebacha

Social security number of person
with self-employment income

182-44-1035

Who Must File Schedule SE

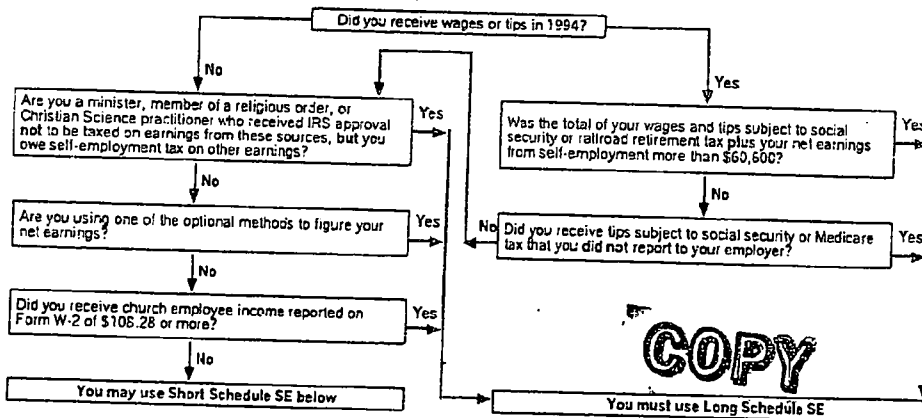
You must file Schedule SE if:

- You had net earnings from self-employment from other than church employee income (line 4 of Short Schedule SE or line 4c of Long Schedule SE) of \$400 or more, or
- You had church employee income of \$108.28 or more. Income from services you performed as a minister or a member of a religious order is not church employee income.

Note: Even if you have a loss or a small amount of income from self-employment, it may be to your benefit to file Schedule SE and use either "optional method" in Part II of Long Schedule SE.

Exception: If your only self-employment income was from earnings as a minister, member of a religious order, or Christian Science practitioner, and you filed Form 4361 and received IRS approval not to be taxed on those earnings, do not file Schedule SE. Instead, write "Exempt-Form 4361" on Form 1040, line 47.

May I use Short Schedule SE or MUST I use Long Schedule SE?



COPY

Section A - Short Schedule SE. Caution: Read above to see if you can use Short Schedule SE.

1	Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), line 15a.	1	0.
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; and Schedule K-1 (Form 1065), line 15a (other than farming). Ministers and members of religious orders see instructions for amounts to report on this line. See instructions for other income to report.	2	9,573.
3	Combine lines 1 and 2.	3	9,573.
4	Net earnings from self-employment. Multiply line 3 by 92.35% (.9235). If less than \$400, do not file this schedule; you do not owe self-employment tax.	4	8,841.
5	Self-employment tax. If the amount on line 4 is: • \$60,600 or less, multiply line 4 by 15.3% (.153). Enter the result here and on Form 1040, line 47. • More than \$60,600, multiply line 4 by 2.9% (.029). Then, add \$7,514.40 to the result. Enter the total here and on Form 1040, line 47.	5	1,353.
6	Deduction for one-half of self-employment tax. Multiply line 5 by 50% (.5). Enter the result here and on Form 1040, line 25.	6	677.

D181 For Paperwork Reduction Act Notice, see Form 1040 Instructions.

Schedule SE (Form 1040) 1994

Schedule SE (Form 1040) 1994

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Page 2

Name of person with self-employment income (as shown on Form 1040)

DEBRA Klebacha

Social security number of person
with self-employment income

82-44-1035

Section B - Long Schedule SE

Part I Self-Employment Tax

Note: If your only income subject to self-employment tax is church employee income, skip lines 1 through 4b. Enter -0- on line 4c and go to line 5a. Income from services you performed as a minister or a member of a religious order is not church employee income.

A If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I ☐

1	Net farm profit or (loss) from Schedule F, line 35, and farm partnerships, Schedule K-1 (Form 1065), line 15a. Note: Skip this line if you use the farm optional method.	1	0.
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; and Schedule K-1 (Form 1065), line 15a (other than farming). Ministers and members of religious orders see instructions for amounts to report on this line. See instructions for other income to report. Note: Skip this line if you use the nonfarm optional method.	2	0.
3	Combine lines 1 and 2.	3	0.
4a	If line 3 is more than zero, multiply line 3 by 92.35% (.9235). Otherwise, enter amount from line 3.	4a	0.
4b	If you elected one or both of the optional methods, enter the total of lines 15 and 17 here.	4b	0.
4c	Combine lines 4a and 4b. If less than \$400, do not file this schedule; you do not owe self-employment tax. Exception: If less than \$400 and you had church employee income, enter -0- and continue.	4c	0.
5a	Enter your church employee income from Form W-2. Caution: See the instructions for definition of church employee income.	5a	
5b	Multiply line 5a by 92.35% (.9235). If less than \$100, enter -0-.	5b	0.
6	Net earnings from self-employment. Add lines 4c and 5b.	6	0.
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 1994.	7	60,600.00
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation.	8a	
8b	Unreported tips subject to social security tax (from Form 4137, line 9).	8b	
8c	Add lines 8a and 8b.	8c	
9	Subtract line 8c from line 7. If zero or less, enter -0- here and on line 10 and go to line 11.	9	0.
10	Multiply the smaller of line 6 or line 9 by 12.4% (.124).	10	0.
11	Multiply line 6 by 2.9% (.029).	11	0.
12	Self-employment tax. Add lines 10 and 11. Enter here and on Form 1040, line 47.	12	0.
13	Deduction for one-half of self-employment tax. Multiply line 12 by 50% (.5). Enter the result here and on Form 1040, line 25.	13	

Part II Optional Methods to Figure Net Earnings

Farm Optional Method. You may use this method only if:

- Your gross farm income(1) was not more than \$2,400, or
- Your gross farm income(1) was more than \$2,400 and your net farm profits(2) were less than \$1,733.

14	Maximum income for optional methods	14	1,600.00
15	Enter the smaller of: two-thirds (2/3) of gross farm income(1) (not less than zero) or \$1,600. Also, include this amount on line 4b above.	15	

Nonfarm Optional Method. You may use this method only if:

- Your net nonfarm profits(3) were less than \$1,733 and also less than 72.189% of your gross nonfarm income(4), and
 - You had net earnings from self-employment of at least \$400 in 2 of the prior 3 years.
- Caution: You may use this method no more than five times.

16	Subtract line 15 from line 14.	16	
17	Enter the smaller of: two-thirds (2/3) of gross nonfarm income(4) (not less than zero) or the amount on line 16. Also, include this amount on line 4b above.	17	

(1) From Schedule F, line 11, and Schedule K-1 (Form 1065), line 15b.

(2) From Schedule F, line 36, and Schedule K-1 (Form 1065), line 15a.

(3) From Schedule C, line 31; Schedule C-EZ, line 3; and Schedule K-1 (Form 1065), line 15a.

(4) From Schedule C, line 7; Schedule C-EZ, line 1; and Schedule K-1 (Form 1065), line 15c.

Schedule EIC
(Form 1040A or 1040)

Department of the Treasury
Internal Revenue Service (99)
Name(s) shown on return

Earned Income Credit
(Qualifying Child Information)

▶ Attach to Form 1040A or 1040.

OMB No. 1545-0074

1994

43

Gary L & DEBRA Klebacha

Your Social Security Number
208-42-8413

Before You Begin ...

- Answer the questions in the 1040A or 1040 instructions to see if you can take this credit.
- If you can take the credit, fill in the worksheet in the 1040A or 1040 instructions to figure your credit. But if you want the IRS to figure it for you, see the 1040A or 1040 instructions.

Then, complete and attach Schedule EIC only if you have a qualifying child.

Information About Your Qualifying Child or Children

If you have more than two qualifying children, you only have to list two to get the maximum credit.

Caution: If you don't fill in all the lines that apply, it will take us longer to process your return and issue your refund.

	(a) Child 1	(b) Child 2
1 Child's name (first, initial, and last name)	JESSICA A. KLEBACHA	
2 Child's year of birth.	19	19
3 If child was born before 1976 and -		
a was a student under age 24 at the end of 1994, check the "Yes" box, or	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
b was permanently and totally disabled, check the "Yes" box	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
4 If child was born before 1994, enter the child's social security number	196-62-6116	
5 Child's relationship to you (for example, son, grandchild, etc).	DAUGHTER	
6 Number of months child lived with you in the U.S. in 1994	12 months	months



Do you want the earned income credit added to your take-home pay in 1995? To see if you qualify, get Form W-5 from your employer or by calling the IRS at 1-800-TAX-FORM (1-800-829-3676).

For Paperwork Reduction Act Notice, see Form 1040A or 1040 Instructions.

Schedule EIC (Form 1040A or 1040) 1994

Form 4562

Depreciation and Amortization
(Including Information on Listed Property)
▶ Attach this form to your return.

OMB No. 1545-0172

1994**67**Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on return

Gary L & DEBRA Klebacha

Business or activity to which this form relates

Identifying Number

208-42-8413

SCHEDULE C**Part I Election to Expense Certain Tangible Property (Section 179)**

(Note: If you have any listed property, complete Part V before you complete Part I.)

1	Maximum dollar limitation. (If an enterprise zone business, see instructions.)	1	\$17,500
2	Total cost of section 179 property placed in service during the tax year	2	760
3	Threshold cost of section 179 property before reduction in limitation	3	\$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. (If married filing separately, see instructions.)	5	17,500
6	(a) Description of property	(b) Cost	(c) Elected cost
DISPLAY CASES		400	400
FAX		360	360
7	Listed property. Enter amount from line 26	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	760
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	760
10	Carryover of disallowed deduction from 1993	10	
11	Taxable income limitation. Enter the smaller of taxable income (not less than zero) or line 5	11	11,664
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	760
13	Carryover of disallowed deduction to 1995. Add lines 9 and 10, less line 12	13	0

Note: Do not use Part II or Part III below for listed property (automobiles, certain other vehicles, cellular telephones, certain computers, or property used for entertainment, recreation, or amusement). Instead, use Part V for listed property.

Part II MACRS Depreciation for Assets Placed in Service Only During Your 1994 Tax Year
(Do Not Include Listed Property)

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
Section A - General Depreciation System (GDS)						
14 a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g Residential rental property			27.5 yrs	MM	S/L	
h Nonresidential real property			39 yrs	MM	S/L	
Section B - Alternative Depreciation System (ADS)						
15 a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part III Other Depreciation (Do Not Include Listed Property)

16	GDS and ADS deductions for assets placed in service in tax years beginning before 1994	16	612
17	Property subject to section 168(f)(1) election	17	
18	ACRS and other depreciation	18	

Part IV Summary

19	Listed property. Enter amount from line 25	19	0
20	Total. Add deductions on line 12, lines 14 and 15 in column (g), and lines 16 through 19. Enter here and on the appropriate lines of your return. (Partnerships and S corporations - see instructions)	20	1,372
21	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	21	

D181 For Paperwork Reduction Act Notice, see Instructions.

Form 4562 (1994)

FD-20812 12/22/94

Part V Listed Property - Automobiles, Certain Other Vehicles, Cellular Telephones, Certain Computers, and Property Used for Entertainment, Recreation, or Amusement

For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 22a, 22b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See instructions for limitations for automobiles.)

22a Do you have evidence to support the business/investment use claimed?										Yes	No	22b If "Yes," is the evidence written?		Yes	No
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost							

23 Property used more than 50% in a qualified business use:

24 Property used 50% or less in a qualified business use:

25 Add amounts in column (h). Enter the total here and on line 19, page 1. 25 0.

26 Add amounts in column (i). Enter the total here and on line 7, page 1. 26 0.

Section B - Information On Use of Vehicles - If you deduct expenses for vehicles:

- Always complete this section for vehicles used by a sole proprietor, partner, or other more than 5% owner, or related person.
- If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
	Yes	No	Yes	No	Yes	No
27 Total business/investment miles driven during the year (Do not include commuting miles)						
28 Total commuting miles driven during the year						
29 Total other personal (noncommuting) miles driven						
30 Total miles driven during the year. Add lines 27 through 29						
31 Was the vehicle available for personal use during off-duty hours?						
32 Was the vehicle used primarily by a more than 5% owner or related person?						
33 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B. Note: Section B must always be completed for vehicles used by sole proprietors, partners, or other more than 5% owners or related persons.

	Yes	No
34 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
35 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? (See instructions for vehicles used by corporate officers, directors, or 1% or more owners.)		
36 Do you treat all use of vehicles by employees as personal use?		
37 Do you provide more than five vehicles to your employees and retain the information received from your employees concerning the use of the vehicles?		
38 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 34, 35, 36, 37, or 38 is 'Yes,' you need not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Costo Section	(e) Amortization period or percentage	(f) Amortization for this year
39 Amortization of costs that begins during your 1994 tax year:					
40 Amortization of costs that began before 1954:					40
41 Total. Enter here and on 'Other Deductions' or 'Other Expenses' line of your return					41 0.

SCHEDULE K-1
(Form 1065)

Department of the Treasury
Internal Revenue Service

Partner's Share of Income, Credits, Deductions, etc.

See separate instructions.

OMB No. 1545-0099

For calendar year 1994 or tax year beginning

1994, and ending

1994

Partner's identifying number ▶ **208-42-8413**

Partnership's identifying number ▶ **25 : 1694632**

Partner's name, address, and ZIP code
Gary Klebacha
Treasure Lake Box 283
DuBois, PA 15801

Partnership's name, address, and ZIP code
P & K Enterprises
Route 255 & I-80
DuBois, PA 15801

A This partner is a ☒ general partner ☐ limited partner
☐ limited liability company member

B What type of entity is this partner? ▶ **Individual**

C Is this partner a ☒ domestic or a ☐ foreign partner?

D Enter partner's percentage of:
Profit sharing: (i) Before change or termination **50** % (ii) End of year **50** %
Loss sharing: **50** %
Ownership of capital: **50** %

E IRS Center where partnership filed return: **Philadelphia**

F Partner's share of liabilities (see instructions):

Nonrecourse: \$ **none**
Qualified nonrecourse financing: \$ **none**
Other: \$ **10130**

G Tax shelter registration number: **none**
H Check here if this partnership is a publicly traded partnership as defined in section 469(k)(2) ☐

I Check applicable boxes: (1) ☐ Final K-1 (2) ☐ Amended K-1

J Analysis of partner's capital account:

(a) Capital account at beginning of year	(b) Capital contributed during year	(c) Partner's share of lines 3, 4, and 7, Form 1065, Schedule M-2	(d) Withdrawals and distributions	(e) Capital account at end of year (combine columns (a) through (d))
(359)		4091	3739	(7)

(a) Distributive share item

(b) Amount

(c) 1040 filers enter the amount in column (b) on:

		amount in column (b) or (c)	
Income (Loss)	1 Ordinary income (loss) from trade or business activities	1	4091
	2 Net income (loss) from rental real estate activities	2	
	3 Net income (loss) from other rental activities	3	
	4 Portfolio income (loss):		
	a Interest	4a	
	b Dividends	4b	
	c Royalties	4c	
	d Net short-term capital gain (loss)	4d	
	e Net long-term capital gain (loss)	4e	
	f Other portfolio income (loss) (attach schedule)	4f	
	5 Guaranteed payments to partner	5	
6 Net gain (loss) under section 1231 (other than due to casualty or theft)	6		
7 Other income (loss) (attach schedule)	7		
Deductions	8 Charitable contributions (see instructions) (attach schedule)	8	
	9 Section 179 expense deduction	9	
	10 Deductions related to portfolio income (attach schedule)	10	
	11 Other deductions (attach schedule)	11	
Investment Interest	12a Interest expense on investment debts	12a	
	b (1) Investment income included on lines 4a, 4b, 4c, and 4f above (2) Investment expenses included on line 10 above	b(1) b(2)	
Credits	13a Credit for income tax withheld	13a	
	b Low-income housing credit:		
	(1) From section 42(j)(5) partnerships for property placed in service before 1990	b(1)	
	(2) Other than on line 13b(1) for property placed in service before 1990	b(2)	
	(3) From section 42(j)(5) partnerships for property placed in service after 1989	b(3)	
	(4) Other than on line 13b(3) for property placed in service after 1989	b(4)	
	c Qualified rehabilitation expenditures related to rental real estate activities (see instructions)	13c	
	d Credits (other than credits shown on lines 13b and 13c) related to rental real estate activities (see instructions)	13d	
	e Credits related to other rental activities (see instructions)	13e	
	14 Other credits (see instructions)	14	

See Panner's Instructions for Schedule K-1 (Form 1065).

Sch. B, Part I, line 1

Sch. D, line 5, col. (f) or (g)

Sch. D, line 13, col. (f) or (g)

Enter on applicable line of your return.

See Panner's Instructions for Schedule K-1 (Form 1065).

Enter on applicable line of your return.

Sch. A, line 15 or 16

See Panner's Instructions for Schedule K-1 (Form 1065).

Form 4952, line 1

See Panner's Instructions for Schedule K-1 (Form 1065).

See Panner's instructions for Schedule K-1 (Form 1065).

Form 5886, line 5

See Panner's Instructions for Schedule K-1 (Form 1065).

COPY

COPY

Sch. B, Part I, line 1
Sch. D, line 5, col. (f) or (g)
Sch. D, line 13, col. (f) or (g)
Enter on applicable line of your return.
See Partner's instructions for Schedule K-1 (Form 1065).
Enter on applicable line of your return.

Sch. A, line 15 or 16
See Partner's instructions for Schedule K-1 (Form 1065).

Form 4552, line 1
See Partner's instructions for Schedule K-1 (Form 1065).

See Partner's instructions for Schedule K-1 (Form 1065).

Form 3586, line 5

See Partner's instructions for Schedule K-1 (Form 1065).

(a) Distributions and Share Items		(b) Amount	(c) 1040 filers enter the amount in column (b) on:
Self-employment	15a Net earnings (loss) from self-employment	15a 4091	Sch. SE, Section A or B See Partner's instructions for Schedule K-1 (Form 1065).
	b Gross farming or fishing income	15b	
	c Gross nonfarm income	15c	
Adjustments and Tax Preference Items	16a Depreciation adjustment on property placed in service after 1986	16a	See Partner's instructions for Schedule K-1 (Form 1065) and instructions for Form 6251.
	b Adjusted gain or loss	16b	
	c Depletion (other than oil and gas)	16c	
	d (1) Gross income from oil, gas, and geothermal properties	d(1)	
	(2) Deductions allocable to oil, gas, and geothermal properties	d(2)	
e Other adjustments and tax preference items (attach schedule)	16e		
Foreign Taxes	17a Type of income ▶	17a	Form 1116, check boxes
	b Name of foreign country or U.S. possession ▶	17b	Form 1116, Part I
	c Total gross income from sources outside the United States (attach schedule)	17c	
	d Total applicable deductions and losses (attach schedule)	17d	Form 1116, Part II
	e Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	17e	
	f Reduction in taxes available for credit (attach schedule)	17f	
	g Other foreign tax information (attach schedule)	17g	Form 1116, Part III See instructions for Form 1116.
Other	18a Total expenditures to which a section 59(e) election may apply	18a	See Partner's instructions for Schedule K-1 (Form 1065).
	b Type of expenditures ▶	18b	
	19 Tax-exempt interest income	19	Form 1040, line 8b
	20 Other tax-exempt income	20	See Partner's instructions for Schedule K-1 (Form 1065).
	21 Nondeductible expenses	21	
	22 Recapture of low-income housing credit:	22	Form 8511, line B
a From section 42(j)(5) partnerships	22a		
b Other than on line 22a	22b		
23 Supplemental information required to be reported separately to each partner (attach additional schedules if more space is needed)			

COPY

SCHEDULE K-1
(Form 1065)

Department of the Treasury
Internal Revenue Service

Partner's Share of Income, Credits, Deductions, etc.

See separate instructions.

OMB No. 1545-0095

1994

For calendar year 1994 or tax year beginning

, 1994, and ending

, 19

Partner's identifying number ▶ **208-42-8413**

Partnership's identifying number ▶ **25 1694633**

Partner's name, address, and ZIP code
Gary Klebacha
Treasure Lake Box 283
DuBois, PA 15801

Partnership's name, address, and ZIP code
K & D Foods
Route 255 & I-80
DuBois, PA 15801

A This partner is a ☒ general partner ☐ limited partner
☐ limited liability company member

B What type of entity is this partner? ▶ **Individual**

C Is this partner a ☒ domestic or a ☐ foreign partner?

D Enter partner's percentage of: (i) Before change (ii) End of

Profit sharing % **50** %

Loss sharing % **50** %

Ownership of capital % **50** %

E IRS Center where partnership filed return: **Philadelphia**

F Partner's share of liabilities (see instructions):

Nonrecourse \$ **none**

Qualified nonrecourse financing \$ **none**

Other \$ **82086**

G Tax shelter registration number **n/a**

H Check here if this partnership is a publicly traded partnership as defined in section 469(k)(2) ☐

I Check applicable boxes: (1) ☐ Final K-1 (2) ☐ Amended K-1

J Analysis of partner's capital account:

(a) Capital account at beginning of year	(b) Capital contributed during year	(c) Partner's share of lines 3, 4, and 7, Form 1065, Schedule M-2	(d) Withdrawals and distributions	(e) Capital account at end of year (combine columns (a) through (d))
(53,803)	590	(1,112)	(1,082)	(55,407)

(a) Distributive share item		(b) Amount	(c) 1040 filers enter the amount in column (b) on:
Income (Loss)	1 Ordinary income (loss) from trade or business activities	1 (1,112)	See Partner's Instructions for Schedule K-1 (Form 1065).
	2 Net income (loss) from rental real estate activities	2	
	3 Net income (loss) from other rental activities	3	
	4 Portfolio income (loss):		Sch. B, Part I, line 1 Sch. B, Part II, line 5 Sch. E, Part I, line 4 Sch. D, line 5, col. (f) or (g) Sch. D, line 13, col. (f) or (g) Enter on applicable line of your return.
	a Interest	4a	
	b Dividends	4b	
	c Royalties	4c	
	d Net short-term capital gain (loss)	4d	
	e Net long-term capital gain (loss)	4e	
	f Other portfolio income (loss) (attach schedule)	4f	
	5 Guaranteed payments to partner	5	See Partner's Instructions for Schedule K-1 (Form 1065). Enter on applicable line of your return.
	6 Net gain (loss) under section 1231 (other than due to casualty or theft)	6	
	7 Other income (loss) (attach schedule)	7	
Deductions	8 Charitable contributions (see instructions) (attach schedule)	8	Sch. A, line 15 or 16
	9 Section 179 expense deduction	9	
	10 Deductions related to portfolio income (attach schedule)	10	See Partner's Instructions for Schedule K-1 (Form 1065).
	11 Other deductions (attach schedule)	11	
Investment Interest	12a Interest expense on investment debts	12a	Form 4952, line 1
	b (1) Investment income included on lines 4a, 4b, 4c, and 4f above	b(1)	See Partner's Instructions for Schedule K-1 (Form 1065).
	(2) Investment expenses included on line 10 above	b(2)	
Credits	13a Credit for income tax withheld	13a	See Partner's Instructions for Schedule K-1 (Form 1065).
	b Low-income housing credit:		
	(1) From section 42(j)(5) partnerships for property placed in service before 1990	b(1)	Form 8586, line 5
	(2) Other than on line 13b(1) for property placed in service before 1990	b(2)	
	(3) From section 42(j)(5) partnerships for property placed in service after 1989	b(3)	
	(4) Other than on line 13b(3) for property placed in service after 1989	b(4)	
	c Qualified rehabilitation expenditures related to rental real estate activities (see instructions)	13c	See Partner's Instructions for Schedule K-1 (Form 1065).
	d Credits (other than credits shown on lines 13b and 13c) related to rental real estate activities (see instructions)	13d	
	e Credits related to other rental activities (see instructions)	13e	
	14 Other credits (see instructions)	14	

For Paperwork Reduction Act Notice, see Instructions for Form 1065.

Cat. No. 11394R

Schedule K-1 (Form 1065) 1994

0738-1-19

(a) Distributive share item		(b) Amount	(c) 1040 filers enter the amount in column (b) on:
Self-employment	15a Net earnings (loss) from self-employment	15a (1,112)	Sch. SE, Section A or B See Partner's instructions for Schedule K-1 (Form 1065).
	b Gross farming or fishing income	15b	
	c Gross nonfarm income	15c	
Adjustments and Tax Preference Items	16a Depreciation adjustment on property placed in service after 1986	16a	See Partner's instructions for Schedule K-1 (Form 1065) and instructions for Form 6251.
	b Adjusted gain or loss	16b	
	c Depletion (other than oil and gas)	16c	
	d (1) Gross income from oil, gas, and geothermal properties	d(1)	
	e (2) Deductions allocable to oil, gas, and geothermal properties	d(2)	
	e Other adjustments and tax preference items (attach schedule)	16e	
Foreign Taxes	17a Type of income ▶	17a	Form 1116, check boxes
	b Name of foreign country or U.S. possession ▶	17b	
	c Total gross income from sources outside the United States (attach schedule)	17c	Form 1116, Part I
	d Total applicable deductions and losses (attach schedule)	17d	
	e Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	17e	Form 1116, Part II
	f Reduction in taxes available for credit (attach schedule)	17f	
	g Other foreign tax information (attach schedule)	17g	Form 1116, Part III See instructions for Form 1116.
Other	18a Total expenditures to which a section 59(e) election may apply	18a	See Partner's instructions for Schedule K-1 (Form 1065).
	b Type of expenditures ▶	18b	
	19 Tax-exempt interest income	19	Form 1040, line 8b See Partner's instructions for Schedule K-1 (Form 1065).
	20 Other tax-exempt income	20	
	21 Nondeductible expenses	21	Form 8511, line 8
	22 Recapture of low-income housing credit:		
	a From section 42(j)(5) partnerships	22a	
b Other than on line 22a	22b		

23 Supplemental information required to be reported separately to each partner (attach additional schedules if more space is needed):

Supplemental Information

COPY

SCHEDULE K-1
(Form 1065)

Department of the Treasury
Internal Revenue Service

Partner's Share of Income, Credits, Deductions, etc.

For calendar year 1994 or tax year beginning 1994, and ending 1994. See separate instructions.

OMB No. 1545-0099

Partner's identifying number ▶ 182-44-1035

Partner's name, address, and ZIP code
Debra Klebacha
Treasure Lake Box 283
DuBois, PA 15801

1994, and ending 1994
Partnership's identifying number ▶ 25 : 1694633

Partnership's name, address, and ZIP code
K & D Foods
Route 255 & I-80
DuBois, PA 15801

- A This partner is a ☒ general partner ☐ limited partner
☐ limited liability company member
B What type of entity is this partner? ▶ Individual
C Is this partner a ☒ domestic or a ☐ foreign partner?
D Enter partner's percentage of:
Profit sharing (i) Before change or termination (ii) End of year % 50 %
Loss sharing % 50 %
Ownership of capital % 50 %
E IRS Center where partnership filed return Philadelphia
J Analysis of partner's capital account:

- F Partner's share of liabilities (see instructions):
Nonrecourse \$ none
Qualified nonrecourse financing \$ none
Other \$ 82086
G Tax shelter registration number ▶ n/a
H Check here if this partnership is a publicly traded partnership as defined in section 459(k)(2) ☐
I Check applicable boxes: (1) ☐ Final K-1 (2) ☐ Amended K-1

(a) Capital account at beginning of year	(b) Capital contributed during year	(c) Partner's share of lines 3, 4, and 7, Form 1065, Schedule M-2	(d) Withdrawals and distributions	(e) Capital account at end of year (combine columns (a) through (d))
(53,803)	589	(1,112)	1081	(55,407)

(a) Distributive share item		(b) Amount	(c) 1040 filers enter the amount in column (b) on:
1 Ordinary income (loss) from trade or business activities	1	(1,112)	See Partner's instructions for Schedule K-1 (Form 1065). Sch. B, Part I, line 1 Sch. B, Part II, line 5 Sch. E, Part I, line 4 Sch. D, line 5, col. (f) or (g) Sch. D, line 13, col. (f) or (g) Enter on appropriate line of your return. See Partner's instructions for Schedule K-1 (Form 1065). Sch. A, line 15 or 16 See Partner's instructions for Schedule K-1 (Form 1065).
2 Net income (loss) from rental real estate activities	2		
3 Net income (loss) from other rental activities	3		
4 Portfolio income (loss):			
a Interest	4a		
b Dividends	4b		
c Royalties	4c		
d Net short-term capital gain (loss)	4d		
e Net long-term capital gain (loss)	4e		
f Other portfolio income (loss) (attach schedule)	4f		
5 Guaranteed payments to partner	5		
6 Net gain (loss) under section 1231 (other than due to casualty or theft)	6		See Partner's instructions for Schedule K-1 (Form 1065). Form 4952, line 1 See Partner's instructions for Schedule K-1 (Form 1065). See Partner's instructions for Schedule K-1 (Form 1065). Form 8586, line 5 See Partner's instructions for Schedule K-1 (Form 1065).
7 Other income (loss) (attach schedule)	7		
8 Charitable contributions (see instructions) (attach schedule)	8		
9 Section 179 expense deduction	9		
10 Deductions related to portfolio income (attach schedule)	10		
11 Other deductions (attach schedule)	11		
12a Interest expense on investment debts	12a		
b (1) Investment income included on lines 4a, 4b, 4c, and 4f above	b(1)		
(2) Investment expenses included on line 10 above	b(2)		
13a Credit for income tax withheld	13a		
b Low-income housing credit:			
(1) From section 42(j)(5) partnerships for property placed in service before 1990	b(1)		
(2) Other than on line 13b(1) for property placed in service before 1990	b(2)		
(3) From section 42(j)(5) partnerships for property placed in service after 1989	b(3)		
(4) Other than on line 13b(3) for property placed in service after 1989	b(4)		
c Qualified rehabilitation expenditures related to rental real estate activities (see instructions)	13c		
d Credits (other than credits shown on lines 13b and 13c) related to rental real estate activities (see instructions)	13d		
e Credits related to other rental activities (see instructions)	13e		
14 Other credits (see instructions)	14		

For Paperwork Reduction Act Notice, see instructions for Form 1065.

Cat. No. 11394R

Schedule K-1 (Form 1065) 1994

(a) Distributive share item		(b) Amount	(c) 1040 filers enter the amount in column (b) on:
Self-employment	15a Net earnings (loss) from self-employment	15a (1,112)	Sch. SE, Section A or B See Partner's Instructions for Schedule K-1 (Form 1065).
	b Gross farming or fishing income	15b	
	c Gross nonfarm income	15c	
Adjustments and Tax Preference Items	16a Depreciation adjustment on property placed in service after 1986	16a	See Partner's Instructions for Schedule K-1 (Form 1065) and Instructions for Form 6251.
	b Adjusted gain or loss	16b	
	c Depletion (other than oil and gas)	16c	
	d (1) Gross income from oil, gas, and geothermal properties	d(1)	
	(2) Deductions allocable to oil, gas, and geothermal properties	d(2)	
e Other adjustments and tax preference items (attach schedule)	16e		
Foreign Taxes	17a Type of income ▶		Form 1116, check boxes
	b Name of foreign country or U.S. possession ▶		Form 1116, Part I
	c Total gross income from sources outside the United States (attach schedule)	17c	
	d Total applicable deductions and losses (attach schedule)	17d	Form 1116, Part II
	e Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	17e	
	f Reduction in taxes available for credit (attach schedule)	17f	
	g Other foreign tax information (attach schedule)	17g	Form 1116, Part III See Instructions for Form 1116.
Other	18a Total expenditures to which a section 59(e) election may apply	18a	See Partner's Instructions for Schedule K-1 (Form 1065).
	b Type of expenditures ▶		
	19 Tax-exempt interest income	19	Form 1040, line 8b See Partner's Instructions for Schedule K-1 (Form 1065).
	20 Other tax-exempt income	20	
	21 Nondeductible expenses	21	Form B511, line 8
	22 Recapture of low-income housing credit: a From section 42(j)(5) partnerships	22a	
b Other than on line 22a	22b		

23 Supplemental information required to be reported separately to each partner (attach additional schedules if more space is needed):

Supplemental Information

COPY

SCHEDULE K-1
(Form 1065)

Department of the Treasury
Internal Revenue Service

Partner's Share of Income, Credits, Deductions, etc.

See separate instructions.

OMB No. 1545-0099

1994

For calendar year 1994 or tax year beginning

1994, and ending

Partner's identifying number ▶ 182-44-1035

Partnership's identifying number ▶ 25 : 1694632

Partner's name, address, and ZIP code
Debra Klebacha
Treasure Lake Box 283
DuBois, PA 15801

Partnership's name, address, and ZIP code
P & K Enterprises
Route 255 & I-80
DuBois, PA 15801

A This partner is a ☒ general partner ☐ limited partner
☐ limited liability company member

B What type of entity is this partner? ▶ Individual

C Is this partner a ☒ domestic or a ☐ foreign partner?

D Enter partner's percentage of: (i) Before change or termination (ii) End of year

Profit sharing % 50 %

Loss sharing % 50 %

Ownership of capital % 50 %

E IRS Center where partnership filed return: Philadelphia

F Partner's share of liabilities (see instructions):

Nonrecourse \$ none

Qualified nonrecourse financing \$ none

Other \$ 10,130

G Tax shelter registration number ▶

H Check here if this partnership is a publicly traded partnership as defined in section 469(k)(2) ☐

I Check applicable boxes: (1) ☐ Final K-1 (2) ☐ Amended K-1

J Analysis of partner's capital account:

(a) Capital account at beginning of year	(b) Capital contributed during year	(c) Partner's share of lines 3, 4, and 7, Form 1065, Schedule M-2	(d) Withdrawals and distributions	(e) Capital account at end of year (combine columns (a) through (d))
(358)		4,090	(7,738)	(6)

(a) Distributive share item		(b) Amount	(c) 1040 filers enter the amount in column (b) on:
Income (Loss)	1 Ordinary income (loss) from trade or business activities	1 4,090	See Partner's instructions for Schedule K-1 (Form 1065). Sch. B, Part I, line 1 Sch. B, Part II, line 5 Sch. E, Part I, line 4 Sch. (f) or (g) Sch. (f) or (g) See Partner's instructions for Schedule K-1 (Form 1065). Enter an applicable line of your return. Sch. A, line 15 or 16 See Partner's instructions for Schedule K-1 (Form 1065).
	2 Net income (loss) from rental real estate activities	2	
	3 Net income (loss) from other rental activities	3	
	4 Portfolio income (loss):		
	a Interest	4a	
	b Dividends	4b	
	c Royalties	4c	
Deductions	d Net short-term capital gain (loss)	4d	See Partner's instructions for Schedule K-1 (Form 1065). Enter an applicable line of your return.
	e Net long-term capital gain (loss)	4e	
	f Other portfolio income (loss) (attach schedule)	4f	
	5 Guaranteed payments to partner	5	
	6 Net gain (loss) under section 1231 (other than due to casualty or theft)	6	
	7 Other income (loss) (attach schedule)	7	
Investment Interest	8 Charitable contributions (see instructions) (attach schedule)	8	Form 4952, line 1 See Partner's instructions for Schedule K-1 (Form 1065). See Partner's instructions for Schedule K-1 (Form 1065). Form 8586, line 5 See Partner's instructions for Schedule K-1 (Form 1065).
	9 Section 179 expense deduction	9	
	10 Deductions related to portfolio income (attach schedule)	10	
	11 Other deductions (attach schedule)	11	
	12a Interest expense on investment debts	12a	
	b (1) Investment income included on lines 4a, 4b, 4c, and 4f above	b(1)	
	(2) Investment expenses included on line 10 above	b(2)	
Credits	13a Credit for income tax withheld	13a	Form 8586, line 5 See Partner's instructions for Schedule K-1 (Form 1065).
	b Low-income housing credit:		
	(1) From section 42(j)(5) partnerships for property placed in service before 1990	b(1)	
	(2) Other than on line 13b(1) for property placed in service before 1990	b(2)	
	(3) From section 42(j)(5) partnerships for property placed in service after 1989	b(3)	
	(4) Other than on line 13b(3) for property placed in service after 1989	b(4)	
	c Qualified rehabilitation expenditures related to rental real estate activities (see instructions)	13c	
Credits	d Credits (other than credits shown on lines 13b and 13c) related to rental real estate activities (see instructions)	13d	See Partner's instructions for Schedule K-1 (Form 1065).
	e Credits related to other rental activities (see instructions)	13e	
	14 Other credits (see instructions)	14	

For Paperwork Reduction Act Notice, see Instructions for Form 1065.

Cat. No. 11394R

Schedule K-1 (Form 1065) 1994

8833-0123

(a) Distributive share item		(b) Amount	(c) 1040 filers enter the amount in column (b) on:
Self-employment	15a Net earnings (loss) from self-employment	15a 4,090	Sch. SE, Section A or B See Partner's Instructions for Schedule K-1 (Form 1065).
	b Gross farming or fishing income	15b	
	c Gross nonfarm income	15c	
Adjustments and tax preference items	16a Depreciation adjustment on property placed in service after 1986	16a	See Partner's Instructions for Schedule K-1 (Form 1065) and Instructions for Form 6251.
	b Adjusted gain or loss	16b	
	c Depletion (other than oil and gas)	16c	
	d (1) Gross income from oil, gas, and geothermal properties	d(1)	
	(2) Deductions allocable to oil, gas, and geothermal properties	d(2)	
e Other adjustments and tax preference items (attach schedule)	16e		
Foreign Taxes	17a Type of income ▶		Form 1116, check boxes
	b Name of foreign country or U.S. possession ▶		Form 1116, Part I
	c Total gross income from sources outside the United States (attach schedule)	17c	
	d Total applicable deductions and losses (attach schedule)	17d	Form 1116, Part II
	e Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	17e	
	f Reduction in taxes available for credit (attach schedule)	17f	Form 1116, Part III
	g Other foreign tax information (attach schedule)	17g	See Instructions for Form 1116.
Other	18a Total expenditures to which a section 59(e) election may apply	18a	See Partner's Instructions for Schedule K-1 (Form 1065).
	b Type of expenditures ▶		
	19 Tax-exempt interest income	19	Form 1040, line 8b
	20 Other tax-exempt income	20	See Partner's Instructions for Schedule K-1 (Form 1065).
	21 Nondeductible expenses	21	
	22 Recapture of low-income housing credit:		Form 8511, line 8
	a From section 42(j)(5) partnerships	22a	
b Other than on line 22a	22b		
23 Supplemental information required to be reported separately to each partner (attach additional schedules if more space is needed).			

Supplemental Information

COPY

Form **4868**Application for Automatic Extension of Time
To File U.S. Individual Income Tax Return

OMB No. 1545-0148

1994Department of the Treasury
Internal Revenue Service

Please Type or Print	Your first name and initial		Last name		Your social security number
	Gary		Klebacha		208 42 8413
	If a joint return, spouse's first name and initial		Last name		Spouse's social security number
	Debra		Klebacha		182 44 1035
Home address (number, street, and apt. no. or rural route). If you have a P.O. box, see the instructions.					
Treasure Lake Box 283					
City, town or post office, state, and ZIP code					
DuBois, PA 15801					

I request an automatic 4-month extension of time to August 15, 1995, to file Form 1040EZ, Form 1040A, or Form 1040 for the calendar year 1994 or 1995, for the fiscal year ending 1995.

Part I Individual Income Tax—You must complete this part.

1	Total tax liability for 1994. This is the amount you expect to enter on Form 1040EZ, line 9; Form 1040A, line 27; or Form 1040, line 53. If you expect this amount to be zero, enter -0-.	1	NONE
Caution: You MUST enter an amount on line 1 or your extension will be denied. You can estimate this amount, but be as exact as you can with the information you have. If we later find that your estimate was not reasonable, the extension will be null and void.			
2	Total payments for 1994. This is the amount you expect to enter on Form 1040EZ, line 8; Form 1040A, line 28d; or Form 1040, line 60 (excluding line 57).	2	
3	BALANCE DUE. Subtract line 2 from line 1. If line 2 is more than line 1, enter -0-. If you are making a payment, you must use the Form 4868-V at the bottom of page 3. For details on how to pay, including what to write on your payment, see the instructions.	3	NONE

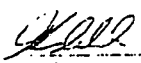
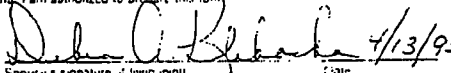
Part III Gift or Generation-Skipping Transfer (GST) Tax—Complete this part if you expect to owe either tax.

Caution: Do not include income tax on lines 5a and 5b. See the instructions.

4	If you or your spouse plan to file a gift tax return (Form 709 or 709-A) for 1994, generally due by April 17, 1995, see the instructions and check here.	Yourselves <input checked="" type="checkbox"/>	COPY
		Spouse <input type="checkbox"/>	
5a	Enter the amount of gift or GST tax you are paying with this form. Also, you must use the Form 4868-V at the bottom of page 3.	5a	
5b	Enter the amount of gift or GST tax your spouse is paying with this form. Also, you must use the Form 4868-V at the bottom of page 3.	5b	

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete; and, if prepared by someone other than the taxpayer, that I am authorized to prepare this form.

	Date		Date 4/13/95
Taxpayer's signature (other than taxpayer)		Spouse's signature (if joint return)	

If you want correspondence regarding this extension to be sent to you at an address other than that shown above or to an agent acting for you, please enter the name of the agent and/or the address where it should be sent.

Please Type or Print	Robert L. Salizzoni, Sr.
Address (number and street include suite, room, or apt. no.) or P.O. box number if mail is not delivered in street address	423 Main Street
City, town or post office, state, and ZIP code	Brockway, PA 15824

For Paperwork Reduction Act Notice, see page 3.

Call No. 12141W

Form 4868 (1994)



AFFIDAVIT OF BUSINESS LOAN

I (We) hereby verify that the facts contained herein are true and correct to the best of my (our) knowledge, information and belief. I (We) understand that false statements herein are made subject to the penalties of perjury under 18 Pa. C.S.A. § 4904.

WITNESS:

(SEAL)

(SEAL)

ATTEST:

(SEAL)

(Individual) Debra A. Klebacha

(Individual)

Corporation or Partnership

By _____
(Name and Title)

By _____
(Name and Title)

Sworn to and subscribed before me this _____ day of _____, 19____.

Notary Public

My Commission Expires:

(To be executed by each person executing the Note.)

11-20-35

To Rev. Credit

Please prepare a Business L.O.C.

for - D.O. Legs.

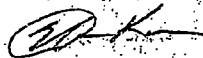
Amount - 5000.00

Rate - Integer Prime plus $2\frac{1}{2}\%$

Payment - interest only monthly

Security - None

Thank you



NationalCity®

P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
3,890.83	34.52	03/17/98

Account number 4489 7098 6001 1335

Amount Enclosed \$

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

8343

|||||

|||||

4489709860011335000389083000003452

NationalCity®

ACCOUNT SUMMARY:	Previous Balance	\$4,056.31
	Payments/Credits	\$200.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$34.52
	Other Charges	\$0.00
	New Balance	\$3,890.83

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$1,109.00
Available for Cash Advance \$1,109.00
Days in Billing Cycle 29
Statement Closing Date 02/20/98

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
02/09	02/09	7448970DRSBZL52E2	PAYMENT-THANK YOU PENNSYLVANIA PA	200.00CR
02/20	02/20	*FINANCE CHARGE*		34.52

RATE BREAK TRANSACTIONS

FINANCE CHARGES SUMMARY

Rate Type	Daily Periodic Rate*	Corresponding PERCENTAGE RATE	FINANCE CHARGE	ANNUAL PERCENTAGE RATE	Average Daily Balance
Current Purchases	.030130%	11.000%	\$0.00	11.000%	\$0.00
Current Cash Advances	.030130%	11.000%	\$34.52	11.000%	\$3,951.10

*THIS RATE MAY VARY

SPECIAL MESSAGE

TOTAL *FINANCE CHARGE* PAID IN 1997 \$377.62

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.

EXHIBIT

2



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
3,823.18	32.35	04/14/98

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

7755

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4489709860011335000382318000003235



ACCOUNT SUMMARY:	Previous Balance	\$3,890.83
	Payments/Credits	\$100.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$32.35
	Other Charges	\$0.00
	New Balance	\$3,823.18

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$1,176.00
Available for Cash Advance \$1,176.00
Days in Billing Cycle 28
Statement Closing Date 03/20/98

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
03/12	03/12	7448970ERSBZKYY2Z	PAYMENT-THANK YOU PENNSYLVANIA PA	100.00CR
03/20	03/20	*FINANCE CHARGE*		32.35

FINANCE CHARGES SUMMARY

Rate Type	DAILY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	.030130%	11.000%	\$0.00	\$0.00
Current Cash Advances	.030130%	11.000%	\$32.35	\$3,835.26

BLENDED ANNUAL PERCENTAGE RATE: 11.00%

*THIS RATE MAY VARY

SPECIAL MESSAGE

TOTAL *FINANCE CHARGE* PAID IN 1997 \$377.62

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,814.20	41.02	05/16/98

Account number 4489 7098 6001 1335

Amount Enclosed \$

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

7633

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4489709860011335000481420000004102



ACCOUNT SUMMARY:	Previous Balance	\$3,823.18
	Payments/Credits	\$50.00
	Purchases/Debits	\$0.00
	Cash Advances	\$1,000.00
	Finance Charges	\$41.02
	Other Charges	\$0.00
	New Balance	\$4,814.20

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$185.00
Available for Cash Advance \$185.00
Days in Billing Cycle 32
Statement Closing Date 04/21/98

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
04/07	04/07	7448970FJ01MLWTF0	# CONVENIENCE CHECK PITTSBURGH PA	1,000.00
04/14	04/14	7448970FTSBZL1B01	PAYMENT-THANK YOU PENNSYLVANIA PA	50.00CR
04/21	04/21	*FINANCE CHARGE*		41.02

FINANCE CHARGES SUMMARY

Rate Type	DAILY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	.030130%	11.000%	\$0.00	\$0.00
Current Cash Advances	.030130%	11.000%	\$41.02	\$4,255.16

BLENDING ANNUAL PERCENTAGE RATE: 11.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,706.98	42.78	06/15/98

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

7601

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4489709860011335000470698000004278



ACCOUNT SUMMARY:	Previous Balance	\$4,814.20
	Payments/Credits	\$150.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$42.78
	Other Charges	\$0.00
	New Balance	\$4,706.98

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$293.00
Available for Cash Advance \$293.00
Days in Billing Cycle 30
Statement Closing Date 05/21/98

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
05/11	05/11	7448970GKSBZL4NM4	PAYMENT-THANK YOU PENNSYLVANIA PA	150.00CR
05/21	05/21	*FINANCE CHARGE*		42.78

FINANCE CHARGES SUMMARY

Rate Type	DAILY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	.030130%	11.000%	\$0.00	\$0.00
Current Cash Advances	.030130%	11.000%	\$42.78	\$4,733.22

BLENDED ANNUAL PERCENTAGE RATE: 11.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,676.80	44.82	07/17/98

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

10523

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4489709860011335000467680000004482



ACCOUNT SUMMARY:	Previous Balance	\$4,706.98
	Payments/Credits	\$75.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$44.82
	Other Charges	\$0.00
	New Balance	\$4,676.80

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$323.00
Available for Cash Advance \$323.00
Days in Billing Cycle 32
Statement Closing Date 06/22/98

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
06/08	06/08	7448970HFSBZLG9Q9	PAYMENT-THANK YOU PENNSYLVANIA PA	75.00CR
06/22	06/22	*FINANCE CHARGE*		44.82

FINANCE CHARGES SUMMARY

Rate Type	DAILY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	.030130%	11.000%	\$0.00	\$0.00
Current Cash Advances	.030130%	11.000%	\$44.82	\$4,649.09

BLENDED ANNUAL PERCENTAGE RATE: 11.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,668.65	41.85	08/16/98

Account number 4489 7098 6001 1335

Amount Enclosed \$

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

10489

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4489709860011335000466865000004185



ACCOUNT SUMMARY:	Previous Balance	\$4,676.80
	Payments/Credits	\$50.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$41.85
	Other Charges	\$0.00
	New Balance	\$4,668.65

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$331.00
Available for Cash Advance \$331.00
Days in Billing Cycle 30
Statement Closing Date 07/22/98

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
07/16	07/16	7448970JTSQ1QT403	PAYMENT-THANK YOU PENNSYLVANIA PA	50.00CR
07/22	07/22	*FINANCE CHARGE*		41.85

FINANCE CHARGES SUMMARY

Rate Type	DAILY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	.030130%	11.000%	\$0.00	\$0.00
Current Cash Advances	.030130%	11.000%	\$41.85	\$4,630.77

BLENDED ANNUAL PERCENTAGE RATE: 11.00%
*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,710.39	41.74	09/15/98

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

7645

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4489709860011335000471039000004174



ACCOUNT SUMMARY:	Previous Balance	\$4,668.65
	Payments/Credits	\$100.00
	Purchases/Debits	\$0.00
	Cash Advances	\$100.00
	Finance Charges	\$41.74
	Other Charges	\$0.00
	New Balance	\$4,710.39

Account number 4489 7098 6001 1335

Credit Limit \$5,000.00

Available Credit \$289.00

Available for Cash Advance \$289.00

Days in Billing Cycle 30

Statement Closing Date 08/21/98

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
08/11	08/11	7448970KHSQ1QXDQW	PAYMENT-THANK YOU PENNSYLVANIA PA	100.00CR
08/18	08/18	7448970KP01MLWTF8	# CONVENIENCE CHECK PITTSBURGH PA	100.00
08/21	08/21	*FINANCE CHARGE*		41.74

FINANCE CHARGES SUMMARY

Rate Type	DAILY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	.030130%	11.000%	\$0.00	\$0.00
Current Cash Advances	.030130%	11.000%	\$41.74	\$4,618.81

BLENDED ANNUAL PERCENTAGE RATE: 11.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,655.04	44.65	10/17/98

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
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DEBRA A KLEBACHA DBA
D D LEGS
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DUBOIS PA 15801-0022

6834

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4489709860011335000465504000004465



ACCOUNT SUMMARY:	Previous Balance	\$4,710.39
	Payments/Credits	\$100.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$44.65
	Other Charges	\$0.00
	New Balance	\$4,655.04

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$344.00
Available for Cash Advance \$344.00
Days in Billing Cycle 32
Statement Closing Date 09/22/98

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
09/03	09/03	7448970LBSQ1QYL5Q	PAYMENT-THANK YOU PENNSYLVANIA PA	100.00CR
09/22	09/22	*FINANCE CHARGE*		44.65

FINANCE CHARGES SUMMARY

Rate Type	DAILY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	.030130%	11.000%	\$0.00	\$0.00
Current Cash Advances	.030130%	11.000%	\$44.65	\$4,632.23

BLENDED ANNUAL PERCENTAGE RATE: 11.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,645.31	40.27	11/15/98

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

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4489709860011335000464531000004027



ACCOUNT SUMMARY:

Previous Balance	\$4,655.04
Payments/Credits	\$50.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$40.27
Other Charges	\$0.00
New Balance	\$4,645.31

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$354.00
Available for Cash Advance \$354.00
Days in Billing Cycle 29
Statement Closing Date 10/21/98

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
10/15	10/15	7448970MLSQ1D29MQ	PAYMENT-THANK YOU PENNSYLVANIA PA	50.00CR
10/21	10/21	*FINANCE CHARGE*		40.27

FINANCE CHARGES SUMMARY

Rate Type	DAILY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	.030130%	11.000%	\$0.00	\$0.00
Current Cash Advances	.030130%	11.000%	\$40.27	\$4,609.09

BLENDED ANNUAL PERCENTAGE RATE: 11.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,636.90	41.59	12/15/98

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

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4489709860011335000463690000004159



ACCOUNT SUMMARY:

Previous Balance	\$4,645.31
Payments/Credits	\$50.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$41.59
Other Charges	\$0.00
New Balance	\$4,636.90

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$363.00
Available for Cash Advance \$363.00
Days in Billing Cycle 30
Statement Closing Date 11/20/98

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
11/12	11/12	7448970NGSQ1QZ7GK	PAYMENT-THANK YOU PENNSYLVANIA PA	50.00CR
11/20	11/20	*FINANCE CHARGE*		41.59

FINANCE CHARGES SUMMARY

Rate Type	DAILY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	.030130%	11.000%	\$0.00	\$0.00
Current Cash Advances	.030130%	11.000%	\$41.59	\$4,602.12

BLENDED ANNUAL PERCENTAGE RATE: 11.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,526.72	39.82	01/16/99

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

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4489709860011335000452672000003982



ACCOUNT SUMMARY:	Previous Balance	\$4,636.90
	Payments/Credits	\$150.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$39.82
	Other Charges	\$0.00
	New Balance	\$4,526.72

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$473.00
Available for Cash Advance \$473.00
Days in Billing Cycle 32
Statement Closing Date 12/22/98

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
12/10	12/10	7448970PQSBZKKM5	PAYMENT-THANK YOU PENNSYLVANIA PA	150.00CR
12/22	12/22	*FINANCE CHARGE*		39.82

FINANCE CHARGES SUMMARY

Rate Type	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.875%	10.500%	\$0.00	\$0.00
Current Cash Advances	0.875%	10.500%	\$39.82	\$4,551.26

BLENDED ANNUAL PERCENTAGE RATE: 10.50%

*THIS RATE MAY VARY

SPECIAL MESSAGE

THE CREDIT ADJUSTMENT THAT SHOWS ON THIS STATEMENT IS A
CORRECTION OF A TECHNICAL COMPUTATION ERROR.

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,414.49	37.77	02/16/99

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

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4489709860011335000441449000003777



ACCOUNT SUMMARY:	Previous Balance	\$4,526.72
	Payments/Credits	\$150.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$37.77
	Other Charges	\$0.00
	New Balance	\$4,414.49

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$585.00
Available for Cash Advance \$585.00
Days in Billing Cycle 31
Statement Closing Date 01/22/99

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
01/05	01/05	744897007SQ1QRSF6	PAYMENT-THANK YOU PENNSYLVANIA PA	150.00CR
01/22	01/22	*FINANCE CHARGE*		37.77

FINANCE CHARGES SUMMARY

Rate Type	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.854%	10.250%	\$0.00	\$0.00
Current Cash Advances	0.854%	10.250%	\$37.77	\$4,422.92

BLENDED ANNUAL PERCENTAGE RATE: 10.25%

*THIS RATE MAY VARY

SPECIAL MESSAGE

TOTAL *FINANCE CHARGE* PAID IN 1998 \$484.34

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,902.59	38.10	03/19/99

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

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4489709860011335000490259000003810



ACCOUNT SUMMARY:	Previous Balance	\$4,414.49
	Payments/Credits	\$50.00
	Purchases/Debits	\$0.00
	Cash Advances	\$500.00
	Finance Charges	\$38.10
	Other Charges	\$0.00
	New Balance	\$4,902.59

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$97.00
Available for Cash Advance \$97.00
Days in Billing Cycle 31
Statement Closing Date 02/22/99

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
02/16	02/16	74489701G01MLWTF9	# CONVENIENCE CHECK PITTSBURGH PA	100.00
02/18	02/18	74489701JSBZM99Z2	PAYMENT-THANK YOU PENNSYLVANIA PA	50.00CR
02/18	02/18	74489701J01MLWTF4	# CONVENIENCE CHECK PITTSBURGH PA	400.00
02/22	02/22	*FINANCE CHARGE*		38.10

FINANCE CHARGES SUMMARY

Rate Type	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.854%	10.250%	\$0.00	\$0.00
Current Cash Advances	0.854%	10.250%	\$38.10	\$4,461.84

BLENDED ANNUAL PERCENTAGE RATE: 10.25%

*THIS RATE MAY VARY

SPECIAL MESSAGE

TOTAL *FINANCE CHARGE* PAID IN 1998 \$484.34

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,843.98	41.39	04/16/99

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

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4489709860011335000484398000004139



ACCOUNT SUMMARY:

Previous Balance	\$4,902.59
Payments/Credits	\$100.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$41.39
Other Charges	\$0.00
New Balance	\$4,843.98

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$156.00
Available for Cash Advance \$156.00
Days in Billing Cycle 28
Statement Closing Date 03/22/99

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
03/15	03/15	74489702BSBZL8QYQ	PAYMENT-THANK YOU PENNSYLVANIA PA	100.00CR
03/22	03/22	*FINANCE CHARGE*		41.39

FINANCE CHARGES SUMMARY

Rate Type	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.854%	10.250%	\$0.00	\$0.00
Current Cash Advances	0.854%	10.250%	\$41.39	\$4,846.80

BLENDING ANNUAL PERCENTAGE RATE: 10.25%

*THIS RATE MAY VARY

SPECIAL MESSAGE

TOTAL "FINANCE CHARGE" PAID IN 1998 \$484.34

CUSTOMER SERVICE 1-800-352-0186
CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323
Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,985.29	41.31	05/16/99

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

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4489709860011335000498529000004131



ACCOUNT SUMMARY:	Previous Balance	\$4,843.98
	Payments/Credits	\$50.00
	Purchases/Debits	\$0.00
	Cash Advances	\$150.00
	Finance Charges	\$41.31
	Other Charges	\$0.00
	New Balance	\$4,985.29

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$14.00
Available for Cash Advance \$14.00
Days in Billing Cycle 30
Statement Closing Date 04/21/99

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
04/07	04/07	744897033SQ1QRGNN	PAYMENT-THANK YOU PENNSYLVANIA PA	50.00CR
04/14	04/14	74489703901MLWTF9	# CONVENIENCE CHECKPITTSBURGH PA	150.00
04/21	04/21	*FINANCE CHARGE*		41.31

FINANCE CHARGES SUMMARY

Rate Type	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.854%	10.250%	\$0.00	\$0.00
Current Cash Advances	0.854%	10.250%	\$41.31	\$4,838.28

BLENDED ANNUAL PERCENTAGE RATE: 10.25%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,027.51	83.53	06/15/99

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY 4265/7000
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022



4489709860011335000502751000008353



ACCOUNT SUMMARY:

Previous Balance	\$4,985.29
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$42.22
Other Charges	\$0.00
New Balance	\$5,027.51
Past Due Balance	\$41.31

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$27.00 -
Available for Cash Advance \$0.00
Days in Billing Cycle 30
Statement Closing Date 05/21/99

A FRIENDLY REMINDER TO A VALUED CUSTOMER.
IF YOU HAVE NOT ALREADY DONE SO, PLEASE REMIT
THE AMOUNT PAST DUE.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
05/21	05/21	*FINANCE CHARGE*		42.22

FINANCE CHARGES SUMMARY

Rate Type	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.854%	10.250%	\$0.00	\$0.00
Current Cash Advances	0.854%	10.250%	\$42.22	\$4,943.98

BLENDING ANNUAL PERCENTAGE RATE: 10.25%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,073.86	129.88	07/16/99

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY 4265/7000
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022



4489709860011335000507386000012988



ACCOUNT SUMMARY:

Previous Balance	\$5,027.51
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$42.22
Other Charges	\$4.13
New Balance	\$5,073.86
Past Due Balance	\$83.53

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$73.00 -
Available for Cash Advance \$0.00
Days in Billing Cycle 31
Statement Closing Date 06/21/99

*YOUR ACCOUNT IS DELINQUENT AND OVERLIMIT. YOUR
CHARGING PRIVILEGES MAY BE REVOKED. IF YOU HAVE
NOT DONE SO, PLEASE REMIT THE TOTAL AMOUNT DUE.*

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
06/21	06/21		LATE FEE	4.13
06/21	06/21	*FINANCE CHARGE*		42.22

FINANCE CHARGES SUMMARY

Rate Type	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.854%	10.250%	\$0.00	\$0.00
Current Cash Advances	0.854%	10.250%	\$42.22	\$4,943.98

BLENDING ANNUAL PERCENTAGE RATE: 10.25%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186
CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323
Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,990.30	46.44	08/16/99

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY 4265/7000
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

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4489709860011335000499030000004644



ACCOUNT SUMMARY:	Previous Balance	\$5,073.86
	Payments/Credits	\$130.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$42.22
	Other Charges	\$4.22
	New Balance	\$4,990.30

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$9.00
Available for Cash Advance \$9.00
Days in Billing Cycle 31
Statement Closing Date 07/22/99

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
07/09	07/09	744897062SQ1QZV78	PAYMENT-THANK YOU PENNSYLVANIA PA	130.00CR
07/22	07/22		LATE FEE	4.22
07/22	07/22	*FINANCE CHARGE*		42.22

FINANCE CHARGES SUMMARY

Rate Type	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.854%	10.250%	\$0.00	\$0.00
Current Cash Advances	0.854%	10.250%	\$42.22	\$4,943.92

BLENDED ANNUAL PERCENTAGE RATE: 10.25%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

CUSTOMER SERVICE P.O. BOX 1300 FRANKLIN, PA 16323

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,982.50	42.20	09/14/99

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY 4265/7000
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

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DUBOIS PA 15801-0022

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4489709860011335000498250000004220



ACCOUNT SUMMARY:	Previous Balance	\$4,990.30
	Payments/Credits	\$50.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$42.20
	Other Charges	\$0.00
	New Balance	\$4,982.50

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$17.00
Available for Cash Advance \$17.00
Days in Billing Cycle 29
Statement Closing Date 08/20/99

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
08/09	08/09	74489706XSBZMLQR	PAYMENT-THANK YOU PENNSYLVANIA PA	50.00CR
08/20	08/20	*FINANCE CHARGE*		42.20

FINANCE CHARGES SUMMARY

Rate Type	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.854%	10.250%	\$0.00	\$0.00
Current Cash Advances	0.854%	10.250%	\$42.20	\$4,942.38

BLENDED ANNUAL PERCENTAGE RATE: 10.25%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,025.72	85.42	10/17/99

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
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DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

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4489709860011335000502572000008542



ACCOUNT SUMMARY:	Previous Balance	\$4,982.50
	Payments/Credits	\$0.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$43.22
	Other Charges	\$0.00
	New Balance	\$5,025.72
	Past Due Balance	\$42.20

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$25.00 -
Available for Cash Advance \$0.00
Days in Billing Cycle 33
Statement Closing Date 09/22/99

A FRIENDLY REMINDER TO A VALUED CUSTOMER.
IF YOU HAVE NOT ALREADY DONE SO, PLEASE REMIT
THE AMOUNT PAST DUE.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
09/22	09/22	*FINANCE CHARGE*		43.22

FINANCE CHARGES SUMMARY

Rate Type	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.875%	10.500%	\$0.00	\$0.00
Current Cash Advances	0.875%	10.500%	\$43.22	\$4,940.30

BLENDING ANNUAL PERCENTAGE RATE: 10.50%
*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

PO BOX 1421 FRANKLIN PA 16323-5421

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NationalCity®

P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,973.11	47.39	11/15/99

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY 4265/7000
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

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DUBOIS PA 15801-0022

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4489709860011335000497311000004739

NationalCity®

ACCOUNT SUMMARY:	Previous Balance	\$5,025.72
	Payments/Credits	\$100.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$43.17
	Other Charges	\$4.22
	New Balance	\$4,973.11

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$26.00
Available for Cash Advance \$26.00
Days in Billing Cycle 29
Statement Closing Date 10/21/99

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
10/11	10/11	74489708WSBZLK2NB	PAYMENT-THANK YOU PENNSYLVANIA PA	100.00CR
10/21	10/21		LATE FEE	4.22
10/21	10/21	*FINANCE CHARGE*		43.17

FINANCE CHARGES SUMMARY

Rate Type	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.875%	10.500%	\$0.00	\$0.00
Current Cash Advances	0.875%	10.500%	\$43.17	\$4,934.76

BLENDED ANNUAL PERCENTAGE RATE: 10.50%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,017.24	91.52	12/14/99

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

4265/7000

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DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

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4489709860011335000501724000009152

National City.

ACCOUNT SUMMARY:	Previous Balance	\$4,973.11
	Payments/Credits	\$0.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$44.13
	Other Charges	\$0.00
	New Balance	\$5,017.24
	Past Due Balance	\$47.39

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$17.00 -
Available for Cash Advance \$0.00
Days in Billing Cycle 29
Statement Closing Date 11/19/99

A FRIENDLY REMINDER TO A VALUED CUSTOMER.
IF YOU HAVE NOT ALREADY DONE SO, PLEASE REMIT
THE AMOUNT PAST DUE.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
11/19	11/19	*FINANCE CHARGE*		44.13

FINANCE CHARGES SUMMARY

Rate Type	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.896%	10.750%	\$0.00	\$0.00
Current Cash Advances	0.896%	10.750%	\$44.13	\$4,925.72

BLENDED ANNUAL PERCENTAGE RATE: 10.75%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186
PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.

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P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,961.32	44.08	01/15/00

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY 4265/7000
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

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D D LEGS
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DUBOIS PA 15801-0022

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4489709860011335000496132000004408

NationalCity.

ACCOUNT SUMMARY:	Previous Balance	\$5,017.24
	Payments/Credits	\$100.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$44.08
	Other Charges	\$0.00
	New Balance	\$4,961.32

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$38.00
Available for Cash Advance \$38.00
Days in Billing Cycle 32
Statement Closing Date 12/21/99

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
12/01	12/01	7448970AGSBZL8MNK	PAYMENT-THANK YOU PENNSYLVANIA PA	100.00CR
12/21	12/21	*FINANCE CHARGE*		44.08

FINANCE CHARGES SUMMARY

Rate Type	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.896%	10.750%	\$0.00	\$0.00
Current Cash Advances	0.896%	10.750%	\$44.08	\$4,920.15

BLENDED ANNUAL PERCENTAGE RATE: 10.75%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.

NationalCity

P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,956.38	45.06	02/15/00

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY 4265/7000
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

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4489709860011335000495638000004506

NationalCity.

ACCOUNT SUMMARY:	Previous Balance	\$4,961.32
	Payments/Credits	\$50.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$45.06
	Other Charges	\$0.00
	New Balance	\$4,956.38

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$43.00
Available for Cash Advance \$43.00
Days in Billing Cycle 31
Statement Closing Date 01/21/00

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
01/07	01/07	7448970QSSBZLGYHE	PAYMENT-THANK YOU PENNSYLVANIA PA	50.00CR
01/21	01/21	*FINANCE CHARGE*		45.06

FINANCE CHARGES SUMMARY

Rate Type	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.917%	11.000%	\$0.00	\$0.00
Current Cash Advances	0.917%	11.000%	\$45.06	\$4,914.37

BLENDED ANNUAL PERCENTAGE RATE: 11.00%

*THIS RATE MAY VARY

SPECIAL MESSAGE

TOTAL *FINANCE CHARGE* PAID IN 1999 \$510.34

CUSTOMER SERVICE 1-800-352-0186
PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.

NationalCity.

P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,001.41	90.09	03/17/00

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY 42657000
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

DEBRA A KLEBACHA DBA
D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

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4489709860011335000500141000009009

NationalCity.

ACCOUNT SUMMARY:	Previous Balance	\$4,956.38
	Payments/Credits	\$0.00
	Purchases/Debits	\$0.00
	Cash Advances	\$0.00
	Finance Charges	\$45.03
	Other Charges	\$0.00
	New Balance	\$5,001.41
	Past Due Balance	\$45.06

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$1.00-
Available for Cash Advance \$0.00
Days in Billing Cycle 31
Statement Closing Date 02/21/00

A FRIENDLY REMINDER TO A VALUED CUSTOMER.
IF YOU HAVE NOT ALREADY DONE SO, PLEASE REMIT
THE AMOUNT PAST DUE.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
02/21	02/21	*FINANCE CHARGE*		45.03

FINANCE CHARGES SUMMARY

Rate Type	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.917%	11.000%	\$0.00	\$0.00
Current Cash Advances	0.917%	11.000%	\$45.03	\$4,911.32

BLENDED ANNUAL PERCENTAGE RATE: 11.00%

*THIS RATE MAY VARY

SPECIAL MESSAGE

TOTAL *FINANCE CHARGE* PAID IN 1999 \$510.34

CUSTOMER SERVICE 1-800-352-0186
PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,050.94	139.62	04/16/00

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
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LOUISVILLE, KY 40285-5440

4265/7000

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D D LEGS
DUBOIS MALL BOX 022
DUBOIS PA 15801-0022

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4489709860011335000505094000013962



ACCOUNT SUMMARY

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$50.00
Available for Cash Advance \$0.00
Days in Billing Cycle 30
Statement Closing Date 03/22/00

Previous Balance	\$5,001.41
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$45.03
Other Charges	\$4.50
New Balance	\$5,050.94
Past Due Balance	\$90.09

YOUR ACCOUNT IS DELINQUENT AND OVERLIMIT. YOUR
CHARGING PRIVILEGES MAY BE REVOKED. IF YOU HAVE
NOT DONE SO, PLEASE REMIT THE TOTAL AMOUNT DUE.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
03/22	03/22		LATE FEE	4.50
03/22	03/22	*FINANCE CHARGE*		45.03

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.917%	11.000%	\$0.00	\$0.00
Current Cash Advances	0.917%	11.000%	\$45.03	\$4,911.32

BLENDED ANNUAL PERCENTAGE RATE: 11.00%

*THIS RATE MAY VARY

TOTAL *FINANCE CHARGE* PAID IN 1999 \$510.34

CUSTOMER SERVICE 1-800-352-0186
PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,997.00	85.68	05/16/00

Account number 4489 7098 6001 1335

Amount Enclosed \$

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 85440
LOUISVILLE, KY 40285-5440

4265/7000

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

5733



4489709860011335000499700000008568



ACCOUNT SUMMARY

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$3.00
Available for Cash Advance \$3.00
Days in Billing Cycle 30
Statement Closing Date 04/21/00

Previous Balance	\$5,050.94
Payments/Credits	\$100.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$46.06
Other Charges	\$0.00
New Balance	\$4,997.00
Past Due Balance	\$39.62

A FRIENDLY REMINDER TO A VALUED CUSTOMER.
IF YOU HAVE NOT ALREADY DONE SO, PLEASE REMIT
THE AMOUNT PAST DUE.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
04/06	04/06	7448970FJSBZKJDNM	PAYMENT-THANK YOU PENNSYLVANIA PA	100.00CR
04/21	04/21	*FINANCE CHARGE*		46.06

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.938%	11.250%	\$0.00	\$0.00
Current Cash Advances	0.938%	11.250%	\$46.06	\$4,911.32

BLENDED ANNUAL PERCENTAGE RATE: 11.25%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,048.01	136.69	06/16/00

Account number 4489 7098 6001 1335

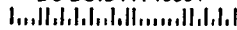
Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856440
LOUISVILLE, KY 40285-6440

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

14337



4489709860011335000504801000013669



ACCOUNT SUMMARY

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$48.00-
Available for Cash Advance \$0.00
Days in Billing Cycle 31
Statement Closing Date 05/22/00

Previous Balance	\$4,997.00
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$47.05
Other Charges	\$3.96
New Balance	\$5,048.01
Past Due Balance	\$85.68

**YOUR ACCOUNT IS DELINQUENT. YOUR ACCOUNT
PRIVILEGES MAY BE REVOKED. IF YOU HAVE NOT
DONE SO, PLEASE REMIT THE AMOUNT PAST DUE.**

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
05/22	05/22		LATE FEE	3.96
05/22	05/22	*FINANCE CHARGE*		47.05

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.958%	11.500%	\$0.00	\$0.00
Current Cash Advances	0.958%	11.500%	\$47.05	\$4,911.32

BLENDING ANNUAL PERCENTAGE RATE: 11.50%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186
PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,995.06	83.74	07/16/00

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856440
LOUISVILLE, KY 40285-6440

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

2543



4489709860011335000499506000008374



ACCOUNT SUMMARY

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$4.00
Available for Cash Advance \$4.00
Days in Billing Cycle 30
Statement Closing Date 06/21/00

Previous Balance	\$5,048.01
Payments/Credits	\$100.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$47.05
Other Charges	\$0.00
New Balance	\$4,995.06
Past Due Balance	\$36.69

A FRIENDLY REMINDER TO A VALUED CUSTOMER.
IF YOU HAVE NOT ALREADY DONE SO, PLEASE REMIT
THE AMOUNT PAST DUE.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
05/26	05/26	7448970H8SQ1QSLPZ	PAYMENT*THANK YOU PENNSYLVANIA PA	100.00CR
06/21	06/21	*FINANCE CHARGE*		47.05

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.958%	11.500%	\$0.00	\$0.00
Current Cash Advances	0.958%	11.500%	\$47.05	\$4,911.32

BLENDED ANNUAL PERCENTAGE RATE: 11.50%

*THIS RATE MAY VARY

SPECIAL MESSAGES

EFFECTIVE IMMEDIATELY - NEW PAYMENT REMITTANCE ADDRESS

PO BOX 856440

LOUISVILLE KY 40285-6440

PLEASE NOTIFY ALL BILL PAYMENT SERVICES, SUCH AS
ONLINE BANKING, OF THE NEW ADDRESS TO AVOID
PAYMENT PROCESSING DELAYS.

CUSTOMER SERVICE 1-800-352-0186

PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.

NationalCity.

P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,944.03	48.97	08/18/00

Account number 4489 7098 6001 1335

Amount Enclosed \$

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856440
LOUISVILLE, KY 40285-6440

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

1490

4489709860011335000494403000004897

NationalCity.

ACCOUNT SUMMARY

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$55.00
Available for Cash Advance \$55.00
Days in Billing Cycle 33
Statement Closing Date 07/24/00

Previous Balance	\$4,995.06
Payments/Credits	\$100.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$48.97
Other Charges	\$0.00
New Balance	\$4,944.03

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
06/27	06/27	7448970J5SQ1QPK2W	PAYMENT*THANK YOU PENNSYLVANIA PA	100.00CR
07/24	07/24	*FINANCE CHARGE*		48.97

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	1.000%	12.000%	\$0.00	\$0.00
Current Cash Advances	1.000%	12.000%	\$48.97	\$4,897.52

BLENDED ANNUAL PERCENTAGE RATE: 12.00%

*THIS RATE MAY VARY

SPECIAL MESSAGES

EFFECTIVE IMMEDIATELY - NEW PAYMENT REMITTANCE ADDRESS

PO BOX 856440

LOUISVILLE KY 40285-6440

PLEASE NOTIFY ALL BILL PAYMENT SERVICES, SUCH AS
ONLINE BANKING, OF THE NEW ADDRESS TO AVOID
PAYMENT PROCESSING DELAYS.

CUSTOMER SERVICE 1-800-352-0186
PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,884.03	0.00	09/16/00

Account number 4489 7098 6001 1335

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856440
LOUISVILLE, KY 40285-6440

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801



4489709860011335000488403000000000

**ACCOUNT SUMMARY**

Account number 4489 7098 6001 1335
Credit Limit \$5,000.00
Available Credit \$115.00
Available for Cash Advance \$115.00
Days in Billing Cycle 29
Statement Closing Date 08/22/00

Previous Balance	\$4,944.03
Payments/Credits	\$60.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$0.00
Other Charges	\$0.00
New Balance	\$4,884.03

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
08/07	08/07	7448970KESQ1QRS53	PAYMENT*THANK YOU PENNSYLVANIA PA	60.00CR

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	1.000%	12.000%	\$0.00	\$0.00
Current Cash Advances	1.000%	12.000%	\$0.00	\$0.00

BLENDED ANNUAL PERCENTAGE RATE: 12.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186
PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,932.91	48.88	09/18/00

Account number 4857 0581 1100 7047

Amount Enclosed \$

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856440
LOUISVILLE, KY 40285-6440

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

26885

4857058111007047000493291000004888



ACCOUNT SUMMARY

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$67.00
Available for Cash Advance \$67.00
Days in Billing Cycle 31
Statement Closing Date 08/24/00

Previous Balance	\$0.00
Payments/Credits	\$60.00
Purchases/Debits	\$4,944.03
Cash Advances	\$0.00
Finance Charges	\$48.88
Other Charges	\$0.00
New Balance	\$4,932.91

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
08/07	08/07	7448970KESQ1QRS53	PAYMENT*THANK YOU PENNSYLVANIA PA	60.00CR
08/23	08/23	00000000000ATNEWA	BALANCE TRANSFER 4489 7098 6001 1335	4,944.03
08/24	08/24		*FINANCE CHARGE*	48.88

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	1.000%	12.000%	\$0.00	\$0.00
Current Cash Advances	1.000%	12.000%	\$48.88	\$4,888.65

BLENDED ANNUAL PERCENTAGE RATE: 12.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,931.74	48.83	10/21/00

Account number 4857 0581 1100 7047

Amount Enclosed \$

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856440
LOUISVILLE, KY 40285-6440

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

27146

4857058111007047000493174000004883



ACCOUNT SUMMARY

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$68.00
Available for Cash Advance \$68.00
Days in Billing Cycle 33
Statement Closing Date 09/26/00

Previous Balance	\$4,932.91
Payments/Credits	\$50.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$48.83
Other Charges	\$0.00
New Balance	\$4,931.74

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
09/05	09/05	7443603LBSQ1DWGPH	PAYMENT*THANK YOU KALAMAZOO MI	50.00CR
09/26	09/26		*FINANCE CHARGE*	48.83

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	1.000%	12.000%	\$0.00	\$0.00
Current Cash Advances	1.000%	12.000%	\$48.83	\$4,883.28

BLENDED ANNUAL PERCENTAGE RATE: 12.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186
PO BOX 1421 FRANKLIN PA 16323-5421

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P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,930.55	48.81	11/19/00

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

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LOUISVILLE, KY 40285-6440

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

27307



4857058111007047000493055000004881



ACCOUNT SUMMARY

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$69.00
Available for Cash Advance \$69.00
Days in Billing Cycle 29
Statement Closing Date 10/25/00

Previous Balance	\$4,931.74
Payments/Credits	\$50.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$48.81
Other Charges	\$0.00
New Balance	\$4,930.55

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
10/03	10/03	7443603M7SQ1D9X12	PAYMENT*THANK YOU KALAMAZOO MI	50.00CR
10/25	10/25		*FINANCE CHARGE*	48.81

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	1.000%	12.000%	\$0.00	\$0.00
Current Cash Advances	1.000%	12.000%	\$48.81	\$4,881.98

BLENDED ANNUAL PERCENTAGE RATE: 12.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186
PO BOX 1421 FRANKLIN PA 16323-5421

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P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,929.36	48.81	12/19/00

Account number 4857 0581 1100 7047

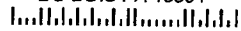
Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

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LOUISVILLE, KY 40285-6440

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

1080



4857058111007047000492936000004881



ACCOUNT SUMMARY

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$70.00
Available for Cash Advance \$70.00
Days in Billing Cycle 30
Statement Closing Date 11/24/00

Previous Balance	\$4,930.55
Payments/Credits	\$50.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$48.81
Other Charges	\$0.00
New Balance	\$4,929.36

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
11/14	11/14	7443603NHSQ1DFQS0	PAYMENT*THANK YOU KALAMAZOO MI	50.00CR
11/24	11/24		*FINANCE CHARGE*	48.81

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	1.000%	12.000%	\$0.00	\$0.00
Current Cash Advances	1.000%	12.000%	\$48.81	\$4,881.30

BLENDED ANNUAL PERCENTAGE RATE: 12.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,978.16	97.61	01/20/01

Account number 4857 0581 1100 7047

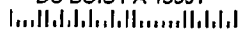
Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856440
LOUISVILLE, KY 40285-6440

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

28565



4857058111007047000497816000009761



ACCOUNT SUMMARY

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$21.00
Available for Cash Advance \$21.00
Days in Billing Cycle 32
Statement Closing Date 12/26/00

Previous Balance	\$4,929.36
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$48.80
Other Charges	\$0.00
New Balance	\$4,978.16
Past Due Balance	\$48.81

A FRIENDLY REMINDER TO A VALUED CUSTOMER.
IF YOU HAVE NOT ALREADY DONE SO, PLEASE REMIT
THE AMOUNT PAST DUE.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
12/26	12/26		*FINANCE CHARGE*	48.80

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	1.000%	12.000%	\$0.00	\$0.00
Current Cash Advances	1.000%	12.000%	\$48.80	\$4,880.55

BLENDED ANNUAL PERCENTAGE RATE: 12.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

PO BOX 1421 FRANKLIN PA 16323-5421

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P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,976.96	96.41	02/18/01

Account number 4857 0581 1100 7047

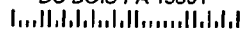
Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856440
LOUISVILLE, KY 40285-6440

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

27757



485705811100704700049769600009641



ACCOUNT SUMMARY

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$23.00
Available for Cash Advance \$23.00
Days in Billing Cycle 29
Statement Closing Date 01/24/01

Previous Balance	\$4,978.16
Payments/Credits	\$50.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$48.80
Other Charges	\$0.00
New Balance	\$4,976.96
Past Due Balance	\$47.61

A FRIENDLY REMINDER TO A VALUED CUSTOMER.
IF YOU HAVE NOT ALREADY DONE SO, PLEASE REMIT
THE AMOUNT PAST DUE

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
01/02	01/02	744360304SQ1GELFM	PAYMENT*THANK YOU KALAMAZOO MI	50.00CR
01/24	01/24		*FINANCE CHARGE*	48.80

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	1.000%	12.000%	\$0.00	\$0.00
Current Cash Advances	1.000%	12.000%	\$48.80	\$4,880.55

BLENDED ANNUAL PERCENTAGE RATE: 12.00%

*THIS RATE MAY VARY

TOTAL *FINANCE CHARGE* PAID IN 2000 \$523.31

CUSTOMER SERVICE 1-800-352-0186
PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,925.73	48.77	03/20/01

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856440
LOUISVILLE, KY 40285-6440

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

4976

4857058111007047000492573000004877

**ACCOUNT SUMMARY**

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$74.00
Available for Cash Advance \$74.00
Days in Billing Cycle 30
Statement Closing Date 02/23/01

Previous Balance	\$4,976.96
Payments/Credits	\$100.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$48.77
Other Charges	\$0.00
New Balance	\$4,925.73

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
02/02	02/02	744360311SQ1QWT3H	PAYMENT*THANK YOU KALAMAZOO MI	100.00CR
02/23	02/23		*FINANCE CHARGE*	48.77

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	1.000%	12.000%	\$0.00	\$0.00
Current Cash Advances	1.000%	12.000%	\$48.77	\$4,877.91

BLENDLED ANNUAL PERCENTAGE RATE: 12.00%

*THIS RATE MAY VARY

TOTAL *FINANCE CHARGE* PAID IN 2000 \$523.31

SPECIAL MESSAGES

CONNECTIONS GIVES YOU ACCESS TO YOUR ACCOUNTS AND THE INFORMATION YOU NEED TO HELP MANAGE YOUR COMPANY. ASK ABOUT OUR COLLECTION OF CONVENIENT CONNECTIONS PRODUCTS AND SERVICES WHEN YOU CALL 888-NCB-4BIZ (888-622-4249).

CUSTOMER SERVICE 1-800-352-0186
PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.



*P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,922.44	46.71	04/20/01

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000492244000004671

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

|||||

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

13637

|||||

485 5000 0080 705811007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$77.00
Available for Cash Advance \$77.00
Days in Billing Cycle 31
Statement Closing Date 03/26/01
Payment Due Date 04/20/01

Previous Balance	\$4,925.73
Payments/Credits	\$50.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$46.71
Other Charges	\$0.00
New Balance	\$4,922.44
Minimum Payment	\$46.71

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
03/16	03/16	74436032FSQ1QW5JE	PAYMENT*THANK YOU KALAMAZOO MI	50.00CR
03/26	03/26		*FINANCE CHARGE*	46.71

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.958%	11.500%	\$0.00	\$0.00
Current Cash Advances	0.958%	11.500%	\$46.71	\$4,876.52

BLENDED ANNUAL PERCENTAGE RATE: 11.50%

*THIS RATE MAY VARY

TOTAL *FINANCE CHARGE* PAID IN 2000 \$523.31

SPECIAL MESSAGES

DO YOUR SMALL BUSINESS ONLINE BANKING ANYTIME AND ANYWHERE
WITH SMALL BUSINESS ONLINE BANKING. FOR DETAILS, VISIT
WWW.NCB4BIZONLINE.COM OR CALL 888-NCB-4BIZ (622-4249).

CUSTOMER SERVICE 1-800-352-0186

PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,917.14	44.70	05/19/01

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000491714000004470

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

|||||

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

13794

|||||

485 5000 0080 705811007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$82.00
Available for Cash Advance \$82.00
Days in Billing Cycle 29
Statement Closing Date 04/24/01
Payment Due Date 05/19/01

Previous Balance \$4,922.44
Payments/Credits \$50.00
Purchases/Debits \$0.00
Cash Advances \$0.00
Finance Charges \$44.70
Other Charges \$0.00
New Balance \$4,917.14
Minimum Payment \$44.70

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
04/20	04/20	74436033G9Z0090A1	BRANCH PAYMENT THANK YOU* MI	50.00CR
04/24	04/24		*FINANCE CHARGE*	44.70

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.917%	11.000%	\$0.00	\$0.00
Current Cash Advances	0.917%	11.000%	\$44.70	\$4,875.16

BLENDED ANNUAL PERCENTAGE RATE: 11.00%

*THIS RATE MAY VARY

SPECIAL MESSAGES

EFFECTIVE IMMEDIATELY - NEW PAYMENT REMITTANCE ADDRESS
PO BOX 856176

LOUISVILLE KY 40285-6176

PLEASE NOTIFY BILL PAYMENT SERVICES, SUCH AS ONLINE BANKING,
OF THIS NEW ADDRESS TO AVOID PAYMENT PROCESSING DELAYS.

CUSTOMER SERVICE 1-800-352-0186

PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.



P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,909.75	42.61	06/17/01

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000490975000004261

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
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LOUISVILLE, KY 40285-6176



DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

12890



485 5000 0080 7058111007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$90.00
Available for Cash Advance \$90.00
Days in Billing Cycle 29
Statement Closing Date 05/23/01
Payment Due Date 06/17/01

Previous Balance	\$4,917.14
Payments/Credits	\$50.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$42.61
Other Charges	\$0.00
New Balance	\$4,909.75
Minimum Payment	\$42.61

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
05/15	05/15	7443603489Z03B3DX	BRANCH PAYMENT THANK YOU* MI	50.00CR
05/23	05/23		*FINANCE CHARGE*	42.61

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.875%	10.500%	\$0.00	\$0.00
Current Cash Advances	0.875%	10.500%	\$42.61	\$4,870.79

BLENDED ANNUAL PERCENTAGE RATE: 10.50%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

PO BOX 1421 FRANKLIN PA 16323-5421

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P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,900.25	40.50	07/20/01

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____
Address change? Print new address on back of statement

4857058111007047000490025000004050

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12242

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485 5000 0080 705811007047 001

National City.

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$99.00
Available for Cash Advance \$99.00
Days in Billing Cycle 33
Statement Closing Date 06/25/01
Payment Due Date 07/20/01

Previous Balance \$4,909.75
Payments/Credits \$50.00
Purchases/Debits \$0.00
Cash Advances \$0.00
Finance Charges \$40.50
Other Charges \$0.00
New Balance \$4,900.25
Minimum Payment \$40.50

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
06/04	06/04	74436034W9Z05QJWZ	BRANCH PAYMENT THANK YOU* MI	50.00CR
06/25	06/25		*FINANCE CHARGE*	40.50

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.833%	10.000%	\$0.00	\$0.00
Current Cash Advances	0.833%	10.000%	\$40.50	\$4,862.21

BLENDED ANNUAL PERCENTAGE RATE: 10.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186
PO BOX 1421 FRANKLIN PA 16323-5421

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P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,898.23	38.48	08/19/01

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000489823000003848

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12842

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485 5000 0080 705811007047 001

NationalCity.

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$101.00
Available for Cash Advance \$101.00
Days in Billing Cycle 30
Statement Closing Date 07/25/01
Payment Due Date 08/19/01

Previous Balance	\$4,900.25
Payments/Credits	\$40.50
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$38.48
Other Charges	\$0.00
New Balance	\$4,898.23
Minimum Payment	\$38.48

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
07/24	07/24	74436036E9Z0PAE3Z	BRANCH PAYMENT THANK YOU* MI	40.50CR
07/25	07/25		*FINANCE CHARGE*	38.48

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.792%	9.500%	\$0.00	\$0.00
Current Cash Advances	0.792%	9.500%	\$38.48	\$4,859.75

BLENDED ANNUAL PERCENTAGE RATE: 9.50%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

PO BOX 1421 FRANKLIN PA 16323-5421

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P.O. BOX 1300
FRANKLIN, PA 16323

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,886.70	38.47	09/18/01

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000488670000003847

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12242



485 5000 0080 7058111007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$113.00
Available for Cash Advance \$113.00
Days in Billing Cycle 30
Statement Closing Date 08/24/01
Payment Due Date 09/18/01

Previous Balance	\$4,898.23
Payments/Credits	\$50.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$38.47
Other Charges	\$0.00
New Balance	\$4,886.70
Minimum Payment	\$38.47

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
08/20	08/20	7443603799Z0400EY	BRANCH PAYMENT	50.00CR
08/24	08/24		*FINANCE CHARGE*	38.47

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.792%	9.500%	\$0.00	\$0.00
Current Cash Advances	0.792%	9.500%	\$38.47	\$4,857.83

BLENDED ANNUAL PERCENTAGE RATE: 9.50%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186
PO BOX 1421 FRANKLIN PA 16323-5421

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P.O. BOX 5570
CLEVELAND, OH 44101

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,864.02	37.32	10/21/01

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000486402000003732

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DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

12537



485 5000 0080 705811007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$135.00
Available for Cash Advance \$135.00
Days in Billing Cycle 33
Statement Closing Date 09/26/01
Payment Due Date 10/21/01

Previous Balance	\$4,886.70
Payments/Credits	\$60.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$37.32
Other Charges	\$0.00
New Balance	\$4,864.02
Minimum Payment	\$37.32

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
09/17	09/17	7443603859YZPHXRK	BRANCH PAYMENT	60.00CR
09/26	09/26		*FINANCE CHARGE*	37.32

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.771%	9.250%	\$0.00	\$0.00
Current Cash Advances	0.771%	9.250%	\$37.32	\$4,841.70

BLENDED ANNUAL PERCENTAGE RATE: 9.25%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186

PO BOX 1421 FRANKLIN PA 16323-5421

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P.O. BOX 5570
CLEVELAND, OH 44101

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,900.22	73.52	11/19/01

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000490022000007352

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12473



485 5000 0080 7058111007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$99.00
Available for Cash Advance \$99.00
Days in Billing Cycle 29
Statement Closing Date 10/25/01
Payment Due Date 11/19/01

Previous Balance	\$4,864.02
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$36.20
Other Charges	\$0.00
New Balance	\$4,900.22
Minimum Payment	\$73.52
Past Due Balance	\$37.32

A FRIENDLY REMINDER TO A VALUED CUSTOMER.
IF YOU HAVE NOT ALREADY DONE SO, PLEASE REMIT
THE AMOUNT PAST DUE.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
10/25	10/25		*FINANCE CHARGE*	36.20

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.750%	9.000%	\$0.00	\$0.00
Current Cash Advances	0.750%	9.000%	\$36.20	\$4,826.70

BLENDED ANNUAL PERCENTAGE RATE: 9.00%

*THIS RATE MAY VARY

SPECIAL MESSAGES

BIG PLANS FOR SMALL BUSINESS: 401(K), PROFIT SHARING, SIMPLE
IRA ... JOIN NATIONAL CITY FOR A SMALL BUSINESS TELESEMINAR ON
10/25/01. YOU'LL LEARN MORE ABOUT THE VARIETY OF RETIREMENT
PLANS AVAILABLE AND HOW THEY CAN WORK FOR YOU. FOR DETAILS,
VISIT NATIONALCITYSEMINARS.COM.

CUSTOMER SERVICE 1-800-352-0186
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P.O. BOX 5570
CLEVELAND, OH 44101

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,938.12	111.42	12/21/01

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000493812000011142

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NationalCity.

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$61.00
Available for Cash Advance \$61.00
Days in Billing Cycle 32
Statement Closing Date 11/26/01
Payment Due Date 12/21/01

Previous Balance	\$4,900.22
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$34.17
Other Charges	\$3.73
New Balance	\$4,938.12
Minimum Payment	\$111.42
Past Due Balance	\$73.52

YOUR ACCOUNT IS DELINQUENT. YOUR ACCOUNT
PRIVILEGES MAY BE REVOKED. IF YOU HAVE NOT
DONE SO, PLEASE REMIT THE AMOUNT PAST DUE.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
11/26	11/26		LATE FEE	3.73
11/26	11/26		*FINANCE CHARGE*	34.17

FINANCE CHARGES SUMMARY

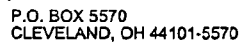
RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.708%	8.500%	\$0.00	\$0.00
Current Cash Advances	0.708%	8.500%	\$34.17	\$4,826.70

BLENDED ANNUAL PERCENTAGE RATE: 8.50%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-800-352-0186
PO BOX 1421 FRANKLIN PA 16323-5421

Notice: See reverse side for important information on your account.



New Balance	Minimum Payment	Due Date
4,858.89	32.19	01/20/02

Address change? Print new address on back of statement

48570581110070470004858890000003219

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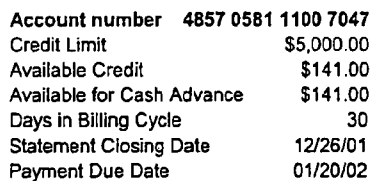
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TL 283
DU BOIS PA 15801

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485 5000 0080 7058111007047 001



Previous Balance	\$4,938.12
Payments/Credits	\$111.42
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$32.19
Other Charges	\$0.00
New Balance	\$4,858.89
Minimum Payment	\$32.19

Tran Date	Post Date	Reference Number	Description	Amount
12/04	12/04	7443603AK9Z00KNRA	BRANCH PAYMENT THANK YOU* MI	111.42CR
12/26	12/26		*FINANCE CHARGE*	32.19

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.667%	8.000%	\$0.00	\$0.00
Current Cash Advances	0.667%	8.000%	\$32.19	\$4,826.70

***THIS RATE MAY VARY**

Notice: See reverse side for important information on your account.



P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,849.05	30.16	02/18/02

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000484905000003016

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DU BOIS PA 15801

6136

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485 5000 0080 705811007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$150.00
Available for Cash Advance \$150.00
Days in Billing Cycle 29
Statement Closing Date 01/24/02
Payment Due Date 02/18/02

Previous Balance	\$4,858.89
Payments/Credits	\$40.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$30.16
Other Charges	\$0.00
New Balance	\$4,849.05
Minimum Payment	\$30.16

TRANSACTIONS

Tran	Post	Reference Number	Description	Amount
Date	Date			
01/22	01/22	7443603D79YZP8FF5	BRANCH PAYMENT	40.00CR
01/24	01/24		THANK YOU* MI	
			FINANCE CHARGE	30.16

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.625%	7.500%	\$0.00	\$0.00
Current Cash Advances	0.625%	7.500%	\$30.16	\$4,825.89

BLENDED ANNUAL PERCENTAGE RATE: 7.50%

*THIS RATE MAY VARY

TOTAL *FINANCE CHARGE* PAID IN 2001 \$558.07

CUSTOMER SERVICE 1-877-845-9900

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.



P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,838.12	29.07	03/22/02

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000483812000002907

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DU BOIS PA 15801

5785



485 5000 0080 705811007047 001

National City.

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$161.00
Available for Cash Advance \$161.00
Days in Billing Cycle 32
Statement Closing Date 02/25/02
Payment Due Date 03/22/02

Previous Balance	\$4,849.05
Payments/Credits	\$40.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$29.07
Other Charges	\$0.00
New Balance	\$4,838.12
Minimum Payment	\$29.07

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
02/08	02/08	7443603DT9Z04J2ZD	BRANCH PAYMENT	40.00CR
02/25	02/25		*FINANCE CHARGE*	29.07

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.604%	7.250%	\$0.00	\$0.00
Current Cash Advances	0.604%	7.250%	\$29.07	\$4,813.35

BLENDED ANNUAL PERCENTAGE RATE: 7.25%

*THIS RATE MAY VARY

TOTAL *FINANCE CHARGE* PAID IN 2001 \$558.07

CUSTOMER SERVICE 1-877-845-9900

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

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NationalCity.

P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,817.09	28.97	04/19/02

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000481709000002897

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29295

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485 5000 0080 705811007047 001

NationalCity.

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$182.00
Available for Cash Advance \$182.00
Days in Billing Cycle 28
Statement Closing Date 03/25/02
Payment Due Date 04/19/02

Previous Balance	\$4,838.12
Payments/Credits	\$50.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$28.97
Other Charges	\$0.00
New Balance	\$4,817.09
Minimum Payment	\$28.97

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
03/11	03/11	7443603EP9YZPYA8A	BRANCH PAYMENT THANK YOU* MI	50.00CR
03/25	03/25		*FINANCE CHARGE*	28.97

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.604%	7.250%	\$0.00	\$0.00
Current Cash Advances	0.604%	7.250%	\$28.97	\$4,797.83

BLENDED ANNUAL PERCENTAGE RATE: 7.25%

*THIS RATE MAY VARY

TOTAL *FINANCE CHARGE* PAID IN 2001 \$558.07

CUSTOMER SERVICE 1-877-845-9900

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

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P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,816.00	28.91	05/18/02

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000481600000002891

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D D LEGS
TL 283
DU BOIS PA 15801

4659



485 5000 0080 705811007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$184.00
Available for Cash Advance \$184.00
Days in Billing Cycle 29
Statement Closing Date 04/23/02
Payment Due Date 05/18/02

Previous Balance	\$4,817.09
Payments/Credits	\$30.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$28.91
Other Charges	\$0.00
New Balance	\$4,816.00
Minimum Payment	\$28.91

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
04/08	04/08	7443603FK9Z04LF37	BRANCH PAYMENT THANK YOU* MI	30.00CR
04/23	04/23		*FINANCE CHARGE*	28.91

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.604%	7.250%	\$0.00	\$0.00
Current Cash Advances	0.604%	7.250%	\$28.91	\$4,787.55

BLENDED ANNUAL PERCENTAGE RATE: 7.25%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.



P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,844.91	57.82	06/17/02

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000484491000005782

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D D LEGS
TL 283
DU BOIS PA 15801

18758

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485 5000 0080 7058111007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$155.00
Available for Cash Advance \$155.00
Days in Billing Cycle 30
Statement Closing Date 05/23/02
Payment Due Date 06/17/02

Previous Balance	\$4,816.00
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$28.91
Other Charges	\$0.00
New Balance	\$4,844.91
Minimum Payment	\$57.82
Past Due Balance	\$28.91

A FRIENDLY REMINDER TO A VALUED CUSTOMER. IF
YOU HAVE NOT ALREADY DONE SO, PLEASE REMIT THE
AMOUNT DUE.

TRANSACTIONS

Tran	Post	Reference Number	Description	Amount
Date	Date			
05/23	05/23		*FINANCE CHARGE*	28.91

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.604%	7.250%	\$0.00	\$0.00
Current Cash Advances	0.604%	7.250%	\$28.91	\$4,787.09

BLENDED ANNUAL PERCENTAGE RATE: 7.25%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.

NationalCity.

P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,826.71	39.62	07/20/02

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000482671000003962

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

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DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

22388

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485 5000 0080 705811007047 001

NationalCity.

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$173.00
Available for Cash Advance \$173.00
Days in Billing Cycle 33
Statement Closing Date 06/25/02
Payment Due Date 07/20/02

Previous Balance	\$4,844.91
Payments/Credits	\$50.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$28.91
Other Charges	\$2.89
New Balance	\$4,826.71
Minimum Payment	\$39.62

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
06/10	06/10	7443603HJ9Z0DBLS8	BRANCH PAYMENT THANK YOU* MI	50.00CR
06/25	06/25		LATE FEE	2.89
06/25	06/25		*FINANCE CHARGE*	28.91

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.604%	7.250%	\$0.00	\$0.00
Current Cash Advances	0.604%	7.250%	\$28.91	\$4,787.09

BLENDED ANNUAL PERCENTAGE RATE: 7.25%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.



P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,855.62	68.53	08/19/02

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000485562000006853

PLEASE MAKE CHECK PAYABLE TO:

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P.O. BOX 856176
LOUISVILLE, KY 40285-6176



DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

3877



485 5000 0080 7058111007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$144.00
Available for Cash Advance \$144.00
Days in Billing Cycle 30
Statement Closing Date 07/25/02
Payment Due Date 08/19/02

Previous Balance	\$4,826.71
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$28.91
Other Charges	\$0.00
New Balance	\$4,855.62
Minimum Payment	\$68.53
Past Due Balance	\$39.62

A FRIENDLY REMINDER TO A VALUED CUSTOMER. IF
YOU HAVE NOT ALREADY DONE SO, PLEASE REMIT THE
AMOUNT DUE.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
07/25	07/25		*FINANCE CHARGE*	28.91

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.604%	7.250%	\$0.00	\$0.00
Current Cash Advances	0.604%	7.250%	\$28.91	\$4,787.09

BLENDED ANNUAL PERCENTAGE RATE: 7.25%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.



P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,814.52	28.90	09/20/02

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000481452000002890

PLEASE MAKE CHECK PAYABLE TO:

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LOUISVILLE, KY 40285-6176

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TL 283
DU BOIS PA 15801

6690

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485 5000 0080 705811007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$185.00
Available for Cash Advance \$185.00
Days in Billing Cycle 32
Statement Closing Date 08/26/02
Payment Due Date 09/20/02

Previous Balance	\$4,855.62
Payments/Credits	\$70.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$28.90
Other Charges	\$0.00
New Balance	\$4,814.52
Minimum Payment	\$28.90

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
07/26	07/26	7443603K19YZNHL2J	BRANCH PAYMENT THANK YOU* MI	40.00CR
08/05	08/05	7443603KA9Z07AK5D	BRANCH PAYMENT THANK YOU* MI	30.00CR
08/26	08/26		*FINANCE CHARGE*	28.90

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.604%	7.250%	\$0.00	\$0.00
Current Cash Advances	0.604%	7.250%	\$28.90	\$4,786.07

BLENDED ANNUAL PERCENTAGE RATE: 7.25%

*THIS RATE MAY VARY

SPECIAL MESSAGES

CHOICE, VALUE & PERSONALIZED SERVICE - LOOK TO NATIONAL CITY
FOR ACCESS TO QUALITY HEALTH CARE COVERAGE FOR YOUR
EMPLOYEES AND PROPERTY & CASUALTY COVERAGE FOR YOUR
BUSINESS. SEE THE ENCLOSED INSERT FOR INFORMATION ON HOW
TO CONTACT THE NATIONAL CITY INSURANCE AGENT IN YOUR AREA.

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.

NationalCity.

P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,843.42	57.80	10/20/02

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000484342000005780

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

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D D LEGS
TL 283
DU BOIS PA 15801

3712

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485 5000 0080 705811007047 001

NationalCity.

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$156.00
Available for Cash Advance \$156.00
Days in Billing Cycle 30
Statement Closing Date 09/25/02
Payment Due Date 10/20/02

Previous Balance	\$4,814.52
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$28.90
Other Charges	\$0.00
New Balance	\$4,843.42
Minimum Payment	\$57.80
Past Due Balance	\$28.90

A FRIENDLY REMINDER TO A VALUED CUSTOMER. IF
YOU HAVE NOT ALREADY DONE SO, PLEASE REMIT THE
AMOUNT DUE.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
09/25	09/25		*FINANCE CHARGE*	28.90

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.604%	7.250%	\$0.00	\$0.00
Current Cash Advances	0.604%	7.250%	\$28.90	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 7.25%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.



P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,912.32	126.70	11/18/02

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000491232000012670

PLEASE MAKE CHECK PAYABLE TO:

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P.O. BOX 856176
LOUISVILLE, KY 40285-6176



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D D LEGS
TL 283
DU BOIS PA 15801

4137



485 5000 0080 705811007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 29
Statement Closing Date 10/24/02
Payment Due Date 11/18/02

Previous Balance	\$4,843.42
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$28.90
Other Charges	\$40.00
New Balance	\$4,912.32
Minimum Payment	\$126.70
Past Due Balance	\$57.80

YOUR ACCOUNT IS PAST DUE. PLEASE REMIT PAYMENT
TO AVOID ANY SUSPENSION OF ACCOUNT PRIVILEGES.

TRANSACTIONS

Tran	Post	Reference Number	Description	Amount
Date	Date			
10/24	10/24		LATE FEE	40.00
10/24	10/24		*FINANCE CHARGE*	28.90

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.604%	7.250%	\$0.00	\$0.00
Current Cash Advances	0.604%	7.250%	\$28.90	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 7.25%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.



P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,991.22	205.60	12/20/02

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000499122000020560

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NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

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TL 283
DU BOIS PA 15801

4239

|||||000111007047000499122000020560|||||

485 5000 0080 705811007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 32
Statement Closing Date 11/25/02
Payment Due Date 12/20/02

Previous Balance	\$4,912.32
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$38.90
Other Charges	\$40.00
New Balance	\$4,991.22
Minimum Payment	\$205.60
Past Due Balance	\$126.70

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
11/25	11/25		LATE FEE	40.00
11/25	11/25		*FINANCE CHARGE*	38.90

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.813%	9.750%	\$0.00	\$0.00
Current Cash Advances	0.813%	9.750%	\$38.90	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 9.75%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.



P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,968.16	182.54	01/18/03

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000496816000018254

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

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DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

6136

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485 5000 0080 7058111007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 29
Statement Closing Date 12/24/02
Payment Due Date 01/18/03

Previous Balance	\$4,991.22
Payments/Credits	\$80.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$16.94
Other Charges	\$40.00
New Balance	\$4,968.16
Minimum Payment	\$182.54
Past Due Balance	\$115.60

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
11/25	11/25	7443603NS9YZK2FRS	BRANCH PAYMENT THANK YOU* MI	80.00CR
11/25	11/25		*FINANCE CHARGE* PREV CYCLE CASH ADVANCE	10.00CR
12/24	12/24		LATE FEE	40.00
12/24	12/24		*FINANCE CHARGE*	26.94

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.563%	6.750%	\$0.00	\$0.00
Current Cash Advances	0.563%	6.750%	\$26.94	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 6.75%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.



P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
4,935.10	149.48	02/18/03

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000493510000014948

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

4256

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485 5000 0080 7058111007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 31
Statement Closing Date 01/24/03
Payment Due Date 02/18/03

Previous Balance	\$4,968.16
Payments/Credits	\$100.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$26.94
Other Charges	\$40.00
New Balance	\$4,935.10
Minimum Payment	\$149.48
Past Due Balance	\$82.54

TRANSACTIONS

Tran	Post	Reference Number	Description	Amount
Date	Date			
12/29	12/29	7443603PWSBZL5X3T	PAYMENT*THANK YOU KALAMAZOO MI	100.00CR
01/24	01/24		LATE FEE	40.00
01/24	01/24		*FINANCE CHARGE*	26.94

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.563%	6.750%	\$0.00	\$0.00
Current Cash Advances	0.563%	6.750%	\$26.94	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 6.75%

*THIS RATE MAY VARY

TOTAL *FINANCE CHARGE* PAID IN 2002 \$418.92

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.



P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,014.00	228.38	03/22/03

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000501400000022838

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176



DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

3637



485 5000 0080 705811007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 32
Statement Closing Date 02/25/03
Payment Due Date 03/22/03

Previous Balance	\$4,935.10
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$38.90
Other Charges	\$40.00
New Balance	\$5,014.00
Minimum Payment	\$228.38
Past Due Balance	\$149.48

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
02/25	02/25		LATE FEE	40.00
02/25	02/25		*FINANCE CHARGE*	38.90

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.813%	9.750%	\$0.00	\$0.00
Current Cash Advances	0.813%	9.750%	\$38.90	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 9.75%

*THIS RATE MAY VARY

TOTAL *FINANCE CHARGE* PAID IN 2002 \$418.92

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.



P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,092.90	307.28	04/20/03

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000509290000030728

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176



DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

25328



485 5000 0080 7058111007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 29
Statement Closing Date 03/26/03
Payment Due Date 04/20/03

Previous Balance	\$5,014.00
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$38.90
Other Charges	\$40.00
New Balance	\$5,092.90
Minimum Payment	\$307.28
Past Due Balance	\$228.38

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
03/26	03/26		LATE FEE	40.00
03/26	03/26		*FINANCE CHARGE*	38.90

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.813%	9.750%	\$0.00	\$0.00
Current Cash Advances	0.813%	9.750%	\$38.90	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 9.75%

*THIS RATE MAY VARY

TOTAL *FINANCE CHARGE* PAID IN 2002 \$418.92

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.

NationalCity.

P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,196.80	411.18	05/19/03

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000519680000041118

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

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TL 283
DU BOIS PA 15801

4367

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485 5000 0080 705811007047 001

NationalCity.

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 29
Statement Closing Date 04/24/03
Payment Due Date 05/19/03

Previous Balance	\$5,092.90
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$38.90
Other Charges	\$65.00
New Balance	\$5,196.80
Minimum Payment	\$411.18
Past Due Balance	\$307.28

CONTINUED DELINQUENCY MAY ADVERSELY AFFECT YOUR
CREDIT RATING. TO AVOID FURTHER COLLECTION
ACTION, PAY THE TOTAL AMOUNT DUE

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
04/24	04/24		OVERLIMIT FEE	25.00
04/24	04/24		LATE FEE	40.00
04/24	04/24		*FINANCE CHARGE*	38.90

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.813%	9.750%	\$0.00	\$0.00
Current Cash Advances	0.813%	9.750%	\$38.90	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 9.75%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.

NationalCity.

P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,300.70	515.08	06/17/03

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000530070000051508

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LOUISVILLE, KY 40285-6176

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DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

23638

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485 5000 0080 705811007047 001

NationalCity.

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 29
Statement Closing Date 05/23/03
Payment Due Date 06/17/03

Previous Balance	\$5,196.80
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$38.90
Other Charges	\$65.00
New Balance	\$5,300.70
Minimum Payment	\$515.08
Past Due Balance	\$411.18

CONTINUED DELINQUENCY MAY ADVERSELY AFFECT YOUR
CREDIT RATING. TO AVOID FURTHER COLLECTION
ACTION, PAY THE TOTAL AMOUNT DUE.

TRANSACTIONS

Tran	Post	Reference Number	Description	Amount
Date	Date			
05/23	05/23		OVERLIMIT FEE	25.00
05/23	05/23		LATE FEE	40.00
05/23	05/23		*FINANCE CHARGE*	38.90

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.813%	9.750%	\$0.00	\$0.00
Current Cash Advances	0.813%	9.750%	\$38.90	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 9.75%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.



P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,337.64	251.44	07/19/03

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000533764000025144

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

|||||

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

5574

|||||

485 5000 0080 705811007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 32
Statement Closing Date 06/24/03
Payment Due Date 07/19/03

Previous Balance	\$5,300.70
Payments/Credits	\$20.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$16.94
Other Charges	\$40.00
New Balance	\$5,337.64
Minimum Payment	\$251.44
Past Due Balance	\$194.50

CONTINUED DELINQUENCY MAY ADVERSELY AFFECT YOUR
CREDIT RATING. TO AVOID FURTHER COLLECTION
ACTION, PAY THE TOTAL AMOUNT DUE.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
05/31	05/31	F5625004P00CHGDDA	AUTO-PAY - THANK YOU 3000976971	20.00CR
06/24	06/24		LATE FEE	40.00
06/24	06/24		*FINANCE CHARGE*	16.94

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.354%	4.250%	\$0.00	\$0.00
Current Cash Advances	0.354%	4.250%	\$16.94	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 4.25%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.



P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,333.57	247.37	08/18/03

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000533357000024737

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176



DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801



5755

485 5000 0080 705811007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 30
Statement Closing Date 07/24/03
Payment Due Date 08/18/03

Previous Balance	\$5,337.64
Payments/Credits	\$20.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$15.93
Other Charges	\$0.00
New Balance	\$5,333.57
Minimum Payment	\$247.37
Past Due Balance	\$231.44

CONTINUED DELINQUENCY MAY ADVERSELY AFFECT YOUR
CREDIT RATING. TO AVOID FURTHER COLLECTION
ACTION, PAY THE TOTAL AMOUNT DUE.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
06/30	06/30	F5625005M000PY181	PAYMENT*THANK YOU KALAMAZOO MI	20.00CR
07/24	07/24		*FINANCE CHARGE*	15.93

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.333%	4.000%	\$0.00	\$0.00
Current Cash Advances	0.333%	4.000%	\$15.93	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 4.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.

NationalCity®

P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,329.50	15.93	09/19/03

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000532950000001593

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

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DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

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5595

485 5000 0080 7058111007047 001

NationalCity.

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 32
Statement Closing Date 08/25/03
Payment Due Date 09/19/03

Previous Balance	\$5,333.57
Payments/Credits	\$20.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$15.93
Other Charges	\$0.00
New Balance	\$5,329.50
Minimum Payment	\$15.93

DO NOT USE THIS ACCOUNT UNTIL YOUR BALANCE IS
BELOW YOUR CREDIT LIMIT. IF THIS CONTINUES,
YOUR ACCOUNT IS SUBJECT TO CANCELLATION.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
07/31	07/31	F5625006L000PY212	PAYMENT*THANK YOU KALAMAZOO MI	20.00CR
08/25	08/25		*FINANCE CHARGE*	15.93

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.333%	4.000%	\$0.00	\$0.00
Current Cash Advances	0.333%	4.000%	\$15.93	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 4.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.

NationalCity®

P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,325.43	15.93	10/19/03

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000532543000001593

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

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DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

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27370

485 5000 0080 7058111007047 001

NationalCity.

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 30
Statement Closing Date 09/24/03
Payment Due Date 10/19/03

Previous Balance	\$5,329.50
Payments/Credits	\$20.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$15.93
Other Charges	\$0.00
New Balance	\$5,325.43
Minimum Payment	\$15.93

DO NOT USE THIS ACCOUNT UNTIL YOUR BALANCE IS
BELOW YOUR CREDIT LIMIT. IF THIS CONTINUES,
YOUR ACCOUNT IS SUBJECT TO CANCELLATION.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
08/31	08/31	F5625007K000PY243	PAYMENT*THANK YOU KALAMAZOO MI	20.00CR
09/24	09/24		*FINANCE CHARGE*	15.93

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.333%	4.000%	\$0.00	\$0.00
Current Cash Advances	0.333%	4.000%	\$15.93	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 4.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.



P.O. BOX 5570
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,321.36	15.93	11/18/03

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000532136000001593

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176



DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

4214



485 5000 0080 705811007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 30
Statement Closing Date 10/24/03
Payment Due Date 11/18/03

Previous Balance	\$5,325.43
Payments/Credits	\$20.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$15.93
Other Charges	\$0.00
New Balance	\$5,321.36
Minimum Payment	\$15.93

DO NOT USE THIS ACCOUNT UNTIL YOUR BALANCE IS
BELOW YOUR CREDIT LIMIT. IF THIS CONTINUES,
YOUR ACCOUNT IS SUBJECT TO CANCELLATION.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
09/30	09/30	F5625008H000PY273	PAYMENT*THANK YOU KALAMAZOO MI	20.00CR
10/24	10/24		*FINANCE CHARGE*	15.93

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.333%	4.000%	\$0.00	\$0.00
Current Cash Advances	0.333%	4.000%	\$15.93	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 4.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.

NationalCity.

PO BOX 5570 01-7125
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,337.29	31.86	12/20/03

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000533729000003186

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

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DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

2878

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485 5000 0080 7058111007047 001

NationalCity.

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 32
Statement Closing Date 11/25/03
Payment Due Date 12/20/03

Previous Balance	\$5,321.36
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$15.93
Other Charges	\$0.00
New Balance	\$5,337.29
Minimum Payment	\$31.86
Past Due Balance	\$15.93

YOUR ACCOUNT IS PAST DUE. PLEASE REMIT THE
PAST DUE AMOUNT IMMEDIATELY.

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
11/25	11/25		*FINANCE CHARGE*	15.93

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.333%	4.000%	\$0.00	\$0.00
Current Cash Advances	0.333%	4.000%	\$15.93	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 4.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.



PO BOX 5570 01-7125
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,393.22	87.79	01/18/04

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000539322000008779

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

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DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

2283

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485 5000 0080 7058111007047 001

NationalCity.

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 29
Statement Closing Date 12/24/03
Payment Due Date 01/18/04

Previous Balance	\$5,337.29
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$15.93
Other Charges	\$40.00
New Balance	\$5,393.22
Minimum Payment	\$87.79
Past Due Balance	\$31.86

TRANSACTIONS

Tran Date	Post Date	Reference Number	Description	Amount
12/24	12/24		LATE FEE	40.00
12/24	12/24		*FINANCE CHARGE*	15.93

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.333%	4.000%	\$0.00	\$0.00
Current Cash Advances	0.333%	4.000%	\$15.93	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 4.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.

NationalCity

PO BOX 5570 01-7125
CLEVELAND, OH 44101-5570

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,449.15	143.72	02/20/04

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____
Address change? Print new address on back of statement

4857058111007047000544915000014372

PLEASE MAKE CHECK PAYABLE TO:

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

30895

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

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485 5000 0080 705811007047 001

NationalCity

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 33
Statement Closing Date 01/26/04
Payment Due Date 02/20/04

Previous Balance	\$5,393.22
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$15.93
Other Charges	\$40.00
New Balance	\$5,449.15
Minimum Payment	\$143.72
Past Due Balance	\$87.79

TRANSACTIONS

Tran	Post	Reference Number	Description	Amount
Date	Date			
01/26	01/26		LATE FEE	40.00
01/26	01/26		*FINANCE CHARGE*	15.93

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.333%	4.000%	\$0.00	\$0.00
Current Cash Advances	0.333%	4.000%	\$15.93	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 4.00%

*THIS RATE MAY VARY

TOTAL *FINANCE CHARGE* PAID IN 2003 \$100.00

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.



P.O. BOX 4068
KALAMAZOO, MI 49003

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,505.08	199.65	03/20/04

Account number 4857 0581 1100 7047

Amount Enclosed \$ _____

Address change? Print new address on back of statement

4857058111007047000550508000019965

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

2043

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485 5000 0080 705811007047 001



Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 29
Statement Closing Date 02/24/04
Payment Due Date 03/20/04

Previous Balance	\$5,449.15
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$15.93
Other Charges	\$40.00
New Balance	\$5,505.08
Minimum Payment	\$199.65
Past Due Balance	\$143.72

TRANSACTIONS

Tran	Post	Reference Number	Description	Amount
Date	Date			
02/24	02/24		LATE FEE	40.00
02/24	02/24		*FINANCE CHARGE*	15.93

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.333%	4.000%	\$0.00	\$0.00
Current Cash Advances	0.333%	4.000%	\$15.93	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 4.00%

*THIS RATE MAY VARY

TOTAL *FINANCE CHARGE* PAID IN 2003 \$100.00

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.

NationalCity.

P.O. BOX 4068
KALAMAZOO, MI 49003

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,561.01	255.58	04/18/04

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000556101000025558

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

DEBRA A KLEBACHA DBA
D D LEGS
TL 283
DU BOIS PA 15801

31655

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485 5000 0080 7058111007047 001

NationalCity.

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 29
Statement Closing Date 03/24/04
Payment Due Date 04/18/04

Previous Balance	\$5,505.08
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$15.93
Other Charges	\$40.00
New Balance	\$5,561.01
Minimum Payment	\$255.58
Past Due Balance	\$199.65

CONTINUED DELINQUENCY MAY ADVERSELY AFFECT YOUR
CREDIT RATING. TO AVOID FURTHER COLLECTION
ACTION, PAY THE TOTAL AMOUNT DUE

TRANSACTIONS

Tran	Post	Reference Number	Description	Amount
Date	Date			
03/24	03/24		LATE FEE	40.00
03/24	03/24		*FINANCE CHARGE*	15.93

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.333%	4.000%	\$0.00	\$0.00
Current Cash Advances	0.333%	4.000%	\$15.93	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 4.00%

*THIS RATE MAY VARY

TOTAL *FINANCE CHARGE* PAID IN 2003 \$100.00

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.

NationalCity

P.O. BOX 4068
KALAMAZOO, MI 49003

ACCOUNT SUMMARY

New Balance	Minimum Payment	Due Date
5,616.94	311.51	05/18/04

Account number 4857 0581 1100 7047

Amount Enclosed \$

Address change? Print new address on back of statement

4857058111007047000561694000031151

PLEASE MAKE CHECK PAYABLE TO:

NATIONAL CITY
P.O. BOX 856176
LOUISVILLE, KY 40285-6176

DEBRA A KLEBACHA DBA
D D LEGS
TREASURE LAKE 283
DU BOIS PA 15801

2315

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485 5000 0080 705811007047 001

NationalCity

Account number 4857 0581 1100 7047
Credit Limit \$5,000.00
Available Credit \$0.00
Available for Cash Advance \$0.00
Days in Billing Cycle 30
Statement Closing Date 04/23/04
Payment Due Date 05/18/04

Previous Balance	\$5,561.01
Payments/Credits	\$0.00
Purchases/Debits	\$0.00
Cash Advances	\$0.00
Finance Charges	\$15.93
Other Charges	\$40.00
New Balance	\$5,616.94
Minimum Payment	\$311.51
Past Due Balance	\$255.58

CONTINUED DELINQUENCY MAY ADVERSELY AFFECT YOUR
CREDIT RATING. TO AVOID FURTHER COLLECTION
ACTION, PAY THE TOTAL AMOUNT DUE.

TRANSACTIONS

Tran	Post	Reference Number	Description	Amount
Date	Date			
04/23	04/23		LATE FEE	40.00
04/23	04/23		*FINANCE CHARGE*	15.93

FINANCE CHARGES SUMMARY

RATE TYPE	MONTHLY PERIODIC RATE*	CORRESPONDING ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AVERAGE DAILY BALANCE
Current Purchases	0.333%	4.000%	\$0.00	\$0.00
Current Cash Advances	0.333%	4.000%	\$15.93	\$4,785.62

BLENDED ANNUAL PERCENTAGE RATE: 4.00%

*THIS RATE MAY VARY

CUSTOMER SERVICE 1-888-622-4249

P.O. BOX 3038 K-A16-1J KALAMAZOO, MI 49003-3038

Notice: See reverse side for important information on your account.

CERTIFICATE OF SERVICE

A true and correct copy of Plaintiff's Request for Admissions has been served by U.S.

Mail, on the 10th day of May, 2005, upon the following:

David P. King, Esq.
P.O. Box 1016
23 Beaver Drive
DuBois, PA 15801

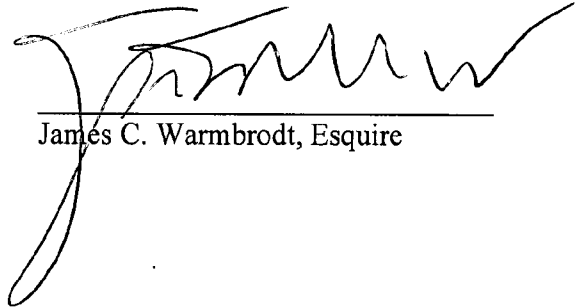
By: 

James C. Warmbrodt, Esquire

VERIFICATION

The undersigned does hereby verify subject to the penalties of 18 Pa.C.S. Section 4904 relating to unsworn falsification to authorities, he is an attorney for the Plaintiff herein; makes this Verification based upon the facts as supplied to him by the Plaintiff and/or its agents and because the Plaintiff is outside the jurisdiction of the court and the Plaintiff's Verification cannot be obtained within the time allowed for filing of this pleading, and that the facts set forth in the foregoing pleading are true and correct to the best of his knowledge, information and belief.

9/20/05
Date



James C. Warmbrodt, Esquire

CERTIFICATE OF SERVICE

A true and correct copy of the within Plaintiff's Motion for Summary Judgment has been served by U.S. Mail, Postage Pre-Paid, on 28th day of September, 2005 upon the following:

David P. King
P.O. Box 1016
23 Beaver Drive
DuBois, PA 15801

BY: 

James C. Warmbrodt, Esquire

FILED

OCT 03 2005

Prothonotary Clerk of Courts
Vernon County, WI

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

NATIONAL CITY BANK

vs.

DEBRA A. KLEBACHA,
d/b/a D D LEGS

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:
:
: No. 04-1525-CD
:
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:

ORDER

AND NOW, this 11th day of October, 2005, upon consideration of

Plaintiff's Motion for Summary Judgment filed in the above matter, it is the Order
of the Court that argument has been scheduled for the 10th day of
November, 2005, at 1:30 P.M., in Courtroom No. 1.

Clearfield County Courthouse, Clearfield, PA.

FILED

OCT 12 2005

William A. Shaw
Prothonotary/Clerk of Courts

BY THE COURT:

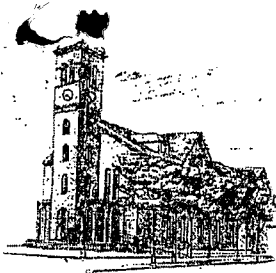


FREDRIC J. AMMERMAN
President Judge

FILED

OCT 12 2005

William A. Shaw
Prothonotary/Clerk of Courts



Clearfield County Office of the Prothonotary and Clerk of Courts

William A. Shaw
Prothonotary/Clerk of Courts

David S. Ammerman
Solicitor

Jacki Kendrick
Deputy Prothonotary

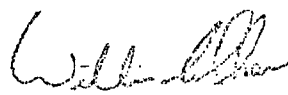
Bonnie Hudson
Administrative Assistant

To: All Concerned Parties

From: William A. Shaw, Prothonotary

Date: September 19, 2005

Over the past several weeks, it has come to my attention that there is some confusion on court orders over the issue of service. To attempt to clear up this question, from this date forward until further notice, this or a similar memo will be attached to each order, indicating responsibility for service on each order or rule. If you have any questions, please contact me at (814) 765-2641, ext. 1331. Thank you.

Sincerely, 

William A. Shaw
Prothonotary

_____ You are responsible for serving all appropriate parties.

X The Prothonotary's office has provided service to the following parties:

X Plaintiff(s)/Attorney(s)

X Defendant(s)/Attorney(s)

_____ Other

_____ Special Instructions:

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

NATIONAL CITY BANK

Plaintiff

vs.

DEBRA A KLEBACHA
D/B/A DD LEGS

Defendant

No. 04-1525CD

PRAECIPE TO SETTLE, DISCONTINUE
and END

FILED ON BEHALF OF
Plaintiff

COUNSEL OF RECORD OF
THIS PARTY:

BENJAMIN R. BIBLER
PA I.D. #93598
WELTMAN, WEINBERG & REIS CO., L.P.A.
2718 Koppers Building
436 Seventh Avenue
Pittsburgh, PA 15219
(412) 434-7955

WWR#03873645

FILED NO CC
m/11-28/07 a
NOV 07 2005 Cert. of Disc.
to Atty
William A Shaw
Prothonotary/Clerk of Courts
Copy to CIA
@

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

NATIONAL CITY BANK

Plaintiff

vs.

Civil Action No. 04-1525CD

DEBRA A KLEBACHA
D/B/A DD LEGS

Defendant

PRAECIPE TO SETTLE DISCONTINUE and END

TO THE PROTHONOTARY OF COUNTY:

Please kindly Settle Discontinue and End the above captioned matter upon the records of the Court and mark the cost paid.

WELTMAN, WEINBERG & REIS CO., L.P.A.

By: 

BENJAMIN R. BIBLER

PA I.D #93598

WELTMAN, WEINBERG & REIS CO., L.P.A.

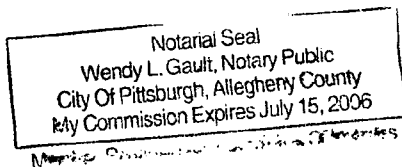
2718 Koppers Building

436 Seventh Avenue

Pittsburgh, PA 15219

(412) 434-7955

WWR#03873645



Sworn to and subscribed

Before me the 31

Day of OCTOBER, 2005


NOTARY PUBLIC


FILED

NOV 07 2005

Walter A. Stew
Prothonotary, Clerk of Courts

**IN THE COURT OF COMMON PLEAS OF
CLEARFIELD COUNTY, PENNSYLVANIA**

CIVIL DIVISION

 **COPY**

National City Bank

Vs.

No. 2004-01525-CD

Debra Ann Klebacha

CERTIFICATE OF DISCONTINUATION

Commonwealth of PA
County of Clearfield

I, William A. Shaw, Prothonotary of the Court of Common Pleas in and for the County and Commonwealth aforesaid do hereby certify that the above case was on November 7, 2005, marked:

Settled, Discontinued and Ended

Record costs in the sum of \$92.00 have been paid in full by Weltman, Weinberg & Reis Co.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal of this Court at Clearfield, Clearfield County, Pennsylvania this 7th day of November A.D. 2005.

William A. Shaw, Prothonotary