

07-124-CD

Jerry Hughes vs Samantha Butzer

Jerry Hughes et vs Samantha Luzier-Butzer
2007-124-CD

COURT OF COMMON PLEAS OF CLEARFIELD COUNTY
PENNSYLVANIA

Terry A. HUGHES
(Plaintiff)

CIVIL ACTION

121 W. 10th Ave.
(Street Address)

No. 2007-124-CD

Clearfield, PA 16830
(City, State ZIP)

Type of Case: Civil

Type of Pleading: Dist. Justice Appeal

VS.

Filed on Behalf of:

Samantha Luzier/Butzer
(Defendant)

Samantha Luzier/Butzer
(Plaintiff/Defendant)

993 Park Ave. Ext. Apt. 5C
(Street Address)

Clearfield, PA 16830
(City, State ZIP)

FILED

JAN 25 2007

07/11:10/wn

William A. Shaw

Prothonotary/Clerk of Courts

NOTICE TO

Samantha Luzier/Butzer M03 Encl
(Filed by)

Jerry Hughes

993 Park Ave. Ext. Apt. 5C
(Address) Clearfield, PA 16830

205-1324
(Phone)

Samantha Butzer
(Signature)

COURT OF COMMON PLEAS

46TH

JUDICIAL DISTRICT

Clearfield County
Court House

FROM

DISTRICT JUSTICE JUDGMENT

COMMON PLEAS No. 2007-124-CD

NOTICE OF APPEAL

Notice is given that the appellant has filed in the above Court of Common Pleas an appeal from the judgment rendered by the District Justice on the date and in the case mentioned below.

NAME OF APPELLANT <u>Samantha Luzier - Butzer</u>		MAG. DIST. NO. OR NAME OF D.J. <u>Richard Ireland</u>	
ADDRESS OF APPELLANT <u>993 Park Ave. Ext. Apt. 5C</u>		CITY <u>Clearfield</u>	STATE <u>PA</u>
DATE OF JUDGMENT <u>12-28-06</u>		ZIP CODE <u>16830</u>	
IN THE CASE OF (Plaintiff) <u>Jerry A. Hughes</u>		(Defendant) <u>SAMANTHA LUZIER - BUTZER</u>	
CLAIM NO. CV <u>0000376-06</u> LT _____		SIGNATURE OF APPELLANT OR HIS ATTORNEY OR AGENT <u>Samantha Butzer</u>	

This block will be signed ONLY when this notation is required under Pa. R.C.P.J.P. No. 1008B.

This Notice of Appeal, when received by the District Justice, will operate as a SUPERSEDEAS to the judgment for possession in this case.

If appellant was CLAIMANT (see Pa. R.C.P.J.P. No. 1001(6) in action before District Justice, he MUST FILE A COMPLAINT within twenty (20) days after filing his NOTICE of APPEAL.

Signature of Prothonotary or Deputy

PRAECIPE TO ENTER RULE TO FILE COMPLAINT AND RULE TO FILE

(This section of form to be used ONLY when appellant was DEFENDANT (see Pa. R.C.P.J.P. No. 1001(7) in action before District Justice. IF NOT USED, detach from copy of notice of appeal to be served upon appellee).

PRAECIPE: To Prothonotary

Enter rule upon JERRY A. HUGHES, appellee(s), to file a complaint in this appeal
Name of appellee(s)

(Common Pleas No. 2007-124-CD) within twenty (20) days after service of rule or suffer entry of judgment of non pros.

RULE: To Jerry A. HUGHES, appellee(s).
Name of appellee(s)

Signature of appellant or his attorney or agent

(1) You are notified that a rule is hereby entered upon you to file a complaint in this appeal within twenty (20) days after the date of service of this rule upon you by personal service or by certified or registered mail.

(2) If you do not file a complaint within this time, a JUDGMENT OF NON PROS WILL BE ENTERED AGAINST YOU.

(3) The date of service of this rule if service was by mail is the date of mailing.

Date: JAN. 25, 2007

Signature of Prothonotary or Deputy
WILLIAM A SHAW

FILED

JAN 25 2007

William A. Shaw
Prothonotary/Clerk of Courts

COURT FILE TO BE FILED WITH PROTHONOTARY

PROOF OF SERVICE OF NOTICE OF APPEAL AND RULE TO FILE COMPLAINT

(This proof of service **MUST BE FILED WITHIN TEN (10) DAYS AFTER** filing the notice of appeal. Check applicable boxes)

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF _____; SS _____

AFFIDAVIT: I hereby swear or affirm that I served

- ☐ a copy of the Notice of Appeal, Common Pleas No. _____, upon the District Justice designated therein on
(date of service) _____, ☐ by personal service ☐ by (certified) (registered) mail, sender's
receipt attached hereto, and upon the appellee, (name) _____, on
_____, ☐ by personal service ☐ by (certified) (registered) mail, sender's receipt attached hereto.
- ☐ and further that I served the Rule to File a Complaint accompanying the above Notice of Appeal upon the appellee(s) to whom
the Rule was addressed on _____, ☐ by personal service ☐ by (certified) (registered)
mail, sender's receipt attached hereto.

SWORN (AFFIRMED) AND SUBSCRIBED BEFORE ME

THIS _____ DAY OF _____, _____

Signature of affiant

Signature of official before whom affidavit was made

Title of official

My commission expires on _____

COURT OF COMMON PLEAS

46TH

JUDICIAL DISTRICT

Clearfield County
Court House

FROM

DISTRICT JUSTICE JUDGMENT

COMMON PLEAS No. 2007-124-CD

NOTICE OF APPEAL

Notice is given that the appellant has filed in the above Court of Common Pleas an appeal from the judgment rendered by the District Justice on the date and in the case mentioned below.

NAME OF APPELLANT

Samantha Luzier - Butzer

MAG. DIST. NO. OR NAME OF D.J.

Richard Ireland

ADDRESS OF APPELLANT

CITY

STATE

ZIP CODE

993 Park Ave - Ext. Apt 5C

Clearfield

PA

16830

DATE OF JUDGMENT

IN THE CASE OF (Plaintiff)

(Defendant)

12-28-06

Jerry A. Hughes

VS. SAMANTHA LUZIER - BUTZER

CLAIM NO.

SIGNATURE OF APPELLANT OR HIS ATTORNEY OR AGENT

CV

00003710-06

LT

Samantha Butzer

This block will be signed ONLY when this notation is required under Pa. R.C.P.J.P. No. 1008B.

This Notice of Appeal, when received by the District Justice, will operate as a SUPERSEDEAS to the judgment for possession in this case.

If appellant was CLAIMANT (see Pa. R.C.P.J.P. No. 1001(6) in action before District Justice, he MUST FILE A COMPLAINT within twenty (20) days after filing his NOTICE of APPEAL.

Signature of Prothonotary or Deputy

PRAECIPE TO ENTER RULE TO FILE COMPLAINT AND RULE TO FILE

(This section of form to be used ONLY when appellant was DEFENDANT (see Pa. R.C.P.J.P. No. 1001(7) in action before District Justice. IF NOT USED, detach from copy of notice of appeal to be served upon appellee).

PRAECIPE: To Prothonotary

Enter rule upon JERRY A. HUGHES, appellee(s), to file a complaint in this appeal

Name of appellee(s)

(Common Pleas No. 2007-124-CD) within twenty (20) days after service of rule or suffer entry of judgment of non pros.

RULE: To Terry A. HUGHES, appellee(s).

Name of appellee(s)

Signature of appellant or his attorney or agent

NOTICE TO

NOT INCL.

(1) You are notified that a rule is hereby entered upon you to file a complaint in this appeal within twenty (20) days after the date of service of this rule upon you by personal service or by certified or registered mail.

JERRY HUGHES

(2) If you do not file a complaint within this time, a JUDGMENT OF NON PROS WILL BE ENTERED AGAINST YOU.

(3) The date of service of this rule if service was by mail is the date of mailing.

Date: JAN. 25, 2007

Signature of Prothonotary or Deputy

WILLIAM A SHAW

PROOF OF SERVICE OF NOTICE OF APPEAL AND RULE TO FILE COMPLAINT

(This proof of service MUST BE FILED WITHIN TEN (10) DAYS AFTER filing the notice of appeal. Check applicable boxes)

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF _____; SS _____

AFFIDAVIT: I hereby swear or affirm that I served

☐ a copy of the Notice of Appeal, Common Pleas No. _____, upon the District Justice designated therein on
(date of service) _____, ☐ by personal service ☐ by (certified) (registered) mail, sender's
receipt attached hereto, and upon the appellee, (name) _____, on

☐ _____, ☐ by personal service ☐ by (certified) (registered) mail, sender's receipt attached hereto.
☐ and further that I served the Rule to File a Complaint accompanying the above Notice of Appeal upon the appellee(s) to whom
the Rule was addressed on _____, ☐ by personal service ☐ by (certified) (registered)
mail, sender's receipt attached hereto.

SWORN (AFFIRMED) AND SUBSCRIBED BEFORE ME

THIS _____ DAY OF _____, _____

Signature of affiant

Signature of official before whom affidavit was made

Title of official

My commission expires on _____, _____

**NOTICE OF JUDGMENT/TRANSCRIPT
CIVIL CASE**

Mag. Dist. No.: **46-3-02**
MDJ Name: Hon. **RICHARD A. IRELAND**
Address: **650 LEONARD ST
STE 113
CLEARFIELD, PA**
Telephone: **(814) 765-5335 16830**

PLAINTIFF: NAME and ADDRESS
**HUGHES, JERRY A.
121 W. 6TH AVE.
CLEARFIELD, PA 16830**

VS.
DEFENDANT: NAME and ADDRESS
**LUZIER-BUTZER, SAMANTHA E.
993 PARK AVE. EXT. APT/STE 5-C
CLEARFIELD, PA 16830**

**SAMANTHA E. LUZIER-BUTZER
993 PARK AVE. EXT. APT/STE 5-C
CLEARFIELD, PA 16830**

Docket No.: **CV-0000376-06**
Date Filed: **11/17/06**



THIS IS TO NOTIFY YOU THAT:

Judgment: **DEFAULT JUDGMENT PLTF** (Date of Judgment) **12/28/06**

☒ Judgment was entered for: (Name) **HUGHES, JERRY A.**

☒ Judgment was entered against: (Name) **LUZIER-BUTZER, SAMANTHA E.**
in the amount of \$ **4,130.02**

☐ Defendants are jointly and severally liable.

☐ Damages will be assessed on Date & Time _____

☐ This case dismissed without prejudice.

☐ Amount of Judgment Subject to Attachment/42 Pa.C.S. § 8127
\$ _____

☐ Portion of Judgment for physical damages arising out of
residential lease \$ _____

Amount of Judgment	\$ 4,006.52
Judgment Costs	\$ 123.50
Interest on Judgment	\$.00
Attorney Fees	\$.00
Total	\$ 4,130.02
Post Judgment Credits	\$ _____
Post Judgment Costs	\$ _____
Certified Judgment Total	\$ _____

ANY PARTY HAS THE RIGHT TO APPEAL WITHIN 30 DAYS AFTER THE ENTRY OF JUDGMENT BY FILING A NOTICE OF APPEAL WITH THE PROTHONOTARY/CLERK OF THE COURT OF COMMON PLEAS, CIVIL DIVISION. YOU MUST INCLUDE A COPY OF THIS NOTICE OF JUDGMENT/TRANSCRIPT FORM WITH YOUR NOTICE OF APPEAL.

EXCEPT AS OTHERWISE PROVIDED IN THE RULES OF CIVIL PROCEDURE FOR MAGISTERIAL DISTRICT JUDGES, IF THE JUDGEMENT HOLDER ELECTS TO ENTER THE JUDGMENT IN THE COURT OF COMMON PLEAS, ALL FURTHER PROCESS MUST COME FROM THE COURT OF COMMON PLEAS AND NO FURTHER PROCESS MAY BE ISSUED BY THE MAGISTERIAL DISTRICT JUDGE.

UNLESS THE JUDGMENT IS ENTERED IN THE COURT OF COMMON PLEAS, ANYONE INTERESTED IN THE JUDGMENT MAY FILE A REQUEST FOR ENTRY OF SATISFACTION WITH THE MAGISTERIAL DISTRICT JUDGE IF THE JUDGMENT DEBTOR PAYS IN FULL, SETTLES, OR OTHERWISE COMPLIES WITH THE JUDGMENT.

DEC 28 2006 Date *Richard A. Ireland*, Magisterial District Judge

I certify that this is a true and correct copy of the record of the proceedings containing the judgment.

_____, Date _____, Magisterial District Judge

My commission expires first Monday of January, **2012**.

SEAL

COMMONWEALTH OF PENNSYLVANIA
COUNTY OF: **CLEARFIELD**

Mag. Dist. No.:	46-3-02
MDJ Name: Hon.	RICHARD A. IRELAND
Address:	650 LEONARD ST STE 113 CLEARFIELD, PA
Telephone: (814) 765-5335	16830

**RICHARD A. IRELAND
650 LEONARD ST
STE 113
CLEARFIELD, PA 16830**

**NOTICE OF JUDGMENT/TRANSCRIPT
CIVIL CASE**

PLAINTIFF: NAME and ADDRESS

**HUGHES, JERRY A.
121 W. 6TH AVE.
CLEARFIELD, PA 16830**

VS.

DEFENDANT: NAME and ADDRESS

**LUZIER-BUTZER, SAMANTHA E.
993 PARK AVE. EXT. APT/STE 5-C
CLEARFIELD, PA 16830**

L **2007-124-CD**

Docket No.: **CV-0000376-06**
Date Filed: **11/17/06**



THIS IS TO NOTIFY YOU THAT:

Judgment: **DEFAULT JUDGMENT PLTF** (Date of Judgment) **12/28/06**

☒ Judgment was entered for: (Name) **HUGHES, JERRY A.**

☒ Judgment was entered against: (Name) **LUZIER-BUTZER, SAMANTHA E.**
in the amount of \$ **4,130.02**

☐ Defendants are jointly and severally liable.

☐ Damages will be assessed on Date & Time _____

☐ This case dismissed without prejudice.

☐ Amount of Judgment Subject to Attachment/42 Pa.C.S. § 8127
\$ _____

☐ Portion of Judgment for physical damages arising out of
residential lease \$ _____

Amount of Judgment	\$ 4,006.52
Judgment Costs	\$ 123.50
Interest on Judgment	\$.00
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Certified Judgment Total	\$ _____

ANY PARTY HAS THE RIGHT TO APPEAL WITHIN 30 DAYS AFTER THE ENTRY OF JUDGMENT BY FILING A NOTICE OF APPEAL WITH THE PROTHONOTARY/CLERK OF THE COURT OF COMMON PLEAS, CIVIL DIVISION. YOU MUST INCLUDE A COPY OF THIS NOTICE OF JUDGMENT/TRANSCRIPT FORM WITH YOUR NOTICE OF APPEAL.

EXCEPT AS OTHERWISE PROVIDED IN THE RULES OF CIVIL PROCEDURE FOR MAGISTERIAL DISTRICT JUDGES, IF THE JUDGMENT HOLDER ELECTS TO ENTER THE JUDGMENT IN THE COURT OF COMMON PLEAS, ALL FURTHER PROCESS MUST COME FROM THE COURT OF COMMON PLEAS AND NO FURTHER PROCESS MAY BE ISSUED BY THE MAGISTERIAL DISTRICT JUDGE.

UNLESS THE JUDGMENT IS ENTERED IN THE COURT OF COMMON PLEAS, ANYONE INTERESTED IN THE JUDGMENT MAY FILE A REQUEST FOR ENTRY OF SATISFACTION WITH THE MAGISTERIAL DISTRICT JUDGE IF THE JUDGMENT DEBTOR PAYS IN FULL, SETTLES, OR OTHERWISE COMPLIES WITH THE JUDGMENT.

FILED

JAN 26 2007

M/1-20-07
William A. Shaw
Prothonotary/Clerk of Courts *(COR)*

DEC 28 2006 Date *Richard A. Ireland*, Magisterial District Judge

I certify that this is a true and correct copy of the record of the proceedings containing the judgment.

JAN 25 2007 Date *Richard A. Ireland*, Magisterial District Judge

My commission expires first Monday of January, **2012**

SEAL

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

MARSHA D. HUGHES AND
JERRY A. HUGHES,
Plaintiffs

*

*

-VS-

*

Docket No. 07-124-CD

SAMANTHA E. LUZIER-BUTZER,
Defendant

*

*

Type of pleading:
COMPLAINT

Filed on behalf of:
PLAINTIFFS, Marsha D.
Hughes and Jerry A.
Hughes

Counsel of record for
this party:

Dwight L. Koerber, Jr.,
Esquire
PA I.D. No. 16332

110 North Second Street
P. O. Box 1320
Clearfield, PA 16830
(814) 765-9611

FILED
012:53/01
FEB 13 2007

3cc
Atty Koerber
(GR)

William A. Shaw
Prothonotary/Clerk of Courts

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

MARSHA D. HUGHES AND
JERRY A. HUGHES,
Plaintiffs

*

*

-vs-

*

Docket No. 07-124-CD

SAMANTHA E. LUZIER-BUTZER,
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 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 within twenty (20) days. 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 relief claimed in the complaint by the plaintiff.

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.

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

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

MARSHA D. HUGHES AND
JERRY A. HUGHES,
Plaintiffs

*

*

-vs-

*

Docket No. 07-124-CD

SAMANTHA E. LUZIER-BUTZER,
Defendant

*

*

COMPLAINT

COME NOW, Plaintiffs Marsha D. Hughes and Jerry A. Hughes, by and through their attorney, Dwight L. Koerber, Jr., Esquire, and file the within Complaint against Defendant Samantha E. Luzier-Butzer. In support thereof, plaintiffs aver and show as follows:

1. Plaintiffs are Marsha D. Hughes and Jerry A. Hughes, husband and wife, who reside at 121 West Sixth Street, Clearfield, Clearfield County, PA 16830, referred to hereinafter as "plaintiffs" or "Hughes".

2. Defendant is Samantha E. Luzier-Butzer, an individual, who resides at 993 Park Avenue Extension, Lawrence Park Village, Apt. 5C, Clearfield, Clearfield County, PA 16830, referred to hereinafter as "defendant" or "Luzier-Butzer".

3. Plaintiffs are the owners of a 1992 Oldsmobile sedan, VIN

1G3WH54T2PD300209. Attached hereto as Appendix A is a copy of the Certificate of Title to the said vehicle, evidencing that the said vehicle is registered by the Commonwealth of Pennsylvania, Department of Transportation, in plaintiffs' names.

4. As further evidence of the ownership of the said 1993 Oldsmobile sedan, attached hereto as Appendix B is a copy of the registration credential issued by the Commonwealth of Pennsylvania, Department of Transportation, showing that the registration of the said vehicle was in full force and effect at the time of the accident described hereinbelow.

5. On October 27, 2006, plaintiffs' son, Timothy Hughes, with the consent of plaintiffs, was driving the said vehicle in a southerly direction on S.R. 153, in full obedience of all traffic rules and regulations.

6. On that date, defendant, driving a 1992 Ford Probe, registered in the name of Michael Butzer, of the same address as defendant, negligently drove from the parking lot of Lawrence Park Village onto S.R. 153, without regard for the rules and regulations governing safe driving, and collided with the vehicle of Hughes.

7. The vehicle of Hughes that defendant's vehicle collided with was forceably spun and came to rest facing southeasterly in the northbound lane of traffic on S.R. 153.

8. As a result of the collision caused by defendant, a police report was issued pertaining to the accident. Attached hereto as Appendix C is a copy of that accident report. Plaintiffs hereby incorporate by reference the facts of that report.

9. As noted in the accident report, defendant and/or Michael Butzer did not have insurance coverage on the vehicle that collided with plaintiffs' vehicle.

10. As a result of defendant's negligent, reckless and careless actions which caused the collision with plaintiffs' vehicle, defendant was issued four citations, as follows:

- (a) Not having insurance coverage on her vehicle, Citation No. B3324054-6;

- (b) Driving with a suspended or revoked license, Citation No. B3324052-4;

- (c) Driving without proper restraint systems for a child, Citation No. B3324053-5; and

- (d) Unsafe entry onto a roadway, Citation No. B3324051-3.

11. Defendant pled guilty to three of the four citations, and not guilty to the citation involving a suspended or revoked license.

12. In operating her vehicle at the time that it collided with Plaintiffs' vehicle on October 27, 2006, defendant was negligent for the following reasons:

- (a) Failure to comply with the provisions of the vehicle code;

- (b) Unsafe entry onto a roadway;

- (c) Failure to yield the right of way to approaching traffic;

- (d) Failure to drive in a safe, careful and prudent fashion;

- (e) Failure to have proper control of her vehicle so as to avoid striking a vehicle properly operating on the highway.

13. Defendant's negligent, reckless and careless actions caused the vehicle

owned by plaintiffs to be so damaged that it was necessary to have the vehicle towed from the scene. Attached hereto as Appendix D is a copy of the towing receipt, showing a charge of \$85.00.

14. Defendant's negligent, reckless and careless actions have resulted in severe damage to the vehicle of plaintiffs. Attached hereto as Appendix E is a copy of an estimate for repair of the damages to plaintiff's vehicle in the amount of \$3,906.52.

15. Through defendant's negligent, reckless and careless actions, the plaintiffs lost use of their vehicle from the time of the incident on October 27, 2006 to the time of the filing of this complaint, during which time they had no suitable transportation available. Plaintiffs assert damages for loss of use of their vehicle for two weeks. This loss would amount to \$100.00 per week, for a total of \$200.00.

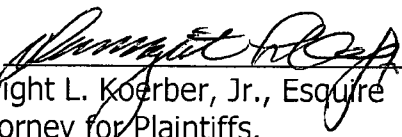
16. It is plaintiffs' position that defendant has willfully, recklessly, carelessly and negligently violated the provisions of the Motor Vehicle Code, as set forth in the citations issued against defendant, so as to cause damage to plaintiffs' vehicle through her actions, and so as to cause economic harm to plaintiffs.

17. Defendant's negligence has caused plaintiffs damages in the amount of \$4,192.52.

WHEREFORE, plaintiffs pray that judgment be entered in their favor and against defendant in the amount of \$3,906.52 for repair of the 1993 Oldsmobile sedan, \$85.00 for towing costs, and \$200.00 for two weeks of loss of their vehicle, resulting in a judgment in plaintiff's favor of \$4,191.52; that they be awarded legal costs; and that


they be awarded such other relief as is reasonable and just.

Respectfully submitted,

By: 
Dwight L. Koerber, Jr., Esquire
Attorney for Plaintiffs,
MARSHA D. HUGHES AND
JERRY A. HUGHES

VERIFICATION

I certify that the statements made in the foregoing document 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.


Jerry G. Hughes

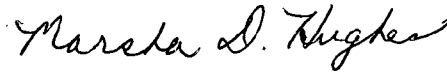

Marsha D. Hughes

EXHIBIT A

Attached hereto is a copy of Certificate of Title to the 1993 Oldsmobile sedan owned by plaintiffs.

DEPARTMENT OF TRANSPORTATION
CERTIFICATE OF TITLE FOR A VEHICLE

2,363

930550055001305-001

1G3WH54T2PD300209

VEHICLE IDENTIFICATION NUMBER

93

YEAR

OLDSMOBILE

MAKE OF VEHICLE

45915848201 HU

TITLE NUMBER

SDN

0

BODY TYPE

DUP

SEAT CAP

UNLADEN WEIGHT

GVWR

GCWR

TITLE BRANDS

3/01/93

DATE PA TITLED

3/01/93

DATE OF ISSUE

PRIOR TITLE STATE

3/01/93

ODOM. PROCD. DATE

003037

ODOM. MILES

0

ODOM. STATUS

ODOMETER STATUS

- 0 - ACTUAL MILEAGE
 1 - MILEAGE EXCEEDS THE MECHANICAL LIMITS
 2 - NOT THE ACTUAL MILEAGE
 3 - NOT THE ACTUAL MILEAGE-ODOMETER TAMPERING VERIFIED
 4 - EXEMPT FROM ODOMETER DISCLOSURE

TITLE BRANDS

- A - ANTIQUE VEHICLE
 C - CLASSIC VEHICLE
 F - OUT OF COUNTRY
 G - ORIGINALLY MFGD FOR NON-U.S. DISTRIBUTION
 H - AGRICULTURAL VEHICLE
 L - LOGGING VEHICLE
 P - FORMERLY A POLICE VEHICLE
 R - RECONSTRUCTED
 S - STREET ROD
 T - RECOVERED THEFT VEHICLE
 V - VEHICLE CONTAINS REISSUED VIN
 X - FORMERLY A TAXI

ACTUAL MILEAGE

REGISTERED OWNER(S)

MARSHA D & JERRY HUGHES
 121 W 6TH ST
 CLEARFIELD PA 16830

FIRST LIEN FAVOR OF:

SECOND LIEN FAVOR OF:

FIRST LIEN RELEASED

DATE

BY

AUTHORIZED REPRESENTATIVE

MAILING ADDRESS

031007

MARSHA D & JERRY HUGHES
 121 W 6TH ST
 CLEARFIELD PA 16830

If a second lienholder is listed, upon satisfaction of the first lien, the first lienholder must forward this Title to the Bureau of Motor Vehicles with the appropriate form and fee.

SECOND LIEN RELEASED

DATE

BY

AUTHORIZED REPRESENTATIVE

I certify as of the date of issue, the official records of the Pennsylvania Department of Transportation reflect that the person(s) or company named herein is the lawful owner of the said vehicle.

Secretary of Transportation

APPLICATION FOR TITLE AND LIEN INFORMATION

TO BE COMPLETED BY PURCHASER WHEN VEHICLE IS SOLD AND THE APPROPRIATE SECTIONS ON THE REVERSE SIDE OF THIS DOCUMENT ARE COMPLETED.

SUBSCRIBED AND SWORN
 TO BEFORE ME:

MO

DAY

YEAR

SIGNATURE OF PERSON ADMINISTERING OATH

SEAL

NOTARY

The undersigned hereby makes application for Certificate of Title to the vehicle described above, subject to the encumbrances and other legal claims set forth here.

SIGNATURE OF APPLICANT OR AUTHORIZED SIGNER

SIGNATURE OF CO-APPLICANT/TITLE OF AUTHORIZED SIGNER

When applying for title with a co-owner, other than your spouse, check one of these blocks. If no block is checked, title will be issued as "Tenants in Common".
 A ☐ Joint Tenants with Right of Survivorship (on death of one owner, title goes to the surviving owner).
 B ☐ Tenants in Common (on death of one owner, interest of deceased owner goes to his or her heirs or estate).

LIEN
 DATE:

IF NO LIEN
 CHECK BOX ☐

FIRST LIENHOLDER:

NAME

STREET

CITY

STATE

ZIP

LIEN
 DATE:

IF NO LIEN
 CHECK BOX ☐

SECOND LIENHOLDER:

NAME

STREET

CITY

STATE

ZIP

74024811

EXHIBIT B

Attached hereto is a copy of the registration credential issued for the vehicle of plaintiffs, showing that registration of the vehicle was in full force and effect, and up-to-date at the time of the accident.

COMMONWEALTH OF PENNSYLVANIA REGISTRATION CREDENTIAL

EXPIRY: SEP 30, 2007 VALID: 08/15/06

PLATE: DCP5126
TITLE: 45915848201 HU
VIN: 1G3MH54T2PD300209
VR/MAKE: 1993 OLDSMOBILE
TYPE: SDN
WID: 06227 3901 222049-001

135306

MARSHA D & JERRY HUGHES
121 W 6TH AVE
CLEARFIELD PA
16830

Change your address online at: www.state.pa.us Pa Keyword "DMV"

Marsha D. Hughes
Jury Clerk
DATE: 08/15/06

I hereby acknowledge the day that I have received
notice of the provisions of Section 3709 of the Vehicle
Code.

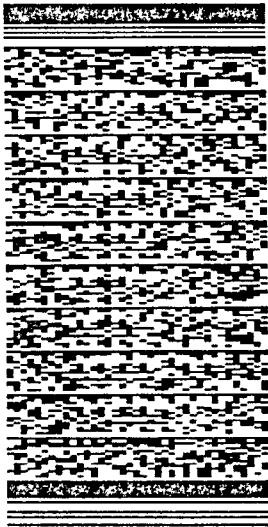


EXHIBIT C

Attached hereto is a copy of the accident report issued in this matter.

COMMONWEALTH OF PENNSYLVANIA
POLICE CRASH REPORT FORM

Crash Number

AA 500 2

Police Use Only

Page:

02

P 1208204

Unit Info	Type Unit <input checked="" type="radio"/> Motor Vehicle in Transport <input type="radio"/> Pedestrian <input type="radio"/> Hit & Run Vehicle <input type="radio"/> Pedestrian on Skates, in Wheelchair, etc. <input type="radio"/> Illegally Parked <input type="radio"/> Disabled From Previous Crash <input type="radio"/> Legally Parked <input type="radio"/> Train <input type="radio"/> Non - Motorized <input type="radio"/> Phantom Vehicle (If "Pedestrian" or "Pedestrian on Skates, in Wheelchair, etc", Complete Form M, Section 28)						Commercial Vehicle <input type="radio"/> Yes <input checked="" type="radio"/> No (If Yes, Complete Form C)		
Vehicle Driver / Pedestrian Information	Unit No 01		First Name SAMANTHA		MI E	Date of Birth (MM-DD-YYYY) 10/26/1985			
	Last Name LUZIER-BUTZER		Telephone Number 761-1303						
	Address / City / State 993 PARK AVE EXT APT 5C CLEARFIELD, PA						Zip 16830		
	Driver License Number 2729238						State PA	Class C	
	Alcohol/Drugs Suspected <input checked="" type="radio"/> No <input type="radio"/> Alcohol <input type="radio"/> Illegal Drugs <input type="radio"/> Alcohol and Drugs <input type="radio"/> Medication <input type="radio"/> Unknown				Driver or Pedestrian Physical Condition <input checked="" type="radio"/> Apparently Normal <input type="radio"/> Had Been Drinking <input type="radio"/> Illegal Drug Use <input type="radio"/> Sick <input type="radio"/> Fatigue <input type="radio"/> Asleep <input type="radio"/> Medication <input type="radio"/> Unknown				
	Alcohol Test Type <input checked="" type="radio"/> Test Not Given <input type="radio"/> Blood <input type="radio"/> Breath <input type="radio"/> Urine <input type="radio"/> Other <input type="radio"/> Unknown if Test Given				Primary Vehicle Code Violation DRIVING WHILE SUSPENDED (543) <input checked="" type="radio"/> Charged? Yes <input type="radio"/> No				
	Alcohol Test Results 0. <input type="text"/> <input type="radio"/> Test Refused <input type="radio"/> Test Given, Contaminated Results <input type="radio"/> Unknown Results				Driver Presence 1 <input type="text"/> 1=Driver Operated Vehicle 2=No Driver 3=Driver Fleed Scene 4=Hit and Run 9=Unknown				
	Owner/Driver 01 <input type="text"/> 00=Not Applicable 01=Private Vehicle Owned/Leased by Driver 02=Private Vehicle Not Owned/Leased by Driver 03=Rented Vehicle 04=State Police Vehicle 05=PENNDOT Vehicle 06=Other State Gov Veh 07=Municipal Police Veh 08=Other Municipal Government Vehicle 09=Federal Gov Veh 98=Other 99=Unknown								
	Vehicle Information	Same as Driver <input type="radio"/>		Owner First Name MICHAEL		Owner Last Name or Business Name (If Pedestrian, skip this Section) BUTZER			
		Address / City / State / Zip 304 BOWMANS HILL PO. BOX 60 CLFD. PA 16830						Vehicle Make FORD	
VIN 12VPT20C4N5210314						*Make Code 12			
Model Year 1992						Vehicle Model PROBE			
License Plate GGP 4161						Reg. State PA			
Est. Speed 35						Vehicle Towed <input checked="" type="radio"/> Yes <input type="radio"/> No			
Towed By A.J. ROSS (CLWAG)									
Insurance <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Un-known		Insurance Company GEICO		Policy No 4064-94-74-37					
Trailing Unit No. of Trailing Units: 0		Type Unit <input type="checkbox"/> 1=Towing Pass. Veh <input type="checkbox"/> 2=Towing Truck <input type="checkbox"/> 3=Towing Utility Trailer		<input type="checkbox"/> 4=Mobile/Modular Home <input type="checkbox"/> 5=Camper <input type="checkbox"/> 6=Full Trailer		Tag No <input type="text"/>			
Tag Year <input type="text"/>		Tag St <input type="text"/>							
Direction of Travel S		*Vehicle Position 09		*Movement 12		*See Overlay <input type="text"/>			
Vehicle Color 10 <input type="text"/> 01=Blue 02=Red 03=White 04=Green 05=Black 06=Yellow 07=Silver 08=Gold 09=Brown 10=Orange 11=Purple 12=Other 99=Unknown		Vehicle Type 01 <input type="text"/> (If "02", Complete Form M, Section 26) (If "20" or "21", Complete Form M, Section 27) 01=Automobile 02=Motorcycle 03=Bus 04=Small Truck 05=Large Truck 06=SUV 07=Van 10=Snowmobile 11=Farm Equip 12=Construction Equip 13=ATV 18=Other Type Spec Veh 19=Unk. Type Spec Veh 20=Unicycle, Bicycle, Tricycle 21=Other Pedalcycle 22=Horse & Buggy 23=Horse & Rider 24=Train 25=Trolley 98=Other 99=Unknown		Special Usage 00 <input type="text"/> 00=Not Applicable 01=Fire Veh 02=Ambulance 03=Police 08=Other Emergency Vehicle 11=Pupil Transport 12=Commercial Passenger Carrier 13=Taxi 21=Tractor Trailer 22=Twin Trailer 23=Triple Trailer 31=Modified Veh 99=Unknown					
Initial Impact Point 11 <input type="text"/> 00=Non-Collision 01-12=Clock Points 13=Top 14=Undercarriage 15=Towed Unit 99=Unknown		Damage Indicator 3 <input type="text"/> 0=None 1=Minor 2=Functional 3=Disabling 9=Unknown		Gradient 1 <input type="text"/> 1=Level 2=Uphill 3=Downhill 4=Bottom of Hill 5=Top of Hill 9=Unknown		Road Alignment 1 <input type="text"/> 1=Straight 2=Curved 9=Unknown			

COMMONWEALTH OF PENNSYLVANIA
POLICE CRASH REPORTING FORM

Page

Crash Number

AA 500 1

Case Closed

Reportable Crash

☒ Yes ☐ No☒ Yes ☐ No

01

P 1208204

Police Agency Data	Incident Number LTPD 20063631				Police Agency 17223				Patrol Zone 			
	Agency Name Lawrence Twp. Police Dept.				Precinct 				Investigation Date (MM-DD-YYYY) 10-18-2006			
Crash Data	Dispatch Time (mil) 0640		Arrival Time (mil) 0647		Investigator PTM.C.D. Panebianco				Badge Number 22305			
	Reviewer 				Badge Number 		Approval Date (MM-DD-YYYY) 					
County	County Name 17 Clearfield		Municipality 223 Lawrence Twp.		Municipality Name 				Day of Week <input type="radio"/> Sun <input type="radio"/> Mon <input type="radio"/> Tue <input type="radio"/> Wed <input type="radio"/> Thu <input type="radio"/> Fri <input type="radio"/> Sat <input type="radio"/> Sun			
	Crash Date (MM-DD-YYYY) 10-18-2006		Crash Time (mil) 0640		No of Units 02		People 03		Injured 01		Killed* 00	
Workzone	If Yes, Complete Form M, Section 29 <input type="radio"/> Yes <input checked="" type="radio"/> No		School Bus Related <input type="radio"/> Yes <input checked="" type="radio"/> No		School Zone Related <input type="radio"/> Yes <input checked="" type="radio"/> No		Notify PENNDOT Maintenance <input type="radio"/> Yes <input checked="" type="radio"/> No		If <input type="radio"/> No complete Form F			
	Intersection Type <input checked="" type="radio"/> Midblock <input type="radio"/> 4 Way Intersection <input type="radio"/> "Y" Intersection <input type="radio"/> Multi-Leg Intersection <input type="radio"/> Off Ramp <input type="radio"/> Railroad Crossing <input type="radio"/> "T" Intersection <input type="radio"/> Traffic Circle/Round About <input type="radio"/> On Ramp <input type="radio"/> Crossover <input type="radio"/> Other				*Special Location 				* See Overlay			
Principal Road	Route Number 5153		Segment (Optional) 		Travel Lanes 02		Speed Limit 35		Orientation <input checked="" type="radio"/> North <input type="radio"/> South <input type="radio"/> East <input type="radio"/> West <input type="radio"/> Unknown		House Number (if applicable) 	
	Street Name PARK AVE		Street Ending EXT		Route Signing <input type="radio"/> Interstate (Not Turnpike) <input type="radio"/> Turnpike (East/West) <input type="radio"/> Turnpike Spur <input checked="" type="radio"/> State Highway <input type="radio"/> County Road <input type="radio"/> Local Road or Street <input type="radio"/> Private Road <input type="radio"/> Other/Unknown		For Midblock crashes only, Use postal House Number and make sure Principal Roadway Street Name is filled in if using this option					
Intersecting Road	Route Number 		Segment (Optional) 		Travel Lanes 		Speed Limit 		Orientation <input type="radio"/> North <input type="radio"/> South <input type="radio"/> East <input type="radio"/> West <input type="radio"/> Unknown			
	Street Name 		Street Ending 		Route Signing <input type="radio"/> Interstate (Not Turnpike) <input type="radio"/> Turnpike (East/West) <input type="radio"/> Turnpike Spur <input type="radio"/> State Highway <input type="radio"/> County Road <input type="radio"/> Local Road or Street <input type="radio"/> Private Road <input type="radio"/> Other/Unknown							
Distance From Landmark	Landmark 1 Please Enter Information for BOTH Landmarks if Using This Option		Intersecting Rt Num Or Mile Post 5153		Or Segment Marker 		Ramp Use Only <input type="radio"/> North <input checked="" type="radio"/> South <input type="radio"/> East <input type="radio"/> West		Feet 			
	Landmark 2		Intersecting Rt Num Or Mile Post 5879		Or Segment Marker 		Ramp Use Only <input checked="" type="radio"/> North <input type="radio"/> South <input type="radio"/> East <input type="radio"/> West		Or Miles 			
GPS	Latitude: Degrees Minutes Seconds 		Longitude: Degrees Minutes Seconds 									
	Traffic Control Device <input type="radio"/> Not Applicable <input type="radio"/> Traffic Signal <input type="radio"/> Flashing Traffic Signal <input checked="" type="radio"/> Stop Sign		Yield Sign <input type="radio"/> Active RR Crossing Controls <input type="radio"/> Passive RR Crossing Controls		Police Officer or Flagman <input type="radio"/> Other Type TCD <input type="radio"/> Unknown		TCD Functioning <input type="radio"/> No Controls <input type="radio"/> Device Not Functioning <input type="radio"/> Device Functioning Properly		Device Functioning Improperly <input type="radio"/> Emergency Flashing Signal <input type="radio"/> Unknown			
Lane Closure	Lane Closed (If "Not Applicable", skip rest of the Lane Closure section) <input checked="" type="radio"/> Not Applicable <input type="radio"/> Partially <input type="radio"/> Fully <input type="radio"/> Unknown				Lane Closure Direction <input type="radio"/> North <input type="radio"/> South <input type="radio"/> East <input type="radio"/> West <input type="radio"/> North and South <input type="radio"/> East and West <input type="radio"/> All (N.E.S.W.)							
	Traffic Detoured Yes <input type="radio"/> No <input checked="" type="radio"/> Unknown <input type="radio"/>		Esti. Time Closed <input type="radio"/> < 30 Min. <input type="radio"/> 30-60 Min. <input type="radio"/> 1-3 hrs <input type="radio"/> 3-6 hrs <input type="radio"/> 6-9 hrs <input type="radio"/> > 9 hours <input type="radio"/> Unknown									

COMMONWEALTH OF PENNSYLVANIA
POLICE CRASH REPORT FORM

Crash Number

AA 500 2

Police Use Only

Page:

03

P 1208204

Unit Info	Type Unit		<input checked="" type="radio"/> Motor Vehicle in Transport <input type="radio"/> Hit & Run Vehicle <input type="radio"/> Illegally Parked <input type="radio"/> Legally Parked <input type="radio"/> Non - Motorized <input type="radio"/> Pedestrian <input type="radio"/> Pedestrian on Skates, in Wheelchair, etc <input type="radio"/> Disabled From Previous Crash <input type="radio"/> Train <input type="radio"/> Phantom Vehicle						Commercial Vehicle <input type="radio"/> Yes <input checked="" type="radio"/> No (If Yes, Complete Form C)			
	(If "Pedestrian" or "Pedestrian on Skates, in Wheelchair, etc", Complete Form M, Section 28)											
Vehicle Driver / Pedestrian Information	Unit No		First Name				MI	Date of Birth (MM-DD-YYYY)				
	02		TIMOTHY				A	12 09 1983				
	Delete? <input type="radio"/>		Last Name				Telephone Number					
			HUGHES				765-4770					
	Address / City / State										Zip	
	121 W. 6 th Ave. CLEARFIELD, PA										16830	
	Driver License Number										State Class	
	26641921										PA C	
	Alcohol/Drugs Suspected					Driver or Pedestrian Physical Condition						
	<input checked="" type="radio"/> No <input type="radio"/> Alcohol <input type="radio"/> Illegal Drugs <input type="radio"/> Alcohol and Drugs <input type="radio"/> Medication <input type="radio"/> Unknown					<input checked="" type="radio"/> Apparently Normal <input type="radio"/> Had Been Drinking <input type="radio"/> Illegal Drug Use <input type="radio"/> Sick <input type="radio"/> Fatigue <input type="radio"/> Asleep <input type="radio"/> Medication <input type="radio"/> Unknown						
	Alcohol Test Type					Primary Vehicle Code Violation						
<input checked="" type="radio"/> Test Not Given <input type="radio"/> Blood <input type="radio"/> Breath <input type="radio"/> Urine <input type="radio"/> Other <input type="radio"/> Unknown if Test Given					Charged? <input type="radio"/> Yes <input checked="" type="radio"/> No							
Alcohol Test Results					Driver Presence							
<input type="radio"/> Test Refused <input type="radio"/> Test Given, Contaminated Results					1=Driver Operated Vehicle 2=No Driver 3=Driver Fled Scene 4=Hit and Run 9=Unknown							
Owner/Driver 00=Not Applicable 01=Private Vehicle Owned/Leased by Driver 02=Private Vehicle Not Owned/Leased by Driver 03=Rented Vehicle 04=State Police Vehicle 05=PENNDOT Vehicle 06=Other State Gov Veh 07=Municipal Police Veh 08=Other Municipal Government Vehicle 09=Federal Gov Veh 98=Other 99=Unknown												
Vehicle Information	Same as Driver <input checked="" type="radio"/>		Owner First Name				Owner Last Name or Business Name (If Pedestrian, skip this Section)					
	Address / City / State / Zip										Vehicle Make *Make Code	
											Oldsmobile 21	
	VIN										Vehicle Model (see overlay)	
	1G3WH54T2PD300209										Supreme SL	
	License Plate										Towed By	
	DCP 5126 PA 35										ROSS TOWING	
	Insurance <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Un-known										Insurance Company Policy No	
	Drive-Progressive Speciality										52869050-2	
	Trailing Unit No. of Trailing Units Type Unit											
0 1= Towing Pass. Veh 2= Towing Truck 3= Towing Utility Trailer 4= Mobile/Modular Home 5= Camper 6= Full Trailer 7= Semi-Trailer 8= Other 9= Unknown												
Direction of Travel *Vehicle Position *Movement *See Overlay												
S 03 01												
Vehicle Color Vehicle Type												
04 01 05=Large Truck 20=Unicycle, Bicycle, Tricycle 06=SUV 21=Other Pedalcycle 07=Van 22=Horse & Buggy 10=Snowmobile 23=Horse & Rider 11=Farm Equip 24=Train 12=Construction Equip 25=Trolley 13=ATV 26=Other 18=Other Type Spec Veh 98=Other 19=Unk. Type Spec Veh 99=Unknown												
Special Usage												
00 00=Not Applicable 12=Commercial Passenger Carrier 01=Fire Veh 13=Taxi 02=Ambulance 21=Tractor Trailer 03=Police 22=Twin Trailer 08=Other Emergency Vehicle 23=Triple Trailer 31=Modified Veh 11=Pupil Transport 99=Unknown												
Initial Impact Point Damage Indicator Gradient Road Alignment												
01 3 1 1 00=Non-Collision 14=Undercarriage 3=Downhill 1=Straight 01-12=Clock Points 15=Towed Unit 4=Bottom of Hill 2=Curved 13=Top 9=Unknown 5=Top of Hill 9=Unknown												

COMMONWEALTH OF PENNSYLVANIA
POLICE CRASH REPORTING FORM



Crash Number

AA 500 3

Police Use Only

Page

04

P 1208204

People Information

A Person Type:
1=Driver
2=Passenger
7=Pedestrian
8=Other
9=Unknown

B Sex:
F=Female
M=Male
U=Unknown

C Injury Severity:
0=Not Injured
1=Killed
2=Major Injury
3=Moderate Injury
4=Minor Injury
8=Injury, Unk Severity
9=Unknown if Injury

D Seat Position:
00=Not A Passenger/Occupant
01=Driver - All Vehicles
02=Front Seat Middle Position
03=Front Seat Right Side
04=Second Row - Left Side Or Motorcycle Passenger
05=Second Row - Middle Position
06=Second Row - Right Side
07=Third Row Or Greater - Left Side
08=Third Row Or Greater - Middle Position
09=Third Row Or Greater - Right Side
10=Sleeper Section of Truckcab
11=In Other Enclosed Passenger Or Cargo Area
12=In Open Area (Back Of Pickup, Etc.)
13=Trailing Unit
14=Riding On Vehicle Exterior
15=Bus Passenger
98=Other
99=Unknown

E Safety Equipment One:
00=None Used / Not Applicable
01=Shoulder Belt Used
02=Lap Belt Used
03=Lap And Shoulder Belt Used
04=Child Safety Seat Used
05=Motorcycle Helmet Used
06=Bicycle Helmet Used
10=Safety Belt Used Improperly
11=Child Safety Seat Used Improperly
12=Helmet Used Improperly
90=Restraint Used, Type Unknown
99=Unknown

F Safety Equipment Two:
00=None Used / Not Applicable
01=Front Air Bag Deployed (For This Seat)
02=Side Air Bag Deployed (For This Seat)
03=Other Type Air Bag Deployed
04=Multiple Air Bags Deployed
05=Motorcycle Eye Protection
06=Bicyclist Wearing Elbow/Knee/Pads
10=Air Bag Not Deployed, Switch On
11=Air Bag Not Deployed, Switch Off
12=Air Bag Not Deployed, Unk Switch Setting
13=Air Bag Removed (Prior To Crash)
19=Unknown If Air Bag Deployed
99=Unknown

G Ejection:
0=Not Applicable
1=Not Ejected
2=Totally Ejected
3=Partially Ejected
9=Unknown

H Ejection Path:
0=Not Ejected / Not Applicable
1=Through Side Door Opening
2=Through Side Window
3=Through Windshield
4=Through Back Door
5=Through Back Door Tailgate Opening
6=Through Roof Opening (Sunroof/Convertible Top Down)
7=Through Roof Opening (Convertible Top Up)
9=Unknown

I Extrication:
0=Not Applicable
1=Not Extricated
2=Extricated By Mechanical Means
3=Freed By Non - Mechanical Means
8=Other
9=Unknown

EMS Agency: CLEARFIELD

Medical Facility: CLEARFIELD

Unit No Person No Delete? Date of Birth (MM-DD-YYYY) A B C D E F G H I
01 01 0 10-26-1985 1 F 4 0 1 0 3 0 0 0 0 0

Name / Address / Phone

Same as Operator

EMS Transport
☒ Yes ☐ No

Unit No Person No Delete? Date of Birth (MM-DD-YYYY) A B C D E F G H I
01 02 0 2M 003030000000

Name / Address / Phone

Same as Operator

JAY BUTZER (6) 993 PARK AVE. EXT. APT 5C CLFD. PA

EMS Transport
☒ Yes ☐ No

Unit No Person No Delete? Date of Birth (MM-DD-YYYY) A B C D E F G H I

Name / Address / Phone

Same as Operator

EMS Transport
☐ Yes ☐ No

Unit No Person No Delete? Date of Birth (MM-DD-YYYY) A B C D E F G H I

Name / Address / Phone

Same as Operator

EMS Transport
☐ Yes ☐ No

Unit No Person No Delete? Date of Birth (MM-DD-YYYY) A B C D E F G H I

Name / Address / Phone

Same as Operator

EMS Transport
☐ Yes ☐ No

Unit No Person No Delete? Date of Birth (MM-DD-YYYY) A B C D E F G H I

Name / Address / Phone

Same as Operator

EMS Transport
☐ Yes ☐ No

COMMONWEALTH OF PENNSYLVANIA
POLICE CRASH REPORT FORM

Crash Number

AA 500 4

Police Use Only

Page

05

P 1208204

General Crash Information
(If more than 2 Units only complete once)

Crash Description

4

0=Non-Collision

2=Head On

4=Angle

6=Sideswipe

8=Hit Pedestrian

1=Rear End

3=Rear to Rear
(Backing)5=Sideswipe
(Same Direction)7=Hit Fixed Object
(Opposite Direction)

9=Other/Unknown

Relation to Roadway

1

1=On Travel Lanes

3=Median

5=Outside Trafficway

7=Gore (Ramp Intersection)

2=Shoulder

4=Roadside

6=In Parking Lane

9=Unknown

Illumination

3

1=Daylight

3=Dark - Street
Lights

5=Dawn

8=Other

2=Dark - No
Street Lights

4=Dusk

6=Dark - Unknown
Roadway Lighting

Weather Conditions

1

1=No Adverse
Conditions

3=Sleet (Hail)

5=Fog

7=Sleet & Fog

9=Unknown

2=Rain

4=Snow

6=Rain & Fog

8=Other

Road Surface Conditions

1

0=Dry

2=Sand, Mud, Dirt,
Oil

4=Slush

6=Ice Patches

8=Other

1=Wet

3=Snow Covered

5=Ice

7=Water - Standing
or Moving

Unit(s) Event Information

Harm Event L/R Most? Utility Pole Number

Unit No

02 L

0

01

0

Please Put
Events in
Sequential
Order

0

0

0

Harm Event L/R Most? Utility Pole Number

Unit No

11 R

0

02

0

Please Put
Events in
Sequential
Order

0

0

First
Harmful
Event in
the Crash

Unit No

01

Harm Event

02

Most
Harmful
Event in
the Crash

Unit No

02

Harm Event

11

Do not repeat this information on multiple pages

Harmful Events (Harm Event)

01=Hit Unit 1

02=Hit Unit 2

03=Hit Unit 3

04=Hit Unit 4

05=Hit Unit 5

06=Hit Other Traffic Unit

07=Hit Deer

08=Hit Other Animal

09=Collision With Other Non
Fixed Object

11=Struck By Unit 1

12=Struck By Unit 2

13=Struck By Unit 3

14=Struck By Unit 4

15=Struck By Unit 5

16=Struck By Other Traffic Unit

21=Hit Tree Or Shrubbery

22=Hit Embankment

23=Hit Utility Pole

24=Hit Traffic Sign

25=Hit Guard Rail

26=Hit Guard Rail End

27=Hit Curb

28=Hit Concrete Or
Longitudinal Barrier

29=Hit Ditch

30=Hit Fence Or Wall

31=Hit Building

32=Hit Culvert

33=Hit Bridge Pier Or Abutment

34=Hit Parapet End

35=Hit Bridge Rail

36=Hit Boulder Or Obstacle
On Roadway

37=Hit Impact Attenuator

38=Hit Fire Hydrant

39=Hit Roadway Equipment

40=Hit Mail Box

41=Hit Traffic Island

42=Hit Snow Bank

43=Hit Temporary Construction
Barrier

48=Hit Other Fixed Object

49=Hit Unknown Fixed Object

50=Overturn/Roll Over

51=Struck By Thrown Or Falling
Object52=Pot Holes Or Other
Pavement Irregularities

53=Jackknife

54=Fire In Vehicle

58=Other Non-Collision

99=Unknown Harmful Event

Driver Action (D)

00=No Contributing Action

01=Driver Was Distracted

02=Driving Using Hand Held Phone

03=Driving Using Hands Free Phone

04=Making Illegal U-Turn

05=Improper/Careless Turning

06=Turning From Wrong Lane

07=Proceeding W/O
Clearance After Stop

08=Running Stop Sign

09=Running Red Light

10=Failure To Respond To
Other Traffic Control Device

11=Tailgating

12=Sudden Slowing/Stopping

13=Illegally Stopped On Road

14=Careless Passing Or Lane
Change

15=Passing In No Passing Zone

16=Driving The Wrong Way On
1-Way Street17=Careless Or Illegal
Backing On Roadway18=Driving On The Wrong
Side Of Road19=Making Improper
Entrance To Highway20=Making Improper Exit
From Highway

21=Careless Parking/Unparking

22=Over/Under
Compensation At Curve

23=Speeding

24=Driving Too Fast For Conditions

25=Failure To Maintain Proper Speed

26=Driver Fleeing Police (Pol Chase)

27=Driver Inexperienced

28=Failure To Use Specialized Equip

92=Affected By Physical Condition

98=Other Improper Driving Actions

99=Unknown

Unit
No

01

1

05

2

3

4

Unit
No

02

1

00

2

3

4

Pedestrian Action (P)

00=None

01=Entering Or Crossing At
Specified Location02=Walking, Running, Jogging,
Or Playing

03=Working

04=Pushing Vehicle

05=Approaching Or Leaving Vehicle

06=Working On Vehicle

07=Standing

98=Other

99=Unknown

Unit No

01

00

Unit No

02

00

Environmental / Roadway
Potential Factors (E/R)

1

00

2

00

3

00=None

01=Windy Conditions

02=Sudden Weather Conditions

03=Other Weather Conditions

04=Deer In Roadway

05=Obstacle On Roadway

06=Other Animal In Roadway

07=Glare

08=Work Zone Related

11=Slippery Road Conditions (Ice/Snow)

12=Substance On Roadway

13=Potholes

14=Broken Or Cracked Pavement

15=TCD Obstructed

16=Soft Shoulder Or Shoulder Drop Off

28=Other Roadway Factor

29=Other Environmental Factor

99=Unknown

Possible Vehicle Failures (V)

00=None

01=Tires

02=Brake System

03=Steering System

04=Suspension

05=Power Train

06=Exhaust

07=Headlights

08=Signal Lights

09=Other Lights

10=Horn

11=Mirrors

12=Wipers

13=Driver Seating/Control

14=Body, Doors, Hood, Etc

15=Trailer Hitch

16=Wheels

17=Airbags

18=Trailer Overloaded

19=Unsecure/Shifted
Trailer Load

20=Improper Towing

21=Obstructed Windshield

99=Unknown

Indicated Prime Factor

Do not repeat this information on
multiple pages.

E / R V D P

0 0 0 0

Unit No

Factor Code

If E/R is the Prime Factor
Type, leave Unit No blank

COMMONWEALTH OF PENNSYLVANIA
POLICE CRASH REPORT FORM



Crash Number

AA 500 5

Police Use Only

Page

06

P 1208204

Diagram

Witness Name

Address

Phone

1

2

Narrative and additional witnesses:

Accident Investigation Notification Issued? ☒

Property Damage ☐

Operator of Unit #2 was traveling in a southerly direction on SR 0153 when Unit #1 pulled out into the path of his vehicle. Unit #2 was unable to avoid a collision with Unit #1.

Witness and Narrative

Operator of Unit #1 was exiting Lawrence Park Village and pulling out onto SR 0153 when she failed to see Unit #2 approaching from the left. Unit #1 pulled out into the path of Unit #2 causing a collision. Unit #1 spun slightly to the right after the collision and came to rest to the right of the roadway in the grass.

Unit #2 came to rest facing south easterly in the north bound lane of traffic on SR 0153.

NOTE** BUTZER DID NOT HAVE INSURANCE COVERAGE AT THE TIME OF ACCIDENT

EXHIBIT D

Attached hereto is a copy of the towing receipt for towing plaintiffs' vehicle from the accident scene in the amount of \$85.00.

1981 TOWING REPORT

ALL INFORMATION IS CONFIDENTIAL & NOT TO BE RELEASED

3131/2 Spruce Street, P.O. Box 655 • Clearfield, PA 16830
 Day: (814) 765-9802 • After Hours 765-4158



CALL NO. 100-18-56		CALL TIME 6:55 AM	
TYPE OF CALL SERVICE TIME 1:00		EXTRA MAN	
MILEAGE FINISH 175.75		MILEAGE START 5	
MILEAGE TOTAL 180.75			
TOWED FROM 121 100' 10" 55		TOWED TO 121 100' 10" 55	
REMARKS		REMARKS	
MECHANIC'S SIGNATURE		AUTHORIZED SIGNATURE	
Name		Date 10-18-86	
Address		City	
Home Phone		Insurance Company	
Business Phone		Insurance Phone	
Year		Make	
Model		Color	
VIN		Mileage	
<input type="checkbox"/> START <input type="checkbox"/> BATTERY <input type="checkbox"/> FLAT TIRE <input type="checkbox"/> GAS <input type="checkbox"/> LOCKOUT		<input checked="" type="checkbox"/> WRECK <input checked="" type="checkbox"/> TOW <input type="checkbox"/> CARRIER <input type="checkbox"/> FLAT BED <input type="checkbox"/> INSURED	
MILEAGE CHARGE		10.00	
TOWING CHARGE		75.00	
ROAD SERVICE CHARGE			
STORAGE CHARGE			
SUB TOTAL		85.00	
TAX			
TOTAL		85.00	

IDE/A Inc., 1 Idea Way, Caldwell, ID 83605 • CALL TOLL FREE 1-800-695-9261 • Item No. FR-1042



ACCIDENT REPORT

As required by Section 3746(c) of the Vehicle Code, a law enforcement officer who is involved in a traffic accident which results in property damage or injury to a person shall file a report with the Department of Transportation.

Police Department

Accident occurred on 10-18-86 at 6:55 AM. The accident occurred on 10-18-86 at 6:55 AM. The accident occurred on 10-18-86 at 6:55 AM.

Name of Driver

121 E PARK AVE

121 E PARK AVE

Badge No. 833-05

34

(side)

EXHIBIT E

Attached hereto is a copy of the estimate for repair of plaintiffs' vehicle in the amount of \$3,906.52.

C.A.R.S. PAINT & BODY SHOP

Auto, Light Truck Collision Repairs

1122 S. 2nd Street - Clearfield, PA 16830

Phone 814-765-4616 Fax 814-765-2902

Expert Body & Paint Work Since 1974

ESTIMATE

006323

Page of Pages

NAME <i>Marshall Hughes</i>		PHONE <i>765-47770</i>		DATE		TIME	
ADDRESS <i>1211 5th Ave. Cl</i>		MODEL <i>Ford F1600</i>		PREPARED BY			
YEAR <i>1981</i>	MAKE <i>Ford</i>	TAG NO.		ODOMETER			
SERIAL NO.		INSURANCE CO.		ADJUSTOR <i>250⁰⁰ 3.0</i>			
REPLACE	REPAIR	DESCRIPTION		PARTS	LABOR	REFINISH	SUBLET
✓		<i>rt / left top engine mtgs</i>		<i>82.40</i>	<i>1.0</i>		
		<i>(dog bone style)</i>					
✓		<i>steering column assy</i>		<i>125⁰⁰</i> <i>250⁰⁰</i>	<i>4.5</i> <i>4.0</i>		
✓		<i>frame rail & apron</i>			<i>8.0</i>		
✓		<i>rad support</i>			<i>4.0</i>	<i>2.0</i>	
✓		<i>cool panel</i>		<i>250⁰⁰</i>	<i>1.50</i>		
		<i>clean / coat</i>				<i>3.0</i>	
		<i>Paint & Mat</i>		<i>220⁰⁰</i>			
		<i>set - / measure</i>		<i>375</i>	<i>1.5</i>		
		<i>haz</i>		<i>100</i>	<i>1.5</i>		
		<i>cover</i>		<i>50⁰⁰</i> <i>40⁰⁰</i>	<i>1.0</i>		
		<i>ready used parts</i>		<i>125⁰⁰</i>	<i>2.5</i> <i>3.0</i>		
<i>(shop suggest partial tear down for</i>							
<i>more thorough estimate)</i>							
PROPOSED WORK COMPLETION DATE				ESTIMATE CHARGE \$			
CUSTOMER INTENDED METHOD OF PAYMENT				TOTAL PARTS \$ <i>1765.40</i>			
<i>estimate based on initial inspection only</i>				TOTAL LABOR \$ <i>1380.00</i>			
				TOTAL REFINISH \$ <i>540.00</i>			
				TOTAL SUBLET \$			
				TOWING \$ <i>3685.40</i>			
The above is an estimate based on our inspection and does not cover any additional parts or labor which may be required after the work has been started. Occasionally, worn or damaged parts are discovered which may not be evident on the first inspection. Because of this, the above prices are not guaranteed. Quotations on parts and labor are current and subject to change.				EPA/WASTE DISPOSAL \$ <i>221.12</i>			
AUTHORIZATION FOR REPAIR. You are hereby authorized to make the above repairs and to charge DAILY STORAGE in the amount of \$ beginning with the 4th day after your notification that the repair work has been completed.				SUB TOTAL \$			
				SALES TAX \$ <i>3906.52</i>			
Signature: _____				TOTAL \$			
Date: _____							

C.A.R.S. PAINT & BODY SHOP

Auto, Light Truck Collision Repairs

1422 S. 2nd Street - Clearfield, PA 16830

Phone 814-765-4616 Fax 814-765-2902

Expert Body & Paint Work Since 1974

006322

ESTIMATE

Page of Pages

NAME <i>Marsha Hughes</i>		PHONE <i>765-4770</i>	DATE <i>10-24-06</i>	TIME		
ADDRESS <i>121 W. Sixth Ave. Clearfield PA 16830</i>			PREPARED BY			
YEAR <i>93</i>	MAKE <i>Cutlass</i>	MODEL <i>Dr</i>	TAG NO		ODOMETER	
SERIAL NO <i>1G3WH54T2P0300209</i>		INSURANCE CO		ADJUSTOR		

REPLACE	REPAIR	DESCRIPTION	PARTS	LABOR	REFINISH	SUBLET
<input checked="" type="checkbox"/>		ft Bmper cover			2.2	
<input checked="" type="checkbox"/>		" " absorber	250 ⁰⁰	3.0		
<input checked="" type="checkbox"/>		" " Impact Bar				
<input checked="" type="checkbox"/>		" " end plates				
<input checked="" type="checkbox"/>		H/lamp mty panel				
<input checked="" type="checkbox"/>		rt H/lamp	125 ⁰⁰	1.5		
<input checked="" type="checkbox"/>		" s/m				
<input checked="" type="checkbox"/>		" p/lamp				
<input checked="" type="checkbox"/>		Bulbs				
<input checked="" type="checkbox"/>		Hood	250 ⁰⁰	2.0	3.8	
<input checked="" type="checkbox"/>		Rad				
<input checked="" type="checkbox"/>		" anti freeze				
<input checked="" type="checkbox"/>		" fan assys	375 ⁰⁰	1.5		
<input checked="" type="checkbox"/>		a/c				
<input checked="" type="checkbox"/>		" freon	80 ⁰⁰	1.0		
<input checked="" type="checkbox"/>		rt ft fender	125 ⁰⁰	2.0	2.5	
<input checked="" type="checkbox"/>		" " apron		3.0		

PROPOSED WORK COMPLETION DATE	ESTIMATE CHARGE \$
CUSTOMER INTENDED METHOD OF PAYMENT	TOTAL PARTS \$
DESCRIPTION OF CUSTOMER'S PROBLEM OR REQUEST FOR REPAIR WORK OR SERVICE <i>all prices subject to Invoice</i>	TOTAL LABOR \$
	TOTAL REFINISH \$
	TOTAL SUBLET \$
	TOWING \$
The above is an estimate based on our inspection and does not cover any additional parts or labor which may be required after the work has been started. Occasionally, worn or damaged parts are discovered which may not be evident on the first inspection. Because of this, the above prices are not guaranteed. Quotations on parts and labor are current and subject to change.	EPA/WASTE DISPOSAL \$
	SUB TOTAL \$
	SALES TAX \$
AUTHORIZATION FOR REPAIR. You are hereby authorized to make the above repairs and to charge DAILY STORAGE in the amount of \$ beginning with the 4th day after your notification that the repair work has been completed.	TOTAL \$
Signature: _____	Date: _____

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

MARSHA D. HUGHES AND
JERRY A. HUGHES,
Plaintiffs

*

*

-vs-

*

Docket No. 07-124-CD

SAMANTHA E. LUZIER-BUTZER,
Defendant

*

*

Type of pleading:
PRAECIPE TO ENTER
JUDGMENT

Filed on behalf of:
PLAINTIFFS, Marsha D.
Hughes and Jerry A.
Hughes

Counsel of record for
this party:

Dwight L. Koerber, Jr.,
Esquire
PA I.D. No. 16332

110 North Second Street
P. O. Box 1320
Clearfield, PA 16830
(814) 765-9611

FILED

ATTY PAID 20.00

3:45 p.m. GK

no cc

MAR 20 2007

1 NOTICE TO DEF.

1 STATEMENT TO ATTY

William A. Shaw
Prothonotary/Clerk of Courts

CR

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

MARSHA D. HUGHES AND
JERRY A. HUGHES,
Plaintiffs

*

*

-vs-

*

Docket No. 07-124-CD

SAMANTHA E. LUZIER-BUTZER,
Defendants

*

*

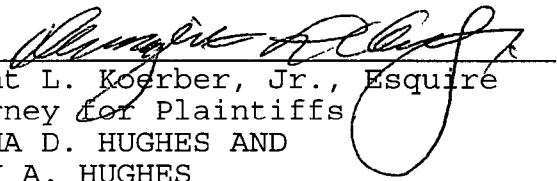
PRAECIPE TO ENTER JUDGMENT

TO THE PROTHONOTARY:

Pursuant to the provisions of Pa.R.C.P. §237.1, please enter default judgment in favor of plaintiffs and against Defendant SAMANTHA E. LUZIER-BUTZER, in the amount of \$4,191.53, plus costs of suit. A Certificate of Service of Notice of Default Judgment is attached hereto.

Respectfully submitted,

By:


Dwight L. Koerber, Jr., Esquire
Attorney for Plaintiffs
MARSHA D. HUGHES AND
JERRY A. HUGHES

DATE: March 20, 2007

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

MARSHA D. HUGHES AND
JERRY A. HUGHES,
Plaintiffs

*

*

-vs-

*

Docket No. 07-124-CD

SAMANTHA E. LUZIER-BUTZER,
Defendant

*

*

CERTIFICATION OF SERVICE OF
NOTICE OF DEFAULT JUDGMENT

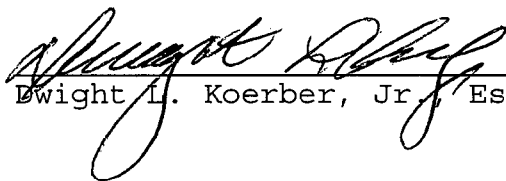
COMMONWEALTH OF PENNSYLVANIA:

:SS:


COUNTY OF CLEARFIELD

:

DWIGHT L. KOERBER, JR., ESQUIRE, counsel for plaintiffs
herein, being duly sworn according to law, deposes and states
that the Notice of Intention to Take Default Judgment was mailed
to Defendant Samantha E. Luzier-Butzer by United States First
Class Mail on March 7, 2007. Attached hereto is a copy of the
said notice.


Dwight L. Koerber, Jr., Esquire

Sworn to and subscribed
before me this 20th day
of March, 2007.


Notary Public

COMMONWEALTH OF PENNSYLVANIA
Notarial Seal
Joyce S. Rodkey, Notary Public
Clearfield Boro, Clearfield County
My Commission Expires Oct. 21, 2009
Member, Pennsylvania Association of Notaries

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

MARSHA D. HUGHES AND
JERRY A. HUGHES,
Plaintiffs

*

*

-vs-

*

Docket No. 07-124-CD

SAMANTHA E. LUZIER-BUTZER,
Defendant

*

*


TO: SAMANTHA E. LUZIER-BUTZER
993 Park Avenue Extension
Lawrence Park Village, Apt. 5-C
Clearfield, PA 16830

DATE OF NOTICE: March 7, 2007

IMPORTANT NOTICE

YOU ARE IN DEFAULT BECAUSE YOU HAVE FAILED TO TAKE ACTION
REQUIRED OF YOU IN THIS CASE. UNLESS YOU ACT WITHIN TEN (10)
DAYS FROM THE DATE OF THIS NOTICE, A JUDGMENT MAY BE ENTERED
AGAINST YOU WITHOUT A HEARING AND YOU MAY LOSE YOUR PROPERTY OR
OTHER IMPORTANT RIGHTS.

Court Administrator
Clearfield County Courthouse
Second and Market Streets
Clearfield, PA 16830
(814) 765-2641



Dwight L. Koerber, Jr., Esquire
110 N. Second St., P.O. Box 1320
Clearfield, PA 16830
814-765-9611

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

Marsha D. Hughes and Jerry A. Hughes,

Plaintiffs

No. 07-124-CD

vs

Samantha E. Luzier-Butzer,

Defendant

Notice is given that a JUDGMENT in the above captioned
matter has been entered against you in the amount of
\$ 4,191.52 on March 20, ~~20~~2007.

by William L. Hark ^{Prothonotary}
GK
Deputy

COPY

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY,
PENNSYLVANIA
STATEMENT OF JUDGMENT

Jerry A. Hughes
Marsha D. Hughes
Plaintiff(s)

No.: 2007-00124-CD

Real Debt: \$4,191.53

Atty's Comm: \$

Vs.

Costs: \$

Int. From: \$

Samantha E. Luzier-Butzer
Defendant(s)


Entry: \$20.00

Instrument: Default Judgment

Date of Entry: March 20, 2007

Expires: March 20, 2012

Certified from the record this 20th day of March, 2007.



William A. Shaw, Prothonotary

SIGN BELOW FOR SATISFACTION

Received on _____, _____, of defendant full satisfaction of this Judgment,
Debt, Interest and Costs and Prothonotary is authorized to enter Satisfaction on the same.

Plaintiff/Attorney