

08-537-CD

In Re: 105-L09-000-017.1

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

IN RE: TAX PARCEL NO.
105-L09-000-017.1

: No. 08 - 537 C.D.
:

**PETITION TO DISAPPROVE SALE
OF BOGGS TOWNSHIP PROPERTY
MAP NO. 105-L09-000-017.1**

Filed on behalf of:
Petitioner, PERRY IRWIN

Counsel of Record for
this Party:

John R. Ryan
Attorney-At-Law

Pa. I.D. 38739

BELIN, KUBISTA & RYAN LLP
15 N. Front Street
P.O. Box 1
Clearfield, PA 16830
(814) 765-8972

Original
upstairs

FILED bcc
013.10.00 Amy Ryan

William A. Shaw
Prothonotary/Clerk of Courts

Amy pg. 95.00

JA

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

IN RE: TAX PARCEL NO.
105-L09-000-017.1

: No. 08 - 537 - C.D.
:

ORDER

AND NOW, this 26th day of March, 2008, upon consideration of the foregoing
Petition to Disapprove Sale of Boggs Township Property Map No. 105-L09-000-017.1, it is the
ORDER of this Court that said matter shall be heard the 14th day of May, 2008, at
2:00 o'clock P.m., Courtroom No. 1 of the Clearfield County Courthouse,
Clearfield, Pennsylvania.

BY THE COURT:

Judith J. Cunningham
Judge

FILED 6cc
06/22/08 Att. Ryan
UN
William A. Shaw
Prothonotary/Clerk of Courts

DATE: 3/26/08

X You are responsible for serving all appropriate parties.

____ The Probationary's Office has provided service to the following parties:

____ Plaintiff(s) ____ Plaintiff(s) Attorney ____ Other

____ Defendant(s) ____ Defendant(s) Attorney

____ Special Instructions:

FILED

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

IN RE: TAX PARCEL NO.
105-L09-000-017.1

No. 08 - 537 C.D.

**PETITION TO DISAPPROVE SALE
OF BOGGS TOWNSHIP PROPERTY
MAP NO. 105-L09-000-017.1**

Filed on behalf of:
Petitioner, PERRY IRWIN

Counsel of Record for
this Party:

John R. Ryan
Attorney-At-Law

Pa. I.D. 38739

BELIN, KUBISTA & RYAN LLP
15 N. Front Street
P.O. Box 1
Clearfield, PA 16830
(814) 765-8972

FILED bcc
01/31/08 Atty Ryan
LM
William A. Shaw
Prothonotary/Clerk of Courts Atty pd.
95.00

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

IN RE: TAX PARCEL NO. : No. 08 - - C.D.
105-L09-000-017.1 :

PETITION TO DISAPPROVE SALE OF BOGGS TOWNSHIP
PROPERTY MAP No. 105-L09-000-017.1

NOW COMES, Perry Irwin, Petitioner, and by his Attorneys, Belin, Kubista & Ryan
LLP, and files his Petition to Disapprove the sale of the above referenced Tax Parcel and avers
as follows:

1. Petitioner is Perry Irwin, an adult individual residing at 922 South 6th Street,
Clearfield, Pennsylvania.
2. The Clearfield County Tax Claim Bureau proposes to sell real property situated
in Boggs Township, Clearfield County, Pennsylvania, having Assessment Map Mo. 105-L09-
000-017.1, said property being currently assessed in the names of Albert C. Pry and Norma M.
Pry. The sale price as advertised for the said property is \$200.00.
3. Petitioner objects to the sale as being in an amount less than the market value of
the property.

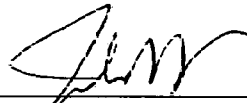
WHEREFORE, pursuant to 72 Pa. 5680.613 (a), Petitioner requests that the Court set a
date for hearing and at that time disapprove the said sale, together with such other relief as is
provided by statute.

BELIN, KUBISTA & RYAN LLP



John R. Ryan
Attorney for Petitioner

I verify that the statements made in this Petition are true and correct to the best of my knowledge, information and belief. I understand that false statements herein are made subject to the penalties of Pa. C.S. 4904, relating to unsworn falsification to authorities.

A handwritten signature in black ink, appearing to read "John R. Ryan", written over a horizontal line.

John R. Ryan

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

IN RE: TAX PARCEL NO.
105-L09-000-017.1

: No. 08-537-CD
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:
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: Type of Filing: Entry of Appearance
:
:

: Filed on Behalf of : Leo Knepp
:
:
:
:

: Counsel for This Party:
:
:
:

: Ann B. Wood, Esquire
: Supreme Court No. 23364
:
:

: Bell, Silberblatt & Wood
: 318 East Locust Street
: P.O. Box 670
: Clearfield, PA 16830
:
:

: (814) 765-5537

FILED

0 11:12 AM OK
APR 16 2008

William A. Shaw
Prothonotary/Clerk of Courts

ND CC

(EK)

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

IN RE: TAX PARCEL NO.
105-L09-000-017.1

: No. 08-537-CD
:
:

PRAECIPE FOR APPEARANCE

TO: William A. Shaw, Prothonotary, Clerk of Courts,

Please enter my appearance on behalf of LEO KNEPP in the above captioned case.

BELL, SILBERBLATT & WOOD
By

Date: April 15, 2008

Ann B. Wood
Ann B. Wood, Esquire
Attorney for Leo Knepp

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

IN RE: TAX PARCEL NO. : No. 08-537-CD
105-L09-000-017.1 :

CERTIFICATE OF SERVICE

I hereby certify that true and correct copies of the foregoing Praecipe to Enter Appearance as filed on behalf of Leo Knepp with reference to the above matter has been served upon the following parties by mailing the same to them by United States First Class Mail, postage prepaid, addressed as follows on April 16, 2008:

Clearfield County Tax Claim Bureau
230 East Market Street
Clearfield, PA 16830

Philipsburg-Osceola School District
200 Short Street
Philipsburg, PA 16866

Mary Jo Long
Boggs Township T.C.
2946 Old Erie Pike
West Decatur, PA 16878

John R. Ryan, Esquire
Belin, Kubista & Ryan, LLP
Attorneys for Perry Irwin
P.O. Box One
Clearfield, PA 16830

Albert C. Pry & Norma M. Pry
144 Bonnie Court
Curwensville, PA 16833

BELL, SILBERBLATT & WOOD
By

Date: April 16, 2008

Ann B. Wood
Ann B. Wood, Esquire
Attorney for Leo Knepp

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

IN RE: TAX PARCEL NO.
105-L09-000-017.1

: No. 08 – 537 – C.D.
:

CERTIFICATE OF SERVICE


Filed on behalf of:
Petitioner, PERRY IRWIN

Counsel of Record for
this Party:

John R. Ryan
Attorney-At-Law

Pa. I.D. 38739

BELIN, KUBISTA & RYAN LLP
15 N. Front Street
P.O. Box 1
Clearfield, PA 16830
(814) 765-8972

FILED
01:55 p.m. CK
MAR 28 2008 *NOCC*

William A. Shaw
Prothonotary/Clerk of Courts

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

IN RE: TAX PARCEL NO. : No. 08 – 537 – C.D.
105-L09-000-017.1 :

CERTIFICATE OF SERVICE

This is to certify that I have served a certified copy of Petition to Disapprove Sale of Boggs Township Property Map No. 105-L09-000-017.1 filed on behalf of Petitioner PERRY IRWIN in the above captioned matter, together with a certified copy of the Order scheduling hearing on said Petition, on the following parties by postage prepaid first-class United States mail, on the 27th day of March, 2008:

Clearfield County Tax Claim Bureau
230 East Market Street
Clearfield, PA 16830


Philipsburg-Osceola School District
200 Short Street
Philipsburg, PA 16866

Mary Jo Long
Boggs Township Tax Collector
2946 Old Erie Pike
West Decatur, PA 16878

Leo Knepp
9529 Old Erie Pike
Clearfield, PA 16830

Albert C. Pry
Norma M. Pry
144 Bonnie Court
Curwensville, PA 16833

BELIN, KUBISTA & RYAN LLP



John R. Ryan
Attorney for Petitioner, Perry Irwin

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA

CIVIL DIVISION

IN RE:

:

TAX PARCEL NO.

:

NO. 08-537-CD

105-L09-000-017.1

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FILED 6cc Atty
C/2:25 am Kesner
MAY 14 2008 (will serve)

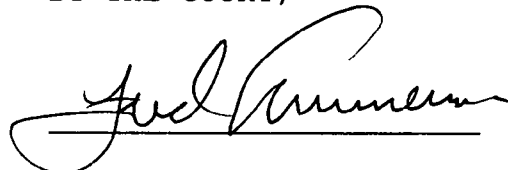
William A. Shaw
Prothonotary/Clerk of Courts

O R D E R

AND NOW, this 14th day of May, 2008, this being the date for hearing on Perry Irwin's Petition to Disapprove Sale; Petitioner, the Clearfield County Tax Claim Bureau, and Leo Knepp having appeared with counsel; this Court, after discussion, being satisfied that the private sale should be disapproved, it is hereby ORDERED and DECREED:

1. The proposed private sale to Leo Knepp for \$200.00 is disapproved;
2. An auction style bidding of the assessment shall be held by the Clearfield County Tax Claim Bureau on a date convenient to it and the parties to this proceeding but in no event beyond 14 days hereof;
3. The minimum bid shall be \$2,000.

BY THE COURT,



President Judge

08-542-CD
Jennifer Kaiser vs Scott Kaiser

UA

[illegible]

NC. 2008-542 -CD

Type of Pleading:

COMPLAINT IN DIVORCE

Counsel of Record for
this party:

Trudy G. Lumadue, Esq.
Pa I.D. 202049

One Minor Child:
Chance D. Kaiser: D.O.B. 12/7/07

01/31/45
Any pd.
\$140.00
(LW) 2cc Any Nadded

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

No. 2008-542 -CD

RULE

AND NOW, this 27th day of March, 2008, upon consideration of the attached Complaint which includes a request for Alimony Pendente Lite, Counsel Fees, Costs and Expenses a Rule is hereby issued upon Respondent to show cause why the petition should not be granted. Rule Returnable the 21st of April, 2008, at 2:30 p.m., in Courtroom No. 2 of the Clearfield County Courthouse, Clearfield, Pennsylvania, for hearing.

NOTICE

A PETITION HAS BEEN FILED AGAINST YOU IN COURT. IF YOU WISH TO DEFEND AGAINST THE CLAIMS SET FORTH IN THE FOLLOWING PETITION, 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 MATTER SET FORTH AGAINST YOU. YOU ARE WARNED THAT IF YOU FAIL TO DO SO THE CASE MAY PROCEED WITHOUT YOU AND AN ORDER MAY BE ENTERED AGAINST YOU BY THE COURT WITHOUT FURTHER NOTICE FOR RELIEF REQUESTED BY THE PETITIONER OR MOVANT. YOU MAY LOSE 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.

COURT ADMINISTRATOR
CLEARFIELD COUNTY COURTHOUSE
CLEARFIELD, PA 16830
(814) 765-2641, Ext. 5982

BY THE COURT,

FILED

03:54 P.M. GK acc Amy
MAR 31 2008
MADEO

William A. Shaw
Prothonotary/Clerk of Courts

Paul E. Cherry
Judge

FILED
MAR 31 2008
William A. Shaw
Prothonotary/Clerk of Courts

DATE: 3-31-08

☒ You are responsible for serving all appropriate parties.

☐ The Prothonotary's office has provided service to the following parties:

☐ Plaintiff(s) ☐ Plaintiff(s) Attorney ☐ Other

☐ Defendant(s) ☐ Defendant(s) Attorney

☐ Special Instructions:

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008- -CD

NOTICE TO DEFEND AND CLAIM RIGHTS

You have been sued in court. If you wish to defend against the claims set forth in the following pages, you must take prompt action. You are warned that if you fail to do so, the case may proceed without you and a decree of divorce or annulment may be entered against you by the court. A judgement may also be entered against you for any other claim or relief requested in these papers by the Plaintiff. You may lose money or property or other rights important to you, including custody or visitation of your children.

When the ground for the divorce is indignities or irretrievable breakdown of the marriage, you may request marriage counseling. A list of marriage counselors is available in the Office of the Prothonotary of Clearfield County, William Shaw, Prothonotary & Clerk of Courts, Clearfield County Courthouse, Clearfield, Pennsylvania.

IF YOU DO NOT FILE A CLAIM FOR ALIMONY, DIVISION OF PROPERTY, LAWYER'S FEES OR EXPENSES BEFORE A DIVORCE OR ANNULMENT IS GRANTED, YOU MAY LOSE THE RIGHT TO CLAIM ANY OF THEM.

YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO NOT HAVE A LAWYER, GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW. THIS OFFICE CAN PROVIDE YOU WITH INFORMATION ABOUT HIRING A LAWYER.

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.

COURT ADMINISTRATOR
Clearfield County Courthouse
Clearfield, PA 16830
(814) 765-2641, ext. 5982

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008- -CD

COMPLAINT UNDER SECTION 3301(c)
AND 3301(d) OF THE DIVORCE CODE

COUNT I - DIVORCE

NOW COMES the Plaintiff, Jennifer L. Kaiser, and by her attorney, James A. Naddeo, Esquire, sets forth the following:

1. That the Plaintiff is Jennifer L. Kaiser, an individual, who currently resides at 408 North Eleventh Street, Philipsburg, Pennsylvania 16866.

2. That the Defendant is Scott J. Kaiser, an individual, who currently resides at 179 Church Street, Morrisdale, Pennsylvania, 16858.

3. That the Plaintiff and the Defendant are sui juris and Plaintiff has been a bona fide resident of the Commonwealth of Pennsylvania for a period of more than six months immediately preceding the filing of this Complaint.

4. That the parties were married on April 20, 2002 at Gethsemane United Methodist Church located in Allport, Pennsylvania before Reverend Aden Wentz.

5. There have been no prior actions of divorce or for annulment between the parties.

6. There has been an irretrievable breakdown of the marriage relationship of the parties within the meaning of Act No. 26, Sections 3301(c) and (d) of the Commonwealth of Pennsylvania of 1980.

7. Plaintiff has been advised that counseling is available and that Plaintiff may have the right to request that the Court require the parties to participate in counseling.

8. Plaintiff requests the Court to enter a decree of divorce.

WHEREFORE, Plaintiff requests your Honorable Court to enter a decree in Divorce, divorcing the Plaintiff and Defendant absolutely.

COUNT II - EQUITABLE DISTRIBUTION

9. That Paragraphs One through Eight of this Complaint are incorporated herein by reference and made a part hereof as though set forth in full.

10. Plaintiff and Defendant have legally and beneficially acquired property both real and personal during their marriage from April 20, 2002 to December 25, 2007 when the parties separated.

11. Plaintiff and Defendant have been unable to agree to an equitable division of said property to the date of the filing of this Complaint.

12. That an Inventory and Appraisement of all property owned or possessed by Plaintiff will be supplied in accordance with the Divorce Code.

WHEREFORE, Plaintiff requests your Honorable Court to equitably divide all marital property.

COUNT III - ALIMONY PENDENTE LITE,
COUNSEL FEES, COSTS AND EXPENSES

13. That Paragraphs One through Twelve of this Complaint are incorporated herein by reference and made a part hereof.

14. That Plaintiff has employed James A. Naddec, Esquire, as counsel, but is unable to pay the necessary and reasonable attorney's fees for said counsel.

15. That Plaintiff has entered into a fee agreement with her attorney whereby he is to be compensated at the rate of Two Hundred (\$200.00) Dollars per hour for all time spent in connection with the matters set forth in this Complaint.

16. That Plaintiff will be required to incur costs and expenses including appraisal fees, etc. Plaintiff has

insufficient income to pay for the expenses of this litigation or to maintain herself during the pendency of this action.

WHEREFORE, Plaintiff requests your Honorable Court to enter an award of temporary counsel fees, costs and expenses, until final hearing and thereupon award such additional counsel fees, costs and expenses as are deemed appropriate.

NADDEC & LEWIS, LLC

By James A. Naddeo
James A. Naddeo, Esquire
Attorney for Plaintiff

COMMONWEALTH OF PENNSYLVANIA)

SS .

COUNTY OF CLEARFIELD)

Before me, the undersigned officer, personally appeared JENNIFER L. KAISER, who being duly sworn according to law, depose and state that the facts set forth in the foregoing Complaint are true and correct to the best of her knowledge, information and belief.

Jennifer L. Kaiser
Jennifer L. Kaiser

SWORN and SUBSCRIBED before me this 18th day of March, 2008.

Anna Lewis

COMMONWEALTH OF PENNSYLVANIA
Notarial Seal
 Linda C. Lewis, Notary Public
 Jefferson Boro, Clearfield County
 My Commission Expires July 25, 2011

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

No. 2008-542-CD

Type of Pleading:

AFFIDAVIT OF SERVICE

Filed on behalf of:
Plaintiffs

Counsel of Record for
this party:

James A. Naddeo, Esq.
Pa I.D. 06820

&

Trudy G. Lumadue, Esq.
Pa I.D. 202049

NADDEO & LEWIS, LLC.
207 E. Market Street
P.O. Box 552
Clearfield, PA 16830
(814) 765-1601

Dated: April 10, 2008

FILED NO CC
013:3034
APR 10 2008
William A. Shaw
Prothonotary/Clerk of Courts

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

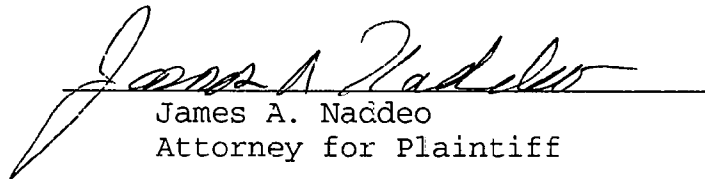
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No. 2008-542-CD

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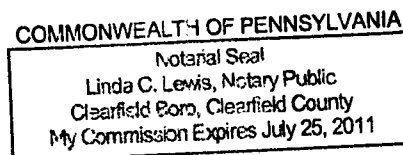
COMMONWEALTH OF PENNSYLVANIA)
SS
COUNTY OF CLEARFIELD)

James A. Naddeo, Esquire, being duly sworn according to law, deposes and states that a certified copy of the Complaint filed in the above-captioned action was served upon the Defendant, Scott J. Kaiser, in accordance with Pa. R.C.P. 1930.4(c) by first-class mail, RESTRICTED DELIVERY, return receipt requested on April 9, 2008, at the Defendant's address of 179 Church Street, Morrisdale, PA 16858 as appears from the receipt of Certified Mail attached hereto.


James A. Naddeo
Attorney for Plaintiff

SWORN and SUBSCRIBED before me this 10th day of April, 2008.





SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Scott J. Kaiser
179 Church Street
Morrisdale, PA 16866

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Scott Kaiser*

☐ Agent☒ Addressee

B. Received by (Printed Name)

SCOTT KAISER

C. Date of Delivery

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below

☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☒ Yes

2. Article Number

(Transfer from service label)

7007 2560 0002 6023 1155

William A. Shaw
Prothonotary/Clerk of Courts (610)

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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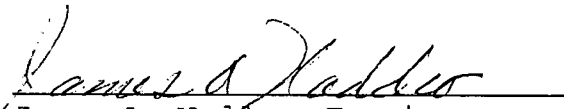
No. 2008-542-CD

PRAECIPE TO DISCONTINUE

TO THE PROTHONOTARY:

Dear Sir:

Please mark the Plaintiff's claim for Alimony Pendente Lite, Counsel Fees, Costs and Expenses to be withdrawn and discontinued.


James A. Naddeo, Esquire
Attorney for Plaintiff

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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No. 08-542-CD

PRAECIPE TO ENTER APPEARANCE

Filed on behalf of

Defendant

Counsel of Record for
this Party:

Kimberly M. Kubista
Attorney-At-Law
Pa. I.D. 52782

BELIN, KUBISTA & RYAN LLP
15 N. Front Street
Clearfield, PA 16830
(814) 765-8972

FILED *acc*
0/10:45/61 Atty Kubista
APR 23 2008
William A. Shaw *Copy to CIA*
Prothonotary/Clerk of Courts
612

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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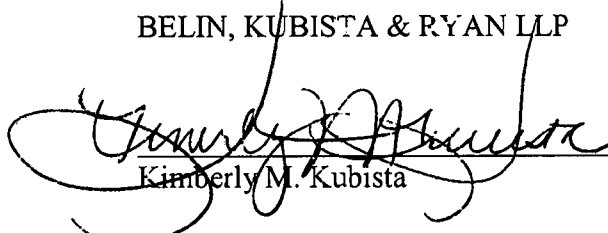
No. 08-542-CD

PRAECIPE TO ENTER APPEARANCE

TO THE PROTHONOTARY:

Please enter my appearance on behalf of the Defendant in reference to the above
captioned action.

BELIN, KUBISTA & RYAN LLP



Kimberly M. Kubista

Date: 4-22-08

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

No. 08-542-CD

PETITION FOR MODIFICATION OF
CUSTODY ORDER

Filed on behalf of

Defendant

Counsel of Record for
this Party:

Kimberly M. Kubista
Attorney-At-Law
Pa. I.D. 52782

BELIN, KUBISTA & RYAN LLP
15 N. Front Street
Clearfield, PA 16830
(314) 765-8972

FILED

01/10:48301
NOV 14 2008

3cc
Atty Kubista

5
Willam A. Shaw
Prothonotary/Clerk of Courts

GLW

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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No. 03-542-CD

NOTICE

A Petition or Motion has been filed against you in Court. If you wish to defend against the claims set forth in the following pages, you must take action on or before _____ by entering a written appearance personally or by attorney and filing (Rule Returnable) in writing with the Court your defenses or objections to the matter set forth against you. You are warned that if you fail to do so the case may proceed without you and an order may be entered against you by the Court without further notice for relief requested by Petitioner or Movant. You may lose 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.

Court Administrator
Clearfield County Courthouse
Market & Second Streets
Clearfield, PA 16830
(814) 765-2641, Ext. 5982

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

No. 08-542-CD

PETITION FOR MODIFICATION
OF CUSTODY ORDER

NOW COMES the Defendant, SCOTT J. KAISER, by and through his attorneys, Belin, Kubista & Ryan LLP and sets forth the following Petition for Modification of Custody Order, and in support thereof would aver as follows:

1. Petitioner is Scott J. Kaiser, hereinafter "Father".
2. Respondent is Jennifer L. Kaiser, hereinafter "Mother".
3. Father and Mother are the parents of one (1) child; namely, Chance Donovan Kaiser, d.c.b. 12/7/07.
4. That the parties entered into an Order dated April 30, 2008, a copy of which is attached hereto as Exhibit "A" and incorporated herein by reference as though set forth in full.
5. That pursuant to the Order, the parties are to share custody of the child in accordance with their respective schedules.
6. That difficulties have arisen wherein Mother is not permitting Father to have the child in accordance with his schedule.
7. That Father wishes to modify the Order in order that his periods of custody are more specific in order to eliminate any further difficulties.

8. That Father is employed by the Cornell Correctional Facility and has to work various shifts.

9. Father specifically requests the following in a new Custody Order given his employment schedule:

a) That Father have the child on his two (2) consecutive days off each week from the 7:00 p.m. the evening before his first day off and return the child to Mother on the second day off at 7:00 p.m. regardless of Mother's work schedule.

b) When Father works 6:00 a.m. to 2:00 p.m. that Father have the child each Friday from 3:00 p.m. to 7:00 p.m. and each Sunday from 3:00 p.m. to 7:00 p.m.

c) When Father works 2:00 p.m. to 10:00 p.m. that Father have the child each Friday from 8:00 a.m. to 12:00 p.m. and each Sunday from 8:00 a.m. to 12:00 p.m.

d) When Father works 10:00 p.m. to 6:00 a.m. that Father have the child each Friday at 8:00 a.m. until 7:00 p.m. and each Sunday from 8:00 a.m. until 7:00 p.m.

e) Father wishes to have a specific holiday schedule placed in the Order in order to avoid any further controversy.

f) Father wishes to have the child for his birthday for a specified period of time.

g) Father wishes to have three (3) non-consecutive weeks of custody of the child each year for vacation purposes.

h) Father wishes to be listed as a contact person at the child's daycare in order that he is permitted to be able to pick up the child when necessary as opposed to a third party picking the child up.

i) Father wishes to have transportation shared in that the party who is to


receive custody of the child shall be the party to complete the transportation.

j) That should Mother be unavailable to the child at the end of Father's periods of custody, that the child remain with Father until such time as Mother is available.

9. That paragraph 5 of Your Honorable Court's Order provides for either party to request a second mediation.

WHEREFORE, Petitioner request Your Honorable Court to direct that this matter be scheduled for mediation and if the same is not resolved at the mediation, that this matter be scheduled for a hearing in order that the Court may enter an Order giving Father specific periods of partial custody.

BELIN, KUBISTA & RYAN LLP


Kimberly M. Kubista
Attorney for Petitioner

I verify that the statements made in the foregoing pleading are true and correct.

I understand that false statements herein are made subject to the penalties of 18 Pa C.S. Section 4904, relating to unsworn falsification to authorities.

11-10-08
Date

S. Kaiser
Scott J. Kaiser

IN THE COURT OF COMMON PLEAS
OF CLEARFIELD COUNTY, PENNSYLVANIA

CIVIL DIVISION

SCOTT J. KAISER

:

-VS-

: No. 08-91-CD

JENNIFER L. KAISER

:

O R D E R

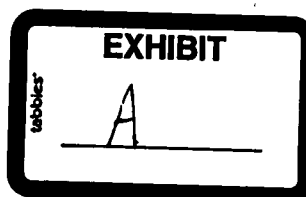
AND NOW, this 30th day of April, 2008, this being the date set for mediation conference, and upon agreement of the parties, it is the ORDER of this Court as follows:

1. Scott J. Kaiser (hereinafter father) and Jennifer L. Kaiser (hereinafter mother) shall have shared legal custody of their minor child, Chance Donovan Kaiser (D.O.B. 12-07-08).

Legal custody shall be defined as the legal right to make major decisions affecting the best interests of the child, including, but not limited to, medical, religious and educational decisions, and that each parent shall have equal access to any and all medical, dental, school and legal records.

Medical, dental and other professional providers, as well as school administrations, shall accept a copy of this order as authorization to release documentation to either parent.

It is also understood by both parties that they



shall communicate fully with each other to assure all directives pertaining to the child from physicians, dentists, mental health providers and teachers are followed absolutely and that all information pertaining to any prescriptions for the child are exchanged between the parties;

2. Mother shall have primary physical custody of the minor child, subject to father's periods of partial custody on a daily basis or as the parties may agree;

3. When mother returns to work, the parties shall share custody of the child in accordance with their respective schedules and also agree to the caretaker of said child if both parents are unavailable;

4. The parties agree to schedule marital counseling within the next thirty (30) days with an agreed upon counselor, and they shall attend no less than six (6) sessions; the

5. Should the parties encounter further difficulties with custody, either party may schedule another mediation.

BY THE COURT,

BY THE COURT,

/s/ Paul E. Cherry

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

Judge

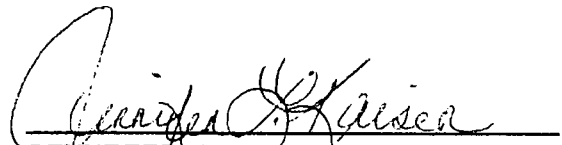
APR 30 2008


Attest.

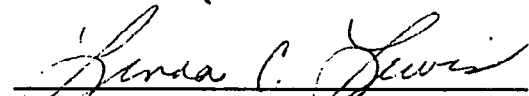
William A. Cherry
Prothonotary/
Clerk of Court

we, the undersigned, hereby consent to the entry
of the foregoing Order.


SCOTT J. KAISER
Plaintiff v of


JENNIFER L. KAISER
Defendant


KIMBERLY M. KUBISTA, ESQUIRE
Attorney for Plaintiff


LINDA C. LEWIS, ESQUIRE
Attorney for Defendant

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

No. 08-542-CD

FILED

NCV 17 2008

0/3/08
William A. Shaw
Prothonotary/Clerk of Courts
no 2/1 5

CERTIFICATE OF SERVICE

Filed on behalf of

Defendant

Counsel of Record for
this Party:

Kimberly M. Kubista
Attorney-At-Law
Pa. I.D. 52782

BELIN, KUBISTA & RYAN LLP
15 N. Front Street
P.O. Box 1
Clearfield, PA 16830
(814) 765-8972

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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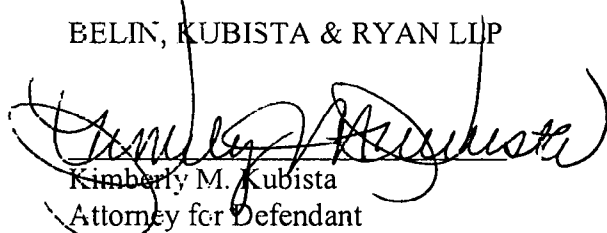
No. 03-542-CD

CERTIFICATE OF SERVICE

This is to certify that I have served a certified copy of Petition for Modification
of Custody Order on the 17th day of November, 2008 to the following:

James A. Naddeo, Esquire
P.O. Box 552
Clearfield, PA 16830

BELIN, KUBISTA & RYAN LLP


Kimberly M. Kubista
Attorney for Defendant

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

JENNIFER L. KAISER,
Plaintiff

V.

SCOTT J. KAISER,
Defendant

NO. 08-542-CD

ORDER FOR MEDIATION CONFERENCE and PAYMENT OF COSTS

NOW, this 17th day of November, 2008, it is ORDERED that a Custody Mediation Conference be held before Allen H. Ryen, Ph.D., Licensed Child Psychologist.

It is further ORDERED that **EACH PARTY** to this action shall forthwith complete a Child Custody Mediation Questionnaire and forward the same to Dr. Ryen (416 Knarr Street, DuBois, Pennsylvania 15801) within Ten (10) days of receipt of this ORDER.

It is also ORDERED that the cost of said Mediation Conference shall be borne equally by the Plaintiff(s) and Defendant(s).

Each party (or counsel for the parties) shall deposit Two Hundred Fifty (\$250.00) Dollars (**money orders only**) made payable to the Clearfield County Treasurer and mailed to D. Peters, Judge's Chambers, 230 East Market Street, Clearfield, Pennsylvania 16830 within Twenty-Five (25) days of the date of this Order to proceed with the Mediation Conference "OR" submit a Custody Consent Order to the Court within Twenty-Five (25) days of the date of this Order foregoing the Mediation Conference.

This Court shall issue a further ORDER scheduling the Mediation Conference when the required deposit has been received from all parties participating in this action.

FILED

NOV 18 2008

William A. Shaw
Prothonotary/Clerk of Courts

cc: Phys:
Naddeo
K. Kubista

W/ Questionnaire

If a Custody Consent Order is received by the Court after the Twenty-Fifth day following this Order and no later than ***SEVEN (7)*** days before scheduled Mediation Conference, then each party or counsel for the parties shall include Twenty (\$20.00) Dollars (money order only) in order to defray administrative/processing expense. In this event the amount of Two Hundred Fifty (\$250.00) Dollars previously deposited by each party shall be returned.

FAILURE OF A PARTY TO DEPOSIT THE REQUIRED FEE OF 'TWO HUNDRED FIFTY (\$250.00) DOLLARS' SHALL RESULT IN THE OFFENDING PARTY BEING SUBJECT TO CONTEMPT PROCEEDINGS BEFORE THE COURT.

BY THE COURT,

A handwritten signature in cursive script, reading "Paul E. Cherry". The signature is written in black ink and is positioned above a horizontal line.

PAUL E. CHERRY,
JUDGE

Attorney for the Plaintiff: James A. Naddeo, Esquire
Attorney for the Defendant: Kimberly Kubista, Esquire

FILED

NOV 18 2008

William A. Shaw
Prothonotary/Clerk of Courts

DATE: 11/18/08

☐ You are responsible for serving all appropriate parties.

☒ The Prothonotary's office has provided service to the following parties:

☐ Plaintiff(s) ☒ Plaintiff(s) Attorney ☐ Other

☐ Defendant(s) ☒ Defendant(s) Attorney

☐ Special Instructions:

CA

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

JENNIFER L. KAISER,
Plaintiff

V.

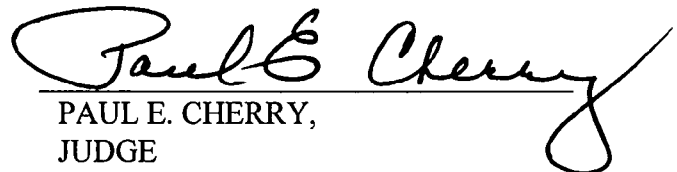
NO. 08-542-CD

SCOTT J. KAISER,
Defendant

ORDER

NOW, this 17th day of December, 2008, the above named Defendant, SCOTT J. KAISER, having failed to pay the Custody Mediation Fee pursuant to Order dated November 17, 2008, unless the above named Defendant pays the fee due the Clearfield County Treasurer in the amount of Two Hundred Fifty Dollars (\$250.00); (by **MONEY ORDER ONLY**), it is the ORDER of this Court that a hearing to show cause why said Defendant shall not be held in contempt of Court for failure to comply with said previous Order is scheduled for the 26th day of January, 2009, at 9:00 o'clock A.M. in Court Room No. 2 of the Clearfield County Courthouse, Clearfield, Pennsylvania at which time the Defendant must be present or a Bench Warrant may be issued for his arrest.

BY THE COURT,


PAUL E. CHERRY,
JUDGE

FILED
DEC 18 2008

2cc Alys:
Naddeo
K. Kubista

William A. Shaw
Prothonotary/Clerk of Courts (610)

FILED

DEC 18 2008

William A. Shaw
Prothonotary/Clerk of Courts

DATE: 12/18/08

☐ You are responsible for serving all appropriate parties.

☒ The Prothonotary's office has provided service to the following parties:

☐ Plaintiff(s)

☒ Plaintiff(s) Attorney

☐ Defendant(s)

☒ Defendant(s) Attorney

☐ Other

☐ Special Instructions:

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

FILED

DEC 29 2008

William A. Shaw
Prothonotary/Clerk of Courts

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JENNIFER L. KAISER,
Plaintiff

V.

NO. 2008-542-CD

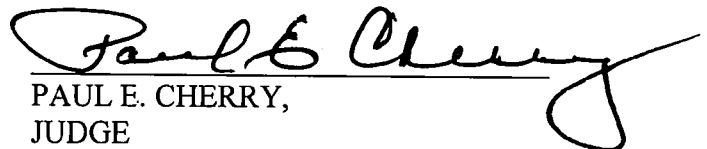
SCOTT J. KAISER,
Defendant

ORDER

AND NOW, this 29TH day of December, 2008, the Court having received payment of Mediation fee, it is the ORDER of this Court that Defendant, Scott J. Kaiser, shall not be required to attend Contempt Hearing scheduled January 26, 2009 at the Clearfield County Courthouse.

This matter shall be scheduled for Mediation before Dr. Allen H. Ryen, Ph. D., as soon as is consistent with his schedule.

BY THE COURT,


PAUL E. CHERRY,
JUDGE

DATE: 12-27-88

____ You are responsible for serving all appropriate parties.

☒ The Prothonotary's office has provided service to the following parties:

____ Plaintiff(s) ☒ Plaintiff(s) Attorney ____ Other

____ Defendant(s) ☒ Defendant(s) Attorney

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

JENNIFER L. KAISER,
Plaintiff

V.

NO. 08-542-CD

SCOTT J. KAISER,
Defendant

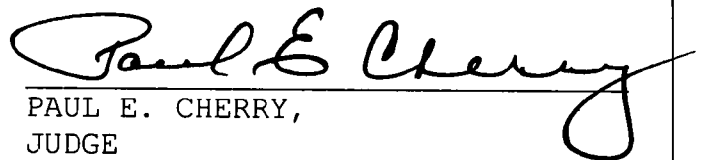
O R D E R

NOW, this 5th day of January, 2009, it is the ORDER of this Court that **Custody Mediation Conference** be held before Allen H. Ryen, Ph. D., Licensed Child Psychologist, on **February 25, 2009 at 1:00 o'clock P.M. at the Clearfield County Courthouse.**

Please report to the central lobby area on the second floor of the Courthouse. You will be instructed as to the location of the Custody Mediation Conference at that time. Both parents, their respective counsel and the child(ren) shall attend said conference. The present custodial parent shall provide someone to attend to the child(ren) while the parent is in private conference.

FAILURE OF A PARTY TO APPEAR FOR THE MEDIATION CONFERENCE WILL RESULT IN ASSESSMENT ON THAT OFFENDING PARTY OF ALL COSTS, UNLESS SAID PARTY HAS NOTIFIED THE CLEARFIELD COUNTY COURT ADMINISTRATOR (814) 765-2641, extension 5982 AT LEAST *** SEVEN (7) *** FULL BUSINESS DAYS IN ADVANCE OF THE SCHEDULED MEDIATION CONFERENCE AND THE COURT ADMINISTRATOR HAS AGREED TO A CONTINUANCE/RESCHEDULING.

BY THE COURT,


PAUL E. CHERRY,
JUDGE

Attorney for Plaintiff: James Naddeo, Esquire
Attorney for Defendant: Kimberly Kubista, Esquire

FILED 2009
01/10/2009
JAN 07 2009

William A. Shaw
Prothonotary/Clerk of Courts

Naddeo
K. Kubista
6/2

FILED

JAN 07 2009

William A. Shaw
Prothonotary/Clerk of Courts

DATE: 1/7/09

☐ You are responsible for serving all appropriate parties.

☒ The Prothonotary's office has provided service to the following parties:

☐ Plaintiff(s) ☒ Plaintiff(s) Attorney ☐ Other

☐ Defendant(s) ☒ Defendant(s) Attorney

☐ Special Instructions:

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

No. 08-542-CD

AMENDED PETITION FOR
MODIFICATION OF CUSTODY
ORDER

Filed on behalf of

Plaintiff

Counsel of Record for
this Party:

Kimberly M. Kubista
Attorney-At-Law
Pa. I.D. 52782

BELIN, KUBISTA & RYAN LLP
15 N. Front Street
Clearfield, PA 16830
(814) 765-8972

FILED *DCC AH*
03:30pm
MAY 22 2009 *K. Kubista*

5
William A. Shaw
Prothonotary/Clerk of Courts

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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No. 08-542-CD

NOTICE

A Petition or Motion has been filed against you in Court. If you wish to defend against the claims set forth in the following pages, you must take action on or before _____ by entering a written appearance personally or by attorney and filing (Rule Returnable) in writing with the Court your defenses or objections to the matter set forth against you. You are warned that if you fail to do so the case may proceed without you and an order may be entered against you by the Court without further notice for relief requested by Petitioner or Movant. You may lose 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.

Court Administrator
Clearfield County Courthouse
Market & Second Streets
Clearfield, PA 16830
(814) 765-2641, Ext. 5982

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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No. 08-542-CD

AMENDED PETITION FOR MODIFICATION
OF CUSTODY ORDER

NOW COMES the Defendant, SCOTT J. KAISER, by and through his attorneys, Belin, Kubista & Ryan LLP and sets forth the following Amended Petition for Modification of Custody Order, and in support thereof would aver as follows:

1. Petitioner is Scott J. Kaiser, hereinafter "Father".
2. Respondent is Jennifer L. Kaiser, hereinafter "Mother".
3. Father and Mother are the parents of one (1) child; namely, Chance Donovan Kaiser, d.o.b. 12/7/07.
4. That the parties entered into an Order dated April 30, 2008, a copy of which is attached hereto as Exhibit "A" and incorporated herein by reference as though set forth in full.
5. That pursuant to the Order, the parties are to share custody of the child in accordance with their respective schedules.
6. That difficulties have arisen wherein Mother is not permitting Father to have the child in accordance with his schedule.
7. That Father wishes to modify the Order in order that his periods of custody are more specific in order to eliminate any further difficulties.

8. That Father is employed by the Cornell Correctional Facility and has to work various shifts.

9. Father specifically requests the following in a new Custody Order given his employment schedule:

a) That Father have the child on his two (2) consecutive days off each week from the 5:00 p.m. the evening before his first day off and return the child to Mother on the second day off at 8:00 p.m. regardless of Mother's work schedule.

b) When Father works 6:00 a.m. to 2:00 p.m. shift that Father have the child each Friday from 2:30 p.m. to 8:00 p.m. and each Sunday from 2:30 p.m. to 8:00 p.m.

c) When Father works 2:00 p.m. to 10:00 p.m. shift that Father have the child each Friday from 7:30 a.m. to 1:00 p.m. and each Sunday from 7:30 a.m. to 1:00 p.m.

d) When Father works 10:00 p.m. to 6:00 a.m. shift that Father have the child each Friday at 7:30 a.m. until 8:00 p.m. and each Sunday from 7:30 a.m. until 8:00 p.m.

e) When Father works 8:00 a.m. to 4:00 p.m. shift that Father have the child each Friday at 4:30 p.m. until 8:00 p.m. and each Sunday from 4:30 p.m. until 8:00 p.m.

f) In the event Father's two (2) consecutive days off include a Friday or Sunday, then Father shall have the child on Monday and Wednesday at the designated times set forth above.

g) Father wishes to have a specific holiday schedule placed in the Order in order to avoid any further controversy.

h) Father wishes to have the child for his birthday for a specified period of time.

i) Father wishes to have three (3) non-consecutive weeks of custody of the

child each year for vacation purposes.

j) Father wishes to be listed as a contact person at the child's daycare in order that he is permitted to be able to pick up the child when necessary as opposed to a third party picking the child up.

k) Father wishes to have transportation shared in that the party or their designee who is to receive custody of the child shall be the party to complete the transportation.

l) That should Mother be unavailable to the child at the end of Father's periods of custody, that the child remain with Father until such time as Mother is available.

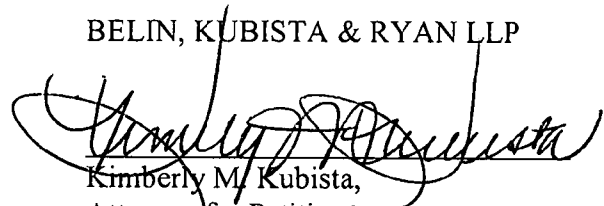
m) If Mother's days off fall on Father's days off, Father's days off shall take precedence over Mother's days off.

n) That either party who takes the child outside a three (3) hour distance of their residence shall notify the other of the same and shall provide a telephone number where the child can be reached.

o) In the event that either party shall be unavailable to the child for a period in excess of two (2) hours during any of their periods of custody, that party shall immediately notify the other party and give them first option of caring for the child in their absence.

WHEREFORE, Petitioner request Your Honorable Court to direct that this matter be scheduled for mediation and if the same is not resolved at the mediation, that this matter be scheduled for a hearing in order that the Court may enter an Order giving Father specific periods of partial custody.

BELIN, KUBISTA & RYAN LLP



Kimberly M. Kubista,
Attorney for Petitioner

I verify that the statements made in the foregoing pleading are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904, relating to unsworn falsification to authorities.

5/19/2009
Date

Scott J. Kaiser
Scott J. Kaiser

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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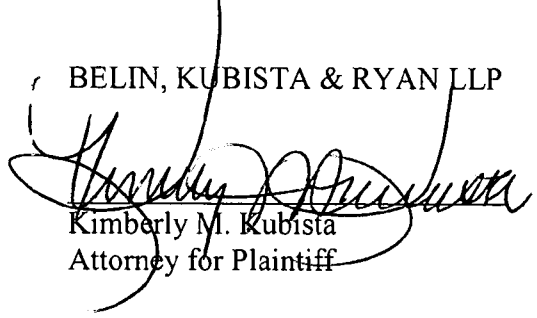
No. 08-542-CD

CERTIFICATE OF SERVICE

This is to certify that I have served a true and correct copy of Amended Petition
for Modification by facsimile on the 22 day of May, 2009 to the following:

James A. Naddeo, Esquire
P.O. Box 552
Clearfield, PA 16830
(814) 765-8142

BELIN, KUBISTA & RYAN LLP


Kimberly M. Kubista
Attorney for Plaintiff

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

SCOTT J. KAISER

:

-VS- —

: No. 08-91-CD

JENNIFER L. KAISER

:

O R D E R

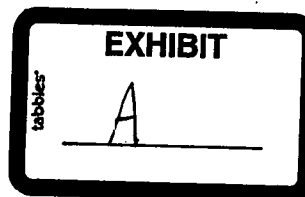
AND NOW, this 30th day of April, 2008, this being the date set for mediation conference, and upon agreement of the parties, it is the ORDER of this Court as follows:

1. Scott J. Kaiser (hereinafter father) and Jennifer L. Kaiser (hereinafter mother) shall have shared legal custody of their minor child, Chance Donovan Kaiser (D.O.B. 12-07-08).

Legal custody shall be defined as the legal right to make major decisions affecting the best interests of the child, including, but not limited to, medical, religious and educational decisions, and that each parent shall have equal access to any and all medical, dental, school and legal records.

Medical, dental and other professional providers, as well as school administrations, shall accept a copy of this Order as authorization to release documentation to either parent.

It is also understood by both parties that they



shall communicate fully with each other to assure all directives pertaining to the child from physicians, dentists, mental health providers and teachers are followed absolutely and that all information pertaining to any prescriptions for the child are exchanged between the parties;

2. Mother shall have primary physical custody of the minor child, subject to father's periods of partial custody on a daily basis or as the parties may agree;

3. When mother returns to work, the parties shall share custody of the child in accordance with their respective schedules and also agree to the caretaker of said child if both parents are unavailable;

4. The parties agree to schedule marital counseling within the next thirty (30) days with an agreed upon counselor, and they shall attend no less than six (6) sessions; the

5. Should the parties encounter further difficulties with custody, either party may schedule another mediation.

ers,

of

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

BY THE COURT,

/s/ Paul E. Cherry

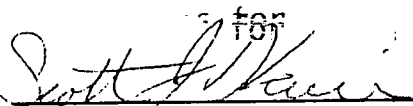
Judge

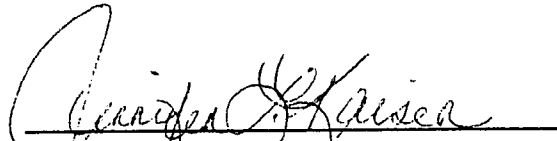
APR 30 2008


Attest.

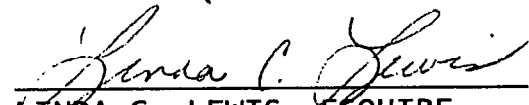
William L. Shaw
Prothonotary/
Clerk of Court

we, the undersigned, hereby consent to the entry
of the foregoing Order.

for

SCOTT J. KAISER
Plaintiff by af


JENNIFER L. KAISER
Defendant


KIMBERLY M. KUBISTA, ESQUIRE
Attorney for Plaintiff


LINDA C. LEWIS, ESQUIRE
Attorney for Defendant

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

JENNIFER L. KAISER,
Plaintiff

vs.

No. 08-542-CD

SCOTT J. KAISER,
Defendant

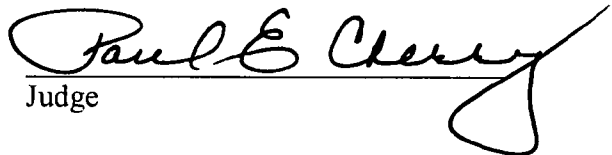
RULE

AND NOW, this 26th day of May, 2009

upon consideration of the attached Amended Petition, it is hereby ORDERED and DIRECTED that a rule be issued upon Respondent to show cause why said Amended Petition should not be granted.

Rule returnable and a hearing thereon the 27th day of May, 2009, at 9:00 a.m. at the Clearfield County Courthouse, Courtroom 2. 3 hours have been allotted for this hearing.

BY THE COURT


Judge

FILED

014:003N
MAY 26 2009

William A. Shaw
Prothonotary/Clerk of Courts

acc
Amy K. Kubista

(610)

FILED

MAY 26 2009

William A. Shaw
Prothonotary/Clerk of Courts

DATE: 5/26/09

X You are responsible for serving all appropriate parties.

___ The Prothonotary's office has provided service to the following parties:

___ Plaintiff(s) ___ Plaintiff(s) Attorney ___ Other

___ Defendant(s) ___ Defendant(s) Attorney

___ Special Instructions:

FILED NO CC
03/33/14
DEC 28 2013
William A. Shaw
Prothonotary/Clerk of Courts

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

SCOTT J. KAISER,
Plaintiff,

vs.

JENNIFER L. KAISER,
Defendant

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No. 08 - 91 - CD

CERTIFICATE OF SERVICE

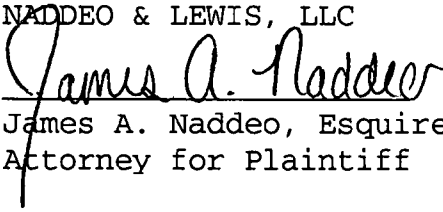
I, James A. Naddeo, Esquire, do hereby certify that an Affidavit Under Section 3301(d) filed in the above-captioned action was served on the following person and in the following manner on the 28th day of December, 2009:

First-Class Mail, Postage Prepaid

Kimberly M. Kubista, Esquire
Belin, Kubista & Ryan
15 North Front Street
PO Box 1
Clearfield, PA 16830

NADDEO & LEWIS, LLC

By:


James A. Naddeo, Esquire
Attorney for Plaintiff

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

No. 08-542-CD

COUNTER-AFFIDAVIT UNDER
SECTION 3301(D)

Filed on behalf of

Defendant

Counsel of Record for
this Party:

Kimberly M. Kubista
Attorney-At-Law
Pa. I.D. 52782

BELIN, KUBISTA & RYAN LLP
15 N. Front Street
Clearfield, PA 16830
(814) 765-8972

FILED 3 CC
012:40 KA
JAN 08 2010
S
William A. Shaw
Prothonotary/Clerk of Courts
Amy
Kubista

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008-542-CD

COUNTER-AFFIDAVIT UNDER SECTION 3301(d) OF THE DIVORCE CODE

1. Check either (a) or (b):

☒ I do not oppose the entry of a divorce decree.

☐ I oppose the entry of a divorce decree because

(Check (i), (ii) or both):

☐ (i) The parties to this action have not
lived separate and apart for a period of at least two
years.

☐ (ii) The marriage is not irretrievably
broken.

2. Check either (a) or (b):

☐ (a) I do not wish to make any claims for economic
relief. I understand that I may lose rights concerning alimony,
division of property, lawyer's fees or expenses if I do not claim
them before a divorce is granted.

☒ (b) I wish to claim economic relief which may include
alimony, division of property, lawyer's fees or expenses or other
important rights.

I understand that in addition to checking (b) above, I must also file all of my economic claims with the prothonotary in writing and serve them on the other party. If I fail to do so before the date set forth on the Notice of intention to Request Divorce Decree, the divorce decree may be entered without further delay.

I verify that the statements made in this counter-affidavit are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904 relating to unsworn falsification to authorities.

Date: 01.01.10



Scott J. Kaiser

NOTICE: If you do not wish to oppose the entry of a divorce decree and you do not wish to make any claim for economic relief, you should not file this counter-affidavit.

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

No. 2008-542-CD

Type of Pleading:

PETITION FOR BIFURCATION

Filed on behalf of:
Plaintiff

Counsel of Record for
this party:

James A. Naddeo, Esq.
Pa I.D. 06820

&

Trudy G. Lumadue, Esq.
Pa I.D. 202049

NADDEO & LEWIS, LLC.
207 E. Market Street
P.O. Box 552
Clearfield, PA 16830
(814) 765-1601

FILED

01/10/31/2010
JAN 12 2010

William A. Shaw
Prothonotary/Clerk of Courts

cc
Amy Naddeo
EP

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008-542-CD

PETITION FOR BIFURCATION

NCW COMES the Plaintiff in the above-captioned case and
sets forth the following:

1. Complaint in Divorce was filed in the above-
captioned action on or about March 25, 2008.

2. That the Complaint referred to in Paragraph 1
seeks, equitable distribution of the marital estate, alimony
pendente lite, counsel fees and costs.

3. That the parties have been separated for a period
in excess of two years.

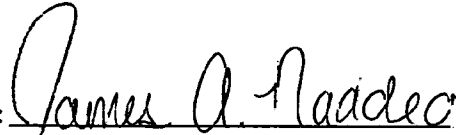
4. That bifurcation of this action will in no way
prejudice Defendant's rights to continue to litigate economic
issues as well as the custodial status of the parties' minor son
in that the Court may retain jurisdiction over said matters.

WHEREFORE, Petitioner respectfully requests your
Honorable Court to enter a Rule upon Respondent to show cause why
this case should not be bifurcated so that Petitioner can pursue a
divorce under 3301(d) of the Divorce Code with the Court retaining

jurisdiction of all economic issues as well as the issue of custody.

NADDEO & LEWIS, LLC

BY:

A handwritten signature in cursive script, reading "James A. Naddeo". The signature is written in dark ink and is positioned above a horizontal line.

James A. Naddeo

Attorney for Petitioner

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

No. 2008-542-CD

FILED

JAN 14 2010
014:00K CR
William A. Shaw
Prothonotary/Clerk of Courts
(U.S. to App)

RULE

AND NOW, this 14th day of January, 2010, upon
consideration of the foregoing Petition for Bifurcation, a Rule is
granted upon Respondent to appear and show cause why the relief
requested therein should not be granted.

This Rule is returnable the 5th day of March, 2010 at
11:30 A.m., Clearfield County Courthouse, Clearfield,
Pennsylvania.

BY THE COURT:

Paul E. Cherry

DATE: 1/14/10

☒ You are responsible for serving all appropriate parties.

☐ The Probationary's Office has provided service to the following parties:

☐ Plaintiff(s) Attorney ☐ Other

☐ Defendant(s) Attorney

☐ Special Instructions:

FILED
JAN 14 2010
William A. Shaw
Probationary/Clerk of Courts

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

No. 2008-542-CD

Type of Pleading:

CERTIFICATE OF SERVICE

Filed on behalf of:
Plaintiff

Counsel of Record for
this party:

James A. Naddeo, Esq.
Pa I.D. 06820

&

Trudy G. Lumadue, Esq.
Pa I.D. 202049

NADDEO & LEWIS, LLC.
207 E. Market Street
P.O. Box 552
Clearfield, PA 16830
(814) 765-1601

FILED

03:28 p.m. Gk

JAN 15 2010

NO CC

William A. Shaw
Prothonotary/Clerk of Courts

(L.N)

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

SCOTT J. KAISER,
Plaintiff,

vs.

JENNIFER L. KAISER,
Defendant

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No. 08 - 91 - CD

CERTIFICATE OF SERVICE

I, James A. Naddeo, Esquire, do hereby certify that a certified copy of Petition for Bifurcation filed in the above-captioned action was served on the following person and in the following manner on the 15th day of January, 2010:

First-Class Mail, Postage Prepaid

Kimberly M. Kubista, Esquire
Belin, Kubista & Ryan
15 North Front Street
PO Box 1
Clearfield, PA 16830

NADDEO & LEWIS, LLC
By: James A. Naddeo
James A. Naddeo, Esquire
Attorney for Plaintiff

IN THE COURT OF COMMON PLEAS
OF CLEARFIELD COUNTY, PENNSYLVANIA

CIVIL DIVISION

JENNIFER L. KAISER

:

-VS-

:

No. 08-542-CD

FILED

MAR 05 2010

012:30/16

William A. Shaw
Prothonotary/Clerk of Courts

SCOTT J. KAISER

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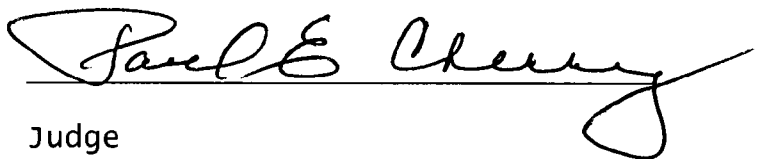
O R D E R

Case to Nacora
K. K. K.

AND NOW, this 5th day of March, 2010, this being
the date set for hearing on Petition for Bifurcation filed by
Plaintiff, Jennifer L. Kaiser; upon agreement of the parties,
it is the ORDER of this Court as follows:

1. Bifurcation is granted;
2. The parties shall immediately sign Affidavits
of Consent and waivers of Notice;
3. Plaintiff shall report the dissolution of the
marriage to her HR representative no less than twenty-nine
(29) days from the date of the Divorce Decree;
4. Plaintiff's counsel shall file a praecipe to
transmit the record with a Decree in divorce reserving all
economic issues for further resolution by the Court.

BY THE COURT,



Judge

FILED

MAR 05 2010

William A. Shaw
Prothonotary/Clerk of Courts

DATE: 3-5-10

☐ You are responsible for serving all appropriate parties.
☒ The Prothonotary's office has provided service to the following parties:
☐ Plaintiff(s) ☒ Plaintiff(s) Attorney ☐ Other
☐ Defendant(s) ☒ Defendant(s) Attorney
☐ Special Instructions:

William A. Shaw
Prothonotary/Clerk of Courts

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008-542-CD

MOTION FOR APPOINTMENT OF MASTER

Jennifer L. Kaiser, Plaintiff, in the above-captioned case, moves the court to appoint a master with respect to the following claims: equitable distribution.

1. Discovery is complete as to the claims for which the appointment of a master is requested.

2. The Defendant, Scott J. Kaiser, has appeared in the action by his attorney, Kimberly M. Kubista, Esquire.

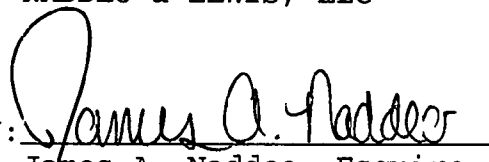
3. The action is contested with respect to the following claims: equitable distribution.

4. The action does not involve complex issues of law or fact.

5. The hearing is expected to take one (1) day.

NADDEO & LEWIS, LLC

BY:


James A. Naddeo, Esquire
Attorney for Plaintiff

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008-542-CD

CERTIFICATE OF SERVICE

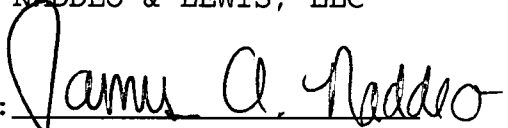
I, James A. Naddeo, Esquire, do hereby certify that a certified copy of Motion for Appointment of Master filed in the above-captioned action was served on the following person and in the following manner on the 8th day of March, 2010:

First-Class Mail, Postage Prepaid

Kimberly M. Kubista, Esquire
Belin, Kubista & Ryan
15 North Front Street
PO Box 1
Clearfield, PA 16830

NADDEO & LEWIS, LLC

By:


James A. Naddeo, Esquire
Attorney for Plaintiff

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008-542-CD

Type of Pleading:

**PRAECIPE TO TRANSMIT
RECORD**

Filed on behalf of:
Plaintiff

Counsel of Record for
this party:

James A. Naddeo, Esq.
Pa I.D. 06820

&

Trudy G. Lumadue, Esq.
Pa I.D. 202049

NADDEO & LEWIS, LLC.
207 E. Market Street
P.O. Box 552
Clearfield, PA 16830
(814) 765-1601

FILED NO
013:4084 CC
MAR 08 2010
William A. Shaw
Prothonotary/Clerk of Courts

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

JENNIFER L. KAISER,
Plaintiff,

vs.

SCOTT J. KAISER,
Defendant

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No. 2008-542-CD

PRAECIPE TO TRANSMIT RECORD

TO THE PROTHONOTARY:

Transmit the record, together with the following information, to the court for entry of a divorce decree:

1. Ground for divorce: Irretrievable breakdown under Section 3301(c) and (d) of the Divorce Code.

2. Date and manner of service of the Complaint: Service on Defendant by certified mail, restricted delivery, return receipt requested on April 9, 2008.

3. Date of execution of the Plaintiff's Affidavit required by Section 3301(c) of the Divorce Code: March 5, 2010. Date of execution of the Defendant's Affidavit required by Section 3301(c) of the Divorce Code: March 5, 2010. Date of execution of Plaintiff's Waiver of Notice of Intention to Request Entry of Divorce Decree: March 5, 2010. Date of execution of Defendant's Waiver of Notice of Intention to Request Entry of Divorce Decree: March 5, 2010. See attached Affidavits of Consent and Waivers of Notice of Intention.

4. Related claims pending: None.

NADDEO & LEWIS, LLC

BY: James A. Naddeo
James A. Naddeo
Attorney for Plaintiff

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008-542-CD

AFFIDAVIT OF CONSENT

1. A Complaint in Divorce under Section 3301(c) of the Divorce Code was filed on March 25, 2008.

2. The marriage of Plaintiff and Defendant is irretrievably broken and ninety (90) days have elapsed from the date of filing and service of the Complaint.

3. I consent to the entry of a final decree of divorce after service of notice of intention to request entry of the decree.

I verify that the statements made in this affidavit 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: 05 March 10


Jennifer L. Kaiser

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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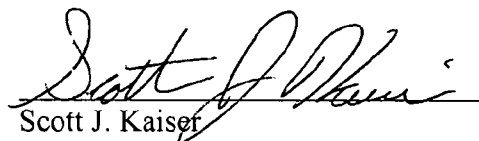
No. 08-542-CD

AFFIDAVIT OF CONSENT UNDER SECTION 3301(c)

1. A complaint in divorce under Section 3301(c) of the Divorce Code was filed on March 25, 2008.
2. The marriage of Plaintiff and Defendant is irretrievably broken and ninety days have elapsed from the date of the filing of the complaint.
3. I consent to the entry of a final decree of divorce after service of notice of intention to request entry of the decree.
4. I understand that I may lose rights concerning alimony, division of property, lawyer's fees or expenses if I do not claim them before a divorce is granted.

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

Date: 3-5-2010


Scott J. Kaiser

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008-542-CD

WAIVER OF NOTICE OF INTENTION TO REQUEST
ENTRY OF A DIVORCE DECREE UNDER SECTION
3301(C) OF THE DIVORCE CODE

1. I consent to the entry of a final decree of divorce without notice.

2. I understand that I may lose rights concerning alimony, division of property, lawyer's fees or expenses if I do not claim them before a divorce is granted.

3. I understand that I will not be divorced until a divorce decree is entered by the Court and that a copy of the decree will be sent to me immediately after it is filed with the prothonotary.

I verify that the statements made in this Affidavit 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: 05 March 10


Jennifer L. Kaiser

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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No. 08-542-CD

WAIVER OF NOTICE OF INTENTION TO REQUEST
ENTRY OF A DIVORCE DECREE UNDER
SECTION 3301(C) OF THE DIVORCE CODE

1. I consent to the entry of a final decree of divorce without notice.
2. I understand that I may lose rights concerning alimony, division of property, lawyer's fees or expenses if I do not claim them before a divorce is granted.
3. I understand that I will not be divorced until a divorce decree is entered by the Court and that a copy of the decree will be sent to me immediately after it is filed with the prothonotary.

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

Date: 3-5-2010



Scott J. Kaiser

NADDEO & LEWIS, LLC.
207 E. Market Street
P.O. Box 552
Clearfield, PA 16830
(814) 765-1601

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

JENNIFER L. KAISER,
Plaintiff,

vs.

SCOTT J. KAISER,
Defendant

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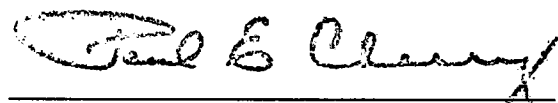
No. 2008-542-CD

DECREE

AND NOW, this 9 day of March, 2010, it is
ORDERED and DECREED that JENNIFER L. KAISER, Plaintiff, and
SCOTT J. KAISER, Defendant, are divorced from the bonds of
matrimony.

The Court retains jurisdiction over all economic issues
raised by the parties to this action.

BY THE COURT:



Judge

DATE 3/9/10

☐ You are responsible for serving all appropriate parties.

☒ The Prothonotary's office has provided service to the following parties:

☐ Plaintiff(s) ☒ Plaintiff(s) Attorney ☐ Other

☐ Defendant(s) ☒ Defendant(s) Attorney

☐ Special Instructions:

2 cc Decrees to Atty's Naddeo & K. Kubista

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF HEALTH
VITAL RECORDS

COUNTY

Clearfield

RECORD OF

DIVORCE OR ANNULMENT



(CHECK ONE)



STATE FILE NUMBER

STATE FILE DATE

HUSBAND

1. NAME	(First) Scott	(Middle) J.	(Last) Kaiser	2. DATE OF BIRTH	(Month) 10/6/1969	(Day)	(Year)
3. RESIDENCE	Street or R.D.	City, Boro. or Twp.	County	State	4. PLACE OF BIRTH	(State or Foreign Country)	
179 Church Street Morrisdale, PA 16866				Philipsburg, PA			
5. NUMBER OF THIS MARRIAGE	1	3. RACE	WHITE <input checked="" type="checkbox"/> BLACK <input type="checkbox"/> OTHER (Specify) <input type="checkbox"/>	7. USUAL OCCUPATION			
				Corrections Officer			

WIFE

8. MAIDEN NAME	(First) Jennifer L. Hansel	(Middle)	(Last)	9. DATE OF BIRTH	(Month) 4/21/1972	(Day)	(Year)
10. RESIDENCE	Street or R.D.	City, Boro. or Twp.	County	State	11. PLACE OF BIRTH	(State or Foreign Country)	
420 North 11th Street, Philipsburgh, PA 16866				Middletown, NY			
12. NUMBER OF THIS MARRIAGE	1	3. RACE	WHITE <input checked="" type="checkbox"/> BLACK <input type="checkbox"/> OTHER (Specify) <input type="checkbox"/>	14. USUAL OCCUPATION			
				Corrections Officer			
15. PLACE OF THIS MARRIAGE	(County) Allport, PA	(State or Foreign Country)		16. DATE OF THIS MARRIAGE	(Month) 4/20/2002	(Day)	(Year)
17A. NUMBER OF CHILDREN THIS MARRIAGE	1	17B. NUMBER OF DEPENDENT CHILDREN UNDER 18.	1	18. PLAINTIFF	HUSBAND <input type="checkbox"/> WIFE <input checked="" type="checkbox"/> OTHER (Specify) <input type="checkbox"/>	19. DECREE GRANTED TO	HUSBAND <input type="checkbox"/> WIFE <input checked="" type="checkbox"/> OTHER (Specify) <input type="checkbox"/>
20. NUMBER OF CHILDREN TO CUSTODY OF	HUSBAND <input type="checkbox"/> WIFE <input type="checkbox"/> SPLIT CUSTODY <input checked="" type="checkbox"/> OTHER (Specify) <input type="checkbox"/>	21. LEGAL GROUNDS FOR DIVORCE OR ANNULMENT					
				No-fault			
22. DATE OF DECREE	(Month)	(Day)	(Year)	23. DATE REPORT SENT TO VITAL RECORDS	(Month)	(Day)	(Year)

24. SIGNATURE OF
TRANSCRIBING CLERK

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

JENNIFER L. KAISER

NO. 08-542-CD

V.

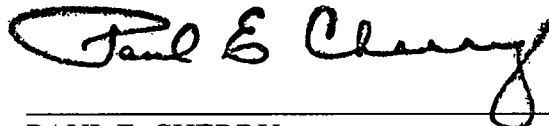
SCOTT J. KAISER

ORDER

NOW, this 9th day of March, 2010, the Court being in receipt of the Praecept to the Court for Appointment of Master filed on behalf of the Plaintiff, it is the ORDER of this Court as follows:

1. That Donald T. Gibboney, Esquire, be and is hereby appointed as Master to preside at the hearing on all outstanding economic issues.
2. Pre-Trial Conference among counsel and the Court shall be held in the Clearfield County Courthouse Annex, Judge Cherry's Chambers, Clearfield, Pennsylvania on the 22 day of March, 2010, at 11:30 o'clock A.M.
3. Plaintiff and Defendant shall file his or her Inventory and Appraisal, Budget Information and Pre-Trial Statement as required under Local Rule of Court 1920.2 within no more than twenty (20) days from this date.

BY THE COURT,



PAUL E. CHERRY
JUDGE

FILED 100

MAR 10 2010

William A. Shaw
Prothonotary/Clerk of Courts

Naddeo
K. Kubista

100 D. Gibboney
(without memo)

(6.10)

FILED

MAR 10 2010

William A. Shaw
Prothonotary/Clerk of Courts

DATE: 3/10/10

☐ You are responsible for serving all appropriate parties.

☒ The Prothonotary's office has provided service to the following parties:

☐ Plaintiff(s) ☒ Plaintiff(s) Attorney ☐ Other

☐ Defendant(s) ☒ Defendant(s) Attorney

☐ Special Instructions

two
pages
to
be
filed

CA

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

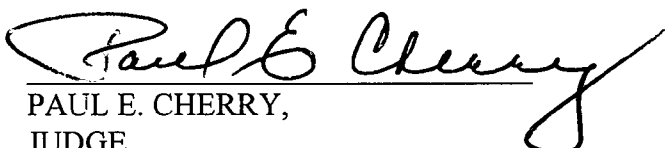
JENNIFER L. KAISER : NO. 08-542-CD
: .
V. :
: .
SCOTT J. KAISER :
:

ORDER

AND NOW, this 22nd day of March, 2010, it is the ORDER of this Court that
Master's Hearing before Donald T. Gibboney, Esquire, shall be held
in the Clearfield County Courthouse, Clearfield, Pennsylvania on the 4th day of June,
2010, beginning at 9:00 o'clock A.M.

Pre-Trial Conference among counsel and the Court shall be held in the Clearfield
County Courthouse Annex, Judge Cherry's Chambers, Clearfield, Pennsylvania on the
26th day of April, 2010, at 11:30 o'clock A.M.

BY THE COURT,


PAUL E. CHERRY,
JUDGE

FILED

079:01/201
MAR 23 2010

William A. Shaw
Prothonotary/Clerk of Courts

ICC Mgs: Naddeo
K. Kubista

ICC D. Gibboney
(without memo)

(SW)

FILED

MAR 23 2010

William A. Shaw
Prothonotary/Clerk of Courts

DATE: 3/23/10

___ You are responsible for serving all appropriate parties.

X The Prothonotary's office has provided service to the following parties:

___ Plaintiff(s) X Plaintiff(s) Attorney ___ Other

___ Defendant(s) X Defendant(s) Attorney

___ Special Instructions:

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

No. 2008-542-CD

Type of Pleading:

CERTIFICATE OF SERVICE

Filed on behalf of:
Plaintiff

Counsel of Record for
this party:

James A. Naddeo, Esq.
Pa I.D. 06820

&

Trudy G. Lumadue, Esq.
Pa I.D. 202049

NADDEO & LEWIS, LLC.
207 E. Market Street
P.O. Box 552
Clearfield, PA 16830
(814) 765-1601

FILED
MAR 29 2010
William A. Shaw
Prothonotary/Clerk of Courts
Naddeo

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008-542-CD

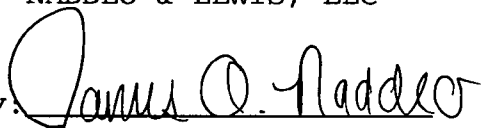
CERTIFICATE OF SERVICE

I, James A. Naddeo, Esquire, do hereby certify that certified copies of Plaintiff's Inventory and Appraisement, Plaintiff's Income and Expense Statement and Plaintiff's Pre-Hearing Memorandum filed in the above-captioned action was served on the following person and in the following manner on the 29th day of March, 2010:

First-Class Mail, Postage Prepaid

Kimberly M. Kubista, Esquire
Belin, Kubista & Ryan
15 North Front Street
PO Box 1
Clearfield, PA 16830

NADDEO & LEWIS, LLC

By: 
James A. Naddeo, Esquire
Attorney for Plaintiff

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

:
:
:
:
:
:
:

No. 08-542-CD

PRE-HEARING MEMORANDUM

Filed on behalf of

Defendant

Counsel of Record for
this Party:

Kimberly M. Kubista
Attorney-at-Law
Pa. I.D. 52782

BELIN KUBISTA & RYAN LLP
15 North Front Street
P.O. Box 1
Clearfield, PA 16830

(814) 765-8972

FILED 3cc
010:42301 Amy Kubista
MAR 29 2010

William A. Shaw
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IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA
CIVIL DIVISION

JENNIFER L. KAISER,

Plaintiff

vs.

SCOTT J. KAISER,

Defendant

:
:
:
:
:
:
:
:

No. 08-542-CD

PRE-HEARING MEMORANDUM

I. List of Assets (marital and non-marital).

See inventory and appraisalment.

II. Experts/Witnesses

1. Jennifer L. Kaiser as to merits of the case.
2. Scott J. Kaiser as to merits of the case.
3. Possible pension appraiser as to marital value of Husband's and Wife's retirements.
4. All experts necessary to validate documentation necessary to support values for the Court to consider for purposes of equitable distribution.

Defendant reserves the right to call such other experts as may be deemed necessary at the time of the Master's hearing.

III. Exhibits.

1. Documentation as to value of Trailer/Land.
2. Documentation as to value of Garage/Land.
3. Statement from Kelly Blue Book as to value of 2000 Dodge Caravan.
4. Statement from Kelly Blue Book as to value of 2001 Oldsmobile Van.
5. Statement as to value of 1983 Chevrolet Pick-Up Truck w/plow. Will be provided at a later date.

6. Statement as to value of 1967 Mercury Cougar. Will be provided at a later date.

7. Statement as to balance of CB&T account, #11007400 as of date of separation.

8. Statement as to balance of CNB account, #2437754 as of date of separation.

9. Documentation as to balance of CB&T Checking account, #12475769. Will be provided at a later date.

10. Documentation pertaining to value of Kaiser Storz-It Building and Land. Will be provided at a later date.

11. Documentation pertaining to value of Kaiser Transport Business. Will be provided at a later date.

12. Documentation as to value of Husband's Cornell Companies 401(k) and Profit Sharing Plan.

13. Documentation as to value of Wife's PSERS retirement.

14. Documentation as to value of jewelry. Will be provided at a later date.

15. Documentation as to value of Husband's 17 Caliber Rifle. Will be provided at a later date.

16. Statement as to payoff of loan #919160 as of date of separation.

17. Statement as to payoff of loan #887870 as of date of separation.

18. Statement as to payoff of loan #1026593 as of date of separation.

19. Statement as to payoff of Chase credit card closest to date of separation.

20. Statement as to payoff of loan #1026313 as of date of separation.

21. Husband's 2009 Income Tax Return.

22. Any and all exhibits utilized by Plaintiff at the time of the Master's hearing.

Defendant reserves the right to use such other exhibits as are deemed necessary to support valuations set forth in the Inventory.

IV. Gross Income.

See income and expense statement.

V. Expenses.

See income and expense statement.

VI. Value of pension or retirement benefits.

See inventory.

VII. Counsel fees.

None.

VIII. Disputes.

Disputes will center around equitable distribution, alimony, counsel fees, costs and expenses.

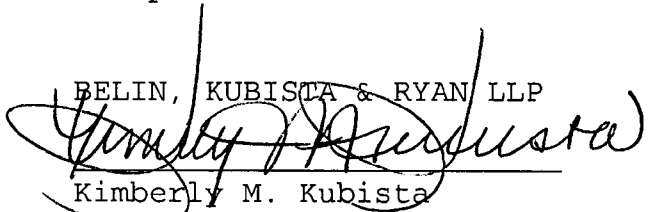
IX. Marital debts.

See inventory and appraisalment.

X. Proposed resolution.

50/50 split of all marital property with no award of alimony, counsel fees, costs or expenses.

BELIN, KUBISTA & RYAN LLP


Kimberly M. Kubista
Attorney for Defendant

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Good	\$2,600
Fair	\$2,200

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Engine: V6 3.0 Liter
Transmission: Automatic
Drivetrain: FWD**DODGE**[FINANCING](#)[LEASING](#)**up to 0% APR**
Financing
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Air ConditioningPower Steering
AM/FM Stereo

Dual Front Air Bags

OptionalPower Windows
Power Door Locks
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Single Compact Disc
ABS (4-Wheel)Power Seat
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Condition (Current Used) **Value**
Excellent **\$5,760**
Good **\$5,360**
Fair **\$4,860**

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Average Consumer Rating (187 Reviews)

[Read Reviews](#)

★★★★★ 4.3 out of 5

[Review this Vehicle](#)

Vehicle Highlights

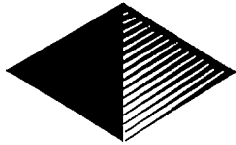
Mileage: 80,000
Engine: V6 3.4 Liter
Transmission: Automatic
Drivetrain: FWD

Selected Equipment

[Change Equipment](#)

Standard

Air Conditioning	Tilt Wheel	Dual Front Air Bags
Rear Air	Cruise Control	ABS (4-Wheel)
Power Steering	AM/FM Stereo	Quad Seating
Power Windows	Cassette	Roof Rack



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CBTF

Date 3/31/08
Primary Account

Page 1
11007400

|||||
C01917 0.4739 AT 0.334 TR00009

KAISER STORZ IT
179 CHURCH ST
MORRISDALE PA 16858-8325

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Community People You Know

***** C H E C K I N G A C C O U N T *****

Account Title: KAISER STORZ IT

REGULAR CHECKING

Account Number	11007400	Statement Dates	3/03/08 thru 3/31/08
Previous Balance	815.51	Days in the statement period	29
1 Deposits/Credits	210.00	Average Ledger	828.40
1 Checks/Debits	235.89	Average Collected	828.40
Service Charge	.00		
Interest Paid	.00		
Current Balance	789.62		

DEPOSITS AND ELECTRONIC ACTIVITY

DATE	DESCRIPTION	REFERENCE	AMOUNT
3/10	Regular Deposit	031003100	210.00
3/14	Transfer to Loan	090700229	235.89-
	Acct No.	909858	

-----Daily Balance Summary-----

Date	Balance	Date	Balance	Date	Balance
3/03	815.51	3/10	1,025.51	3/14	789.62

* * END OF STATEMENT * *

Direct Inquiries to:
800 492-3221



Cnb Bank
25 Irwin Dr
Philipsburg PA 16866

MEMBER F

CTYN

March 31, 2008

10

Page 1 of 4

003347 0.7990 AV 0.312 TR00015

JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Statement of Accounts
2437754

Summary of Account Balances

<i>Account</i>	<i>Number</i>	<i>Ending Balance</i>
Positively Free Small Business	0002437754	\$108.66

CTYN-003-003347-001-002-080402 003347 S02
16866111008

CTYN-003-003347-001-002-080402 003347 S02
16866111008

Statement of Accounts

0002437754
Jennifer L Kaiser
March 31, 2008
Page 2 of 4

Positively Free Small Business 0002437754

Low balance \$108.66
Average balance \$368.01



Date	Description	Additions	Subtractions	Balance
02-29	Beginning balance			\$389.54
03-10	#ATM Deposit 138.00 DEPOSIT TERMINAL S01608 25 IRWIN DR PHILIPSBU PA 4187040000017288 03-10-08 1:59 PM			527.54
03-11	#POS Purchase MERCHANT PURCHASE TERMINAL 440140 USPS 4125460090 PHILIPSBU PA 4187040000017288 03-10-08		-9.84	517.70
03-13	Deposit 100.00			617.70
03-13	Check 1003		-335.22	282.48
03-13	#Electronified Check ERIE INSURANCE 1256038677 080313 1004		-129.00	153.48
03-14	Deposit 130.00			283.48
03-14	Check 1005		-44.52	238.96
03-17	Deposit 100.00			338.96
03-17	#POS Purchase MERCHANT PURCHASE TERMINAL 416405 EXXONMOBIL 4705 6874 EATONTOWN NJ 4187040000017288 03-14-08		-42.00	296.96
03-17	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSBU PA 4187040000017288 03-15-08		-56.00	240.96
03-24	Deposit 200.00			440.96
03-26	Deposit 422.00			862.96
03-26	Check 1006		-129.00	733.96
03-27	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 C646 PHILIPSBU PA		-47.00	686.96

10 Enclosures

Number	Date	Amount
1003	03-13	335.22
1004	03-13	129.00
1005	03-14	44.52
1006	03-26	129.00
1007	03-31	348.30
1009 *	03-28	221.00

* Skip in check sequence

CTYN-003-003347-001-002-080402 003347 S02

[illegible]

03/13/2008 \$100.00

[illegible]

03/14/2008 \$130.00

[illegible]

03/17/2008 \$100.00

[illegible]

03/24/2008 \$200.00

100.00
 320.00
 440.00
 600

03/26/2008 :\$422.00

1003
177 Route 2
Hicksville, NY 11804
Hicksville, Long Island
13 325 32
Three hundred thirty five six 1/4
CNB
12440-5111
C031106178C R-63778-60
1003 000000135112

#1003 03/13/2008 \$335.22

10065
 13 H 32
 10065
 10065

#1005 03/14/2008 \$44.52

[illegible]

#1006_03/26/2008 \$129.00

[illegible]

#1007 03/31/2008 \$348.30

[illegible]

#1009 03/28/2008 \$221.00

CTYN-OC3-003347-001-OC2-080402 003347 502

Cornell Companies, Inc.
1700 West Loop South
Suite 1500
HOUSTON, TX 77027

2279 1 AB 0.351
SCOTT KAISER
179 CHURCH ST
MORRISDALE, PA 16858-8325



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Your Account Statement

Cornell Companies, Inc.
401(k) and Profit Sharing Plan

Statement Period July 1, 2008 to September 30, 2008

Your Plan Sponsor Contact

Doris Weltzbarker
1700 West Loop South Suite 1500
HOUSTON, TX 85706

Your Plan Financial Advisor

Chris Snow
Signal Securities
1-866-608-6424
chris@signal securities.com

Important Message

Welcome to Your Participant Statement! Playing Catch-up. Did you know that if you are age 50 or over, you may be able to reduce your 2008 tax liability? You could be eligible to make an extra \$5,000 in "catch-up" contributions to your retirement savings during the next few months. Please see your benefits manager for details on making catch-up contributions today!

Personal Information

Dept./Division: Secure Division 0000
Participant ID: ***-**-3252
Date of Birth: 10/06/1969
Date of Hire: 01/30/2006

Your Current Account Value

\$12,256.07

Your Quarterly Rate of Return

0.4%

Rate of Return = Net Investment change for the period divided by [50% X (Beginning balance + Ending Balance - Net investment change)].

Activity Highlights

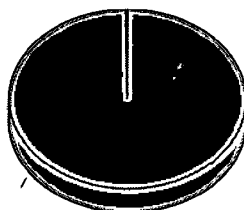
	This Period 07/01/2008 - 09/30/2008	Plan Year-to-Date 01/01/2008 - 09/30/2008
Beginning Balance	\$10,367.28	\$7,162.80
Additions		
+ Your Contributions	\$1,414.14	\$3,787.22
+ Employer Contributions	\$424.24	\$1,136.18
+ Dividends and Earnings	\$50.41	\$169.87
Total Additions	\$1,888.79	\$5,093.27
Investment Gains (Losses)	(\$0.00)	\$0.00
Total Account Value as of 09/30/2008	\$12,256.07	
Total Vested Balance as of 09/30/2008	\$9,354.38	

To check your current balance or make changes, visit
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at 888-307-4015, M-F 7am-7pm central time.

Allocation Summary

Fund Name	Fund Type	Number of Shares You Own as of 09/30/2008	Per Share Price as of 09/30/2008	Ending Balance as of 09/30/2008	Your Percent Assets by Fund as of 09/30/2008
AIM Cash Reserves Fund	Money Market	12,256.0700	\$1.00	\$12,256.07	100%
Total Investment				\$12,256.07	100%

Holdings of less than 1% are
not reflected in this chart.



■ Money Market (100.0%)

Contribution Summary

Source	Contributions This Period	Year-to-Date Contributions	Inception-to-Date Contributions
EE Pre-Tax	\$1,414.14	\$3,787.22	\$9,104.47
Loans	\$424.24	\$1,136.18	\$2,821.37
Totals	\$1,838.38	\$4,923.40	\$11,925.84

Vesting Summary

Percent Vested	Vested Value as of 09/30/2008
100%	\$9,354.38
0%	\$0.00
	\$9,354.38

Investment Activity Summary

Fund	Beginning Balance 07/01/2008	Contributions and Other Credits(+)	Withdrawals and Other Debits (-)	Dividends and Earnings (+)	Investment Gains (Losses) (+/-)	Ending Balance 09/30/2008
AIM Cash Reserves Fund	\$10,367.28	\$1,838.38	\$0.00	\$50.41	\$0.00	\$12,256.07
Totals	\$10,367.28	\$1,838.38	\$0.00	\$50.41	\$0.00	\$12,256.07

Statement of Risk

To help achieve long-term retirement security, you should give careful consideration to the benefits of a well-balanced and diversified investment portfolio. Spreading your assets among different types of investments can help you achieve a favorable rate of return, while minimizing your overall risk of losing money. This is because market or other economic conditions that cause one category of assets, or one particular security, to perform very well often cause another asset category, or another particular security, to perform poorly. If you invest more than 20% of your retirement savings in any one company or industry, your savings may not be properly diversified. Although diversification is not a guarantee against loss, it is an effective strategy to help you manage investment risk.

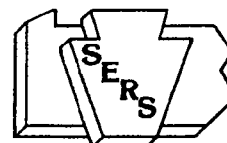
In deciding how to invest your retirement savings, you should take into account all of your assets, including any retirement savings outside of the Plan. No single approach is right for everyone because, among other factors, individuals have different financial goals, different time horizons for meeting their goals, and different tolerances for risk.

It is also important to periodically review your investment portfolio, your investment objectives, and the investment options under the Plan to help ensure that your retirement savings will meet your retirement goals. For more information regarding individual investing and diversification, go to the U.S. Department of Labor website at www.dol.gov/ebsa/investing.



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STATE COLLEGE, PA 16803
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FAX: (814) 863-6530
TOLLFREE: 1-800-633-5461
www.sers.state.pa.us



October 14, 2008

JENNIFER L KAISER
408 N 11TH ST
PHILIPSBURG PA 16866

SSN# XXX-XX-2711

Dear Ms. KAISER:

The following information was used to calculate your retirement benefit estimate:

Proposed Date of Retirement: 10/14/2008

Total State Service	:	11.2940	Final Average Salary	:	\$33,759.72
(all service periods)			SSI Credited Service	:	
			Frozen Present Value	:	\$0.00
Total School Service	:	0.0000	Frz Present Value Debt	:	\$0.00
			Frozen Service Credits	:	0.0000
			Other Debts	:	\$21,774.94
Your Birth Date	:	04/21/1972	Survivor's Birth Date	:	
Your Sex	:	F	Survivor's Sex	:	
Total Account Balance	:	\$13,244.14	Non-Taxable Contributions	:	\$0.00
Previously Taxed Contributions made after 12/31/86: \$14.90					

Total Service Credits = 11.2940

(Breakdown listed Below)
(Total excludes SSI service - class S)

Service:	Class	Credits	Frozen Credits
	A	4.7500	0.0000
	AA	6.5440	0.0000

Special Comments :

The following pages will provide you with various estimate amounts and a brief description of each option. For a more detailed explanation of your retirement benefits and options, you should refer to your State Employees' Retirement System Member Handbook or talk with your retirement counselor.

Please remember that many factors affect the computation of a retirement benefit. Changes to your years of service, Final Average Salary, retirement date and debts applied to your account can change your benefit amount. This estimate is based on the information as it appears above. The actual computation of your retirement benefit will use the final information available after your employment with the Commonwealth has been terminated.



<p>MAXIMUM SINGLE LIFE ANNUITY</p> <p>This plan provides the maximum amount each month for life. If you die before receiving in payments an amount equal to your contributions as they were at the time of retirement, the balance will be paid to your beneficiary(ies). When a death benefit remains you may name one or more beneficiaries at any time.</p>	<p>WITHDRAWAL AMOUNT</p> <p>none</p> <p>\$0.00 (partial)</p> <p>\$13,244.14 (total)</p>	<p>MONTHLY BENEFIT</p> <p>\$193.62</p> <p>\$193.62</p> <p>\$139.62</p>
<p>OPTION 1 ANNUITY</p> <p>This plan provides a reduced retirement allowance. In addition to monthly payments for life, a value is placed on your retirement account called the PRESENT VALUE. All payments to you are subtracted from the Present Value. Any balance remaining at your death will be paid to your beneficiary(ies). You may name one or more beneficiaries and may change beneficiaries at any time.</p>	<p>WITHDRAWAL AMOUNT</p> <p>none</p> <p>\$0.00 (partial)</p> <p>\$13,244.14 (total)</p>	<p>MONTHLY BENEFIT</p> <p>\$191.58</p> <p>\$191.58</p> <p>\$138.15</p> <p>PRESENT VALUE TERM OF VALUE</p> <p>\$47,485.98 20.6554 yrs</p> <p>\$47,485.98 20.6554 yrs</p> <p>\$34,241.84 20.6550 yrs</p>
<p>OPTION 2 ANNUITY</p> <p>This plan provides a reduced retirement allowance for life. The amount of reduction is based on your age and the age and sex of the person named as your Designated Survivor Annuitant. Only one person may be named as your Designated Survivor Annuitant. At your death, that person will continue to receive for life the same monthly amount as was paid to you, in addition to any outstanding amounts payable to you.</p>	<p>WITHDRAWAL AMOUNT</p> <p>none</p> <p>\$0.00 (partial)</p> <p>\$13,244.14 (total)</p>	<p>MONTHLY BENEFIT</p> <p>\$0.00</p> <p>\$0.00</p> <p>\$0.00</p> <p>SURVIVOR BENEFIT</p> <p>\$0.00</p> <p>\$0.00</p> <p>\$0.00</p>
<p>OPTION 3 ANNUITY</p> <p>This plan provides a reduced retirement allowance for life. The amount of reduction is based on your age and the age and sex of the person named as your Designated Survivor Annuitant. Only one person may be named as your Designated Survivor Annuitant. At your death, that person will continue to receive for life one half of the same monthly amount as was paid to you, in addition to any outstanding amount payable to you.</p>	<p>WITHDRAWAL AMOUNT</p> <p>none</p> <p>\$0.00 (partial)</p> <p>\$13,244.14 (total)</p>	<p>MONTHLY BENEFIT</p> <p>\$0.00</p> <p>\$0.00</p> <p>\$0.00</p> <p>SURVIVOR BENEFIT</p> <p>\$0.00</p> <p>\$0.00</p> <p>\$0.00</p>



11/03/08
SCOTT J KAISER
JENNIFER L KAISER
179 CHURCH ST
MORRISDALE PA 16858-8325

Loan Inquiry

Page 01 of 11 15:22:13

CIF number: K000021
Phone: (H) (814) 342-0727 Birth date:
(B) (814) 231-7000 10/06/1969
Tax ID number: 205-64-3252
Loan type: IH SIMPLE INT HE INSTL
Loan number: 919160 L

Past due Messages	AFT Cr	Internet Banking	SLTV Property Types	1 of 1
Original loan amt	19,500.00	Officer	JAM	JERRY MCKINNEY
Current balance	15,308.98	Org date/Maturity	4/08/03	6/15/18
Accrued interest	59.77	Loan term/remaining pmts	180 M	/ 117
Late charges due	27.18	Next payment due date		10/15/08
Current payoff	15,395.93	Next scheduled pay date		11/15/08
Payoff good thru	11/03/08	Payment amount		181.11
Next period payoff	.00	Princ & Int pmt		181.11
		Escrow Payment Amt		.00
Int base/rate	365/365	Current Amount Due		.00
Per diem	7.500000%	Amount Past Due		208.29
Other Charges	3.14568	Total Amount Due		208.29
Amt partially paid	.00	Payment type/freq	Int. included	1 M

Last payment date 10/15/08
F1=Addl functions F3=Exit
F6=Messages F8=Maintenance

More...
F4=Sweep Inquiry F5=History
F9=Relationships F24=More Keys

GARAGE

11/03/08
SCOTT J KAISER
JENNIFER L KAISER
179 CHURCH ST
MORRISDALE PA 16858-8325

Loan Inquiry

Page 01 of 11 15:22:03

CIF number: K000021
Phone: (H) (814) 342-0727 Birth date:
(B) (814) 231-7000 10/06/1969
Tax ID number: 205-64-3252
Loan type: IH SIMPLE INT HE INSTL
Loan number: 887870 L

Past due Messages Insurance AFT Cr

Original loan amt	28,727.48
Current balance	13,416.98
Accrued interest	127.37
Late charges due	35.70
Current payoff	12,786.09
Payoff good thru	11/03/08
Next period payoff	.00

Int base/rate	365/365	8.250000%
Per diem		3.03260
Other Charges		.00
Amt partially paid		.00

Last payment date 9/22/08
F1=Addl functions F3=Exit
F6=Messages F8=Maintenance

Internet Banking

1 of 2
Officer JAM JERRY MCKINNEY
Org date/Maturity 11/06/02 1/15/13
Loan term/remaining pmts 120 M / 52
Next payment due date 10/15/08
Next scheduled pay date 11/15/08
Payment amount 356.97
Princ & Int pmt 356.97
Escrow Payment Amt .00
Current Amount Due .00
Amount Past Due 392.67
Total Amount Due 392.67
Payment type/freq Int. included 1 M

More...

F4=Sweep Inquiry F5=History
F9=Relationships F24=More Keys

Consolidation

10/14/08
SCOTT J KAISER
JENNIFER L KAISER
179 CHURCH ST
MORRISDALE PA 16858-8325

Loan Inquiry

Page 01 of 08 15:12:53

CIF number: K000021
Phone: (H) (814) 342-0727 Birth date:
(B) (814) 231-7000 10/06/1969
Tax ID number: 205-64-3252
Loan type: I7 SIMPLE INT DEALER LN
Loan number: 1026593 L

Messages Internet Banking

Original loan amt 6,653.92
Current balance 1,650.77
Accrued interest 10.08
Late charges due .00
Current payoff 1,660.85
Payoff good thru 10/14/08
Next period payoff .00

Int base/rate 365/365 8.250000%
Per diem .37311
Other Charges .00
Amt partially paid 41.05

Last payment date 9/17/08

F1=Addl functions

F3=Exit

F6=Messages

F8=Maintenance

1 of 1
Officer JAM JERRY MCKINNEY
Org date/Maturity 10/27/05 11/26/09
Loan term/remaining pmts 48 M / 13
Next payment due date 11/26/08
Next scheduled pay date 10/26/08
Payment amount 163.21
Princ & Int pmt 163.21
Escrow Payment Amt .00
Current Amount Due .00
Amount Past Due .00
Total Amount Due .00
Payment type/freq Int. included 1 M

More...

F4=Sweep Inquiry

F5=History

F9=Relationships

F24=More Keys

Dodge Caravan

7



Opening/Closing Date:
Payment Due Date:
Minimum Payment Due:

07/03/08 - 08/02/08
08/27/08
\$423.00

CUSTOMER SERVICE
In U.S. 1-800-945-2000
Español 1-888-446-3308
TDD 1-800-955-8060
Pay by phone 1-800-436-7958
Outside U.S. call collect
1-302-594-8200

MasterCard CARD SUMMARY

Account Number: 5183 3775 2004 0932

Previous Balance	\$21,506.16	Total Credit Line	\$23,000
Payment, Credits	-\$430.00	Available Credit	\$1,822
Purchases, Cash, Debits	+\$29.00	Cash Access Line	\$23,000
Finance Charges	+\$72.14	Available for Cash	\$1,822
New Balance	\$21,177.30		

ACCOUNT INQUIRIES

P.O. Box 15298
Wilmington, DE 19850-5298

PAYMENT ADDRESS

P.O. Box 15153
Wilmington, DE 19886-5153

VISIT US AT:

www.chase.com/creditcards

TRAVELPLUS SUMMARY

Previous Miles Balance	1,176
Miles Earned on Other Purchases This Period	0
Miles Earned on Yearly Program Fee	29
New Total Miles Balance	1,205

Manage your account online:

Check mileage balance, redeem miles
and more at www.chase.com/creditcards

Earn miles without the hassle - no caps or mile expiration!

2 miles per \$1 on hotel, airline, and car rental purchases

1 mile per \$1 on your other purchases

Even more miles when you shop online at www.chaserewardsplus.com

Redeem for great things like: airline tickets, gift cards, cash back, mileage
transfers to premier airline and hotel programs

Reminder: The yearly program fee shown above is for your
Travelplus rewards program.

TRANSACTIONS

Trans	Amount
Date Reference Number Merchant Name or Transaction Description	Credit Debit
07/16 11981980200000151333052 Payment Thank You Electronic Chk	\$430.00
08/01 REWARDS PROGRAM FEE	29.00

FINANCE CHARGES

Category	Daily Periodic Rate	Corresp.	Average Daily Balance	Finance Charge		Transaction Fee	Accumulated Fin Charge	FINANCE CHARGES
				Due To	Periodic Rate			
Purchases	V .06573%	23.99%	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00
Cash advances	V .06573%	23.99%	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00
Convenience check	V .06573%	23.99%	\$0.04	\$0.00		\$0.00	\$0.00	\$0.00
Promotional summary	.01093%	3.99%	\$21,291.75	\$72.14		\$0.00	\$0.00	\$72.14
Total finance charges								\$72.14

Effective Annual Percentage Rate (APR): 3.99%

Please see Information About Your Account section for balance computation method, grace period, and other important information.

The Corresponding APR is the rate of interest you pay when you carry a balance on any transaction category.

The Effective APR represents your total finance charges - including transaction fees
such as cash advance and balance transfer fees - expressed as a percentage.

Save on appliances, MP3 Players, toys, and more at Shoppers
Advantage. Earn cash-back rewards on eligible purchases in
addition to the low prices. Get the details at www.ShoppersAdvantage.com/Chase, where you'll be identified as a Chase
cardmember eligible for this special Trilegiant offer.

10/14/08 -
JENNIFER L KAISER
SCOTT J KAISER
PO BOX 275
MORRISDALE PA 16858-0275

Loan Inquiry

Page 01 of 08 15:12:31

CIF number: H004720
Phone: (H) (814) 342-0727 Birth date:
(B) (814) 863-5018 4/21/1972
Tax ID number: 178-66-2711
Loan type: I2 SIMPLE INT INSTALLMT
Loan number: 1026313 L

Messages Insurance AFT Cr

Original loan amt 7,672.70
Current balance 3,854.23
Accrued interest 38.81
Late charges due 7.69
Current payoff 3,785.66
Payoff good thru 10/14/08
Next period payoff .00

Int base/rate 365/365 7.500000%
Per diem .79196
Other Charges .00
Amt partially paid .00

Last payment date 8/26/08
F1=Addl functions F3=Exit
F6=Messages F8=Maintenance

1 of 1
Officer JAM JERRY MCKINNEY
Org date/Maturity 10/26/05 11/26/10
Loan term/remaining pmts 60 M / 27
Next payment due date 9/26/08
Next scheduled pay date 10/26/08
Payment amount 153.76
Princ & Int pmt 153.76
Escrow Payment Amt .00
Current Amount Due 161.45
Amount Past Due .00
Total Amount Due 161.45
Payment type/freq Int. included 1 M

More...

F4=Sweep Inquiry F5=History
F9=Relationships F24=More Keys

Routing# 031306294

4 Wheeler Repairs

Form **1040** Department of the Treasury—Internal Revenue Service **2009** (99) IRS Use Only—Do not write or staple in this space.

Label (See instructions on page 14.) Use the IRS label. Otherwise, please print or type.

OMB No. 1545-0074

For the year Jan. 1–Dec. 31, 2009, or other tax year beginning ending

Your first name M.I. Last name Suffix
SCOTT J KAISER

Your social security number
205-64-3252

If a joint return, spouse's first name M.I. Last name Suffix
Spouse's social security number

Home address (number and street). If you have a P.O. box, see page 14. Apt. no.
179 CHURCH STREET

City, town or post office, state, and ZIP code. If you have a foreign address, see page 14.
MORRISDALE PA 16858

You must enter your SSN(s) above.

Checking a box below will not change your tax or refund.

Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 14) ☐ You ☐ Spouse

Filing Status

1 ☒ Single

2 ☐ Married filing jointly (even if only one had income)

3 ☐ Married filing separately. Enter spouse's SSN above and full name here.

4 ☐ Head of household (with qualifying person). (See page 15.) If the qualifying person is a child but not your dependent, enter this child's name here.

5 ☐ Qualifying widow(er) with dependent child (see page 16)

Exemptions

6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a

b ☐ Spouse

c Dependents:

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> If qualifying child for child tax credit (see page 17)
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

If more than four dependents, see page 17 and check here ☐

d Total number of exemptions claimed 1

Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2 50,698

8a Taxable interest. Attach Schedule B if required

b Tax-exempt interest. Do not include on line 8a

9a Ordinary dividends. Attach Schedule B if required

b Qualified dividends (see page 22)

10 Taxable refunds, credits, or offsets of state and local income taxes (see page 23)

11 Alimony received

12 Business income or (loss). Attach Schedule C or C-EZ

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here

14 Other gains or (losses). Attach Form 4797

15a IRA distributions 15a Taxable amount (see page 24)

16a Pensions and annuities 16a Taxable amount (see page 25)

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E

18 Farm income or (loss). Attach Schedule F

19 Unemployment compensation in excess of \$2,400 per recipient (see page 27)

20a Social security benefits 20a Taxable amount (see page 27)

21 Other income. List type and amount (see page 29)

22 Add the amounts in the far right column for lines 7 through 21. This is your total income 50,814

Adjusted Gross Income

23 Educator expenses (see page 29)

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ

25 Health savings account deduction. Attach Form 8889

26 Moving expenses. Attach Form 3903

27 One-half of self-employment tax. Attach Schedule SE

28 Self-employed SEP, SIMPLE, and qualified plans

29 Self-employed health insurance deduction (see page 30)

30 Penalty on early withdrawal of savings

31a Alimony paid b Recipient's SSN

32 IRA deduction (see page 31)

33 Student loan interest deduction (see page 34)

34 Tuition and fees deduction. Attach Form 8917

35 Domestic production activities deduction. Attach Form 8903

36 Add lines 23 through 31a and 32 through 35

37 Subtract line 36 from line 22. This is your adjusted gross income 50,814

Form 1040 (2009)

SCOTT J KAISER

205-64-3252

Page 2

Tax and Credits

Standard Deduction for—
 • People who check any box on line 39a, 39b, or 40b or who can be claimed as a dependent, see page 35.
 • All others: Single or Married filing separately, \$5,700
 Married filing jointly or Qualifying widow(er), \$11,400
 Head of household, \$8,350

38	Amount from line 37 (adjusted gross income)	38	50,814
39a	Check <input type="checkbox"/> You were born before January 2, 1945, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a		
	if: <input type="checkbox"/> Spouse was born before January 2, 1945, <input type="checkbox"/> Blind. <input type="checkbox"/> 39b		
b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 35 and check here. <input type="checkbox"/> 39b		
40a	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40a	9,877
b	If you are increasing your standard deduction by certain real estate taxes, new motor vehicle taxes, or a net disaster loss, attach Schedule L and check here (see page 35). <input type="checkbox"/> 40b		
41	Subtract line 40a from line 38	41	40,937
42	Exemptions. If line 38 is \$125,100 or less and you did not provide housing to a Midwestern displaced individual, multiply \$3,650 by the number on line 6d. Otherwise, see page 37.	42	3,650
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	37,287
44	Tax (see page 37). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	5,506
45	Alternative minimum tax (see page 40). Attach Form 6251	45	
46	Add lines 44 and 45	46	5,506
47	Foreign tax credit. Attach Form 1116 if required	47	
48	Credit for child and dependent care expenses. Attach Form 2441	48	
49	Education credits from Form 8863, line 29	49	
50	Retirement savings contributions credit. Attach Form 8880	50	
51	Child tax credit (see page 42)	51	
52	Credits from Form: a <input type="checkbox"/> 8396 b <input type="checkbox"/> 8839 c <input type="checkbox"/> 5695	52	
53	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53	
54	Add lines 47 through 53. These are your total credits	54	
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	5,506

Other Taxes

56	Self-employment tax. Attach Schedule SE	56	
57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	57	
58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
59	Additional taxes: a <input type="checkbox"/> AEIC payments b <input type="checkbox"/> Household employment taxes. Attach Schedule H	59	
60	Add lines 55 through 59. This is your total tax	60	5,506

Payments

If you have a qualifying child, attach Schedule EIC.

61	Federal income tax withheld from Forms W-2 and 1099	61	8,406
62	2009 estimated tax payments and amount applied from 2008 return	62	
63	Making work pay and government retiree credits. Attach Schedule M.	63	400
64a	Earned income credit (EIC)	64a	
b	Nonrefundable combat pay election <input type="checkbox"/> 64b		
65	Additional child tax credit. Attach Form 8812	65	
66	Refundable education credit from Form 8863, line 16	66	
67	First-time homebuyer credit. Attach Form 5405	67	
68	Amount paid with request for extension to file (see page 72)	68	
69	Excess social security and tier 1 RRTA tax withheld (see page 72)	69	
70	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 4136 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	70	
71	Add lines 61, 62, 63, 64a, and 65 through 70. These are your total payments	71	8,806

Refund

Direct deposit? See page 73 and fill in 73b, 73c, and 73d, or Form 8888.

72	If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid.	72	3,300
73a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check here. <input type="checkbox"/>	73a	3,300
b	Routing number 031306294 c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
d	Account number 12578924		
74	Amount of line 72 you want applied to your 2010 estimated tax	74	
75	Amount you owe. Subtract line 71 from line 60. For details on how to pay, see page 74	75	
76	Estimated tax penalty (see page 74)	76	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 75)? ☒ Yes. Complete the following. ☐

Designee's name	Preparer	Phone no.	(814) 857-4931	Personal identification number (PIN)	19244
-----------------	----------	-----------	----------------	--------------------------------------	-------

Sign Here

Joint return? See page 15. Keep 3 copy for your records.

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	Daytime phone number
		CORRECTIONS OFFICER	(814) 577-6920
Spouse's signature. If a joint return, both must sign:	Date	Spouse's occupation	

Paid Preparer's Use Only

Preparer's signature	KATHY M MCDOWELL	Date	2/17/2010	Check if self-employed	<input checked="" type="checkbox"/>	Preparer's SSN or PT	P00899600
Firm's name (or yours if self-employed), address, and ZIP code	MCDOWELL TAX SERVICE 147 COUNTRY AIR LANE WOODLAND	EIN		Phone no.	(814) 857-4931	State	PA
		ZIP code	16881				

Form 1040 (

SCHEDULE A
(Form 1040)**Itemized Deductions**

OMB No. 1545-0074

2009Attachment
Sequence No. **07**Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040.

▶ See Instructions for Schedule A (Form 1040).

Name(s) shown on Form 1040

Your social security number
205-64-3252**SCOTT J KAISER****Medical
and
Dental
Expenses****Caution.** Do not include expenses reimbursed or paid by others.**1** Medical and dental expenses (see page A-1)**2** Enter amount from Form 1040, line 38 **2** 50,814**3** Multiply line 2 by 7.5% (.075)**4** Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-**Taxes You
Paid**(See
page A-2.)**5** State and local (check only one box):**a** ☒ Income taxes, or**b** ☐ General sales taxes**6** Real estate taxes (see page A-5)**7** New motor vehicle taxes from line 11 of the worksheet on
back. Skip this line if you checked box 5b.**8** Other taxes. List type and amount ▶**9** Add lines 5 through 8**Interest
You Paid**(See
page A-6.)**10** Home mortgage interest and points reported to you on Form 1098**11** Home mortgage interest not reported to you on Form 1098. If paid
to the person from whom you bought the home, see page A-7
and show that person's name, identifying no., and address ▶

Name

Address

TIN

Note.Personal
interest is
not
deductible.**12** Points not reported to you on Form 1098. See page A-7
for special rules**13** Qualified mortgage insurance premiums (see page A-7)**14** Investment interest. Attach Form 4952 if required. (See page A-8.)**15** Add lines 10 through 14**Gifts to
Charity**If you made a
gift and got a
benefit for it,
see page A-8.**16** Gifts by cash or check. If you made any gift of \$250 or
more, see page A-8**17** Other than by cash or check. If any gift of \$250 or more,
see page A-8. You must attach Form 8283 if over \$500**18** Carryover from prior year**19** Add lines 16 through 18**Casualty and
Theft Losses****20** Casualty or theft loss(es). Attach Form 4684. (See page A-10.)**Job Expenses
and Certain
Miscellaneous
Deductions****21** Unreimbursed employee expenses—job travel, union
dues, job education, etc. Attach Form 2106 or
2106-EZ if required. (See page A-10.) ▶

See Attached Statement

4,210

22 Tax preparation fees**23** Other expenses—investment, safe deposit box, etc. List
type and amount ▶**24** Add lines 21 through 23**25** Enter amount from Form 1040, line 38 **25** 50,814**26** Multiply line 25 by 2% (.02)**27** Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-**Other
Miscellaneous
Deductions****28** Other—from list on page A-11. List type and amount ▶**Total
Itemized
Deductions****29** Is Form 1040, line 38, over \$166,800 (over \$83,400 if married filing separately)?☒ **No.** Your deduction is not limited. Add the amounts in the far right column for
lines 4 through 28. Also, enter this amount on Form 1040, line 40a.☐ **Yes.** Your deduction may be limited. See page A-11 for the amount to enter.**30** If you elect to itemize deductions even though they are less than your standard
deduction, check here ☐

SCHEDULE M
(Form 1040A or 1040)Department of the Treasury
Internal Revenue Service (99)**Making Work Pay and Government
Retiree Credits**

▶ Attach to Form 1040A, 1040, or 1040NR.

▶ See separate instructions.

OMB No. 1545-0074

2009Attachment
Sequence No. **166**

Name(s) shown on return

SCOTT J KAISER

Your social security number

205-64-3252

- 1a Important:** See the instructions if you can be claimed as someone else's dependent or are filing Form 1040NR. Check the "No" box below and see the instructions if (a) you have a net loss from a business, (b) you received a taxable scholarship or fellowship grant not reported on a Form W-2, (c) your wages include pay for work performed while an inmate in a penal institution, (d) you received a pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan, or (e) you are filing Form 2555 or 2555-EZ.

Do you (and your spouse if filing jointly) have 2009 wages of more than \$6,451 (\$12,903 if married filing jointly)?

☒ **Yes.** Skip lines 1a through 3. Enter \$400 (\$800 if married filing jointly) on line 4 and go to line 5.☐ **No.** Enter your earned income (see instructions)

- b** Nontaxable combat pay included on line 1a (see instructions)

2 Multiply line 1a by 6.2% (.062)**3** Enter \$400 (\$800 if married filing jointly)**4** Enter the smaller of line 2 or line 3 (unless you checked "Yes" on line 1a)**5** Enter the amount from Form 1040, line 38*, or Form 1040A, line 22**6** Enter \$75,000 (\$150,000 if married filing jointly)**7** Is the amount on line 5 more than the amount on line 6?☒ **No.** Skip line 8. Enter the amount from line 4 on line 9 below.☐ **Yes.** Subtract line 6 from line 5**8** Multiply line 7 by 2% (.02)**9** Subtract line 8 from line 4. If zero or less, enter -0-

- 10** Did you (or your spouse, if filing jointly) receive an economic recovery payment in 2009? You may have received this payment if you received social security benefits, supplemental security income, railroad retirement benefits, or veterans disability compensation or pension benefits (see instructions).

☒ **No.** Enter -0- on line 10 and go to line 11.☐ **Yes.** Enter the total of the payments received by you (and your spouse, if filing jointly). Do not enter more than \$250 (\$500 if married filing jointly)

- 11** Did you (or your spouse, if filing jointly) receive a pension or annuity in 2009 for services performed as an employee of the U.S. Government or any U.S. state or local government from work not covered by social security? Do not include any pension or annuity reported on Form W-2.

☒ **No.** Enter -0- on line 11 and go to line 12.

☐ **Yes.** • If you checked "No" on line 10, enter \$250 (\$500 if married filing jointly and the answer on line 11 is "Yes" for both spouses)
• If you checked "Yes" on line 10, enter -0- (exception: enter \$250 if filing jointly and the spouse who received the pension or annuity did not receive an economic recovery payment described on line 10)

12 Add lines 10 and 11**13** Subtract line 12 from line 9. If zero or less, enter -0-**14** Making work pay and government retiree credits. Add lines 11 and 13. Enter the result here and on Form 1040, line 63; Form 1040A, line 40; or Form 1040NR, line 60

*If you are filing Form 2555, 2555-EZ, or 4563 or you are excluding income from Puerto Rico, see instructions.

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

(11TA)

Schedule M (Form 1040A or 1040) 200

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

:
:
:
:
:
:
:

No. 08-542-CD

INVENTORY AND
APPRAISEMENT

Filed on behalf of

Defendant

Counsel of Record for
this Party:

Kimberly M. Kubista
Attorney-at-Law
Pa. I.D. 52782

BELIN KUBISTA & RYAN LLP
15 North Front Street
P.O. Box 1
Clearfield, PA 16830

(814) 765-8972

FILED 3cc

MAR 29 2010

William A. Shaw
Prothonotary/Clerk of Courts

Atty K. Kubista

GA

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

:
:
:
:
:
:
:

No. 08-542-CD

INVENTORY AND APPRAISEMENT
OF DEFENDANT

Defendant files the following inventory and appraisal of all property owned or possessed by either party at the time this action was commenced and all property transferred within the preceding three years.

Defendant verifies that the statements made in this inventory and appraisal are true and correct. Defendant understands that false statements herein are made subject to penalties of 18 Pa.C.S. Section 4904 relating to unsworn falsification to authorities.



Scott J. Kaiser

ASSETS OF PARTIES

Defendant marks on the list below those items applicable to the case at bar and itemizes the assets on the following pages.

- (x) 1. Real Property
- (x) 2. Motor Vehicles
- () 3. Stocks, bonds, securities and options
- () 4. Certificates of deposit
- (x) 5. Checking accounts, cash
- (x) 6. Savings accounts, money market
and savings certificates
- () 7. Contents of safe deposit boxes
- () 8. Trusts
- () 9. Life insurance policies
- () 10. Annuities
- (x) 11. Gifts
- () 12. Inheritances
- (x) 13. Patents, copyrights, inventions, royalties
- (x) 14. Personal property outside the home
- (x) 15. Businesses
- (x) 16. Employment termination benefits--severance
pay, workmen's compensation claim/award
- () 17. Profit sharing plans

- (x)18. Pension plans
- (x)19. Retirement plans, Individual Retirement Accounts
- ()20. Disability payments
- ()21. Litigation claims
- (x)22. Military/V. A. benefits
- ()23. Education benefits
- (x)24. Debts due, including loans, mortgages held
- (x)25. Household furnishings and personalty
- ()26. Other

PROPERTY - MARITAL

Defendant lists all marital property in which either or both spouses have a legal or equitable interest individually or with any other person as of the date this action was commenced.

Husband - H

Wife - W

Joint - J

<u>Item Number</u>	<u>Description of Property</u>	<u>Names of Owners</u>	<u>Value as of Separation</u>
1.	Trailer/Land	J	\$1,500.00
2.	Garage/Land	J	\$20,000.00
3.	2000 Dodge Caravan	J	\$2,600.00
4.	2001 Oldsmobile Van	J	\$5,360.00
5.	1983 Chevrolet Pick-Up Truck w/plow	J	\$400.00
6.	1967 Mercury Cougar	J	\$2,000.00
7.	Kaiser Storz-It Account/CB&T #11007400	Kaiser Storz-It	\$789.62
8.	Kaiser Transport Account/CNB #2437754	W/Kaiser Transport	\$440.96
9.	CB&T Checking Account #12475769	J	Unknown
10.	Proceeds from 1989 Ford Tempo	J	Unknown
11.	Worker's Compensation Money	W	\$20,000+

12.	Kaiser Storz-It Building and Land	J	\$20,000.00
13.	Kaiser Transport Business	J	Unknown
	- Stryker Cot		\$3,000.00
	- PSA Air Pack		\$ 100.00
14.	Cornell Companies 401(k) and Profit Sharing Plan	H	\$12,256.07
15.	PSERS Retirement	W	Unknown
16.	Tennis Bracelet	W	\$3,000.00
17.	Engagement Ring And wedding bands	J	\$12,000.00
18.	Diamond Necklace And Diamond Earrings	W	\$3,500.00
19.	Household Goods (See attached list)		
20.	17 Caliber Rifle	H	\$200.00

NON-MARITAL PROPERTY

Defendant lists all property in which he has a legal or equitable interest which is claimed to be excluded from marital property:

<u>Item Number</u>	<u>Description of Property</u>	<u>Reason for Exclusion</u>
1.	Remaining contents of residence	H's premarital
2.	Tools, equipment, power tools	H's premarital
3.	Box racing trailer w/pressure Washer	Belongs to Chad
4.	2000 400EX 4-wheeler	Belongs to Chad
5.	Quincey (dog)and kennel	H's premarital
6.	Racing equip., tools and supplies	Belongs to Chad
7.	Washer	H's premarital
8.	Queen size bed frame	H's premarital
9.	Stove	H's premarital
10.	Hunting clothes	H's premarital
11.	Honda Pressure Washer	Belongs to Chad
12.	2001 Honda 400EX 4-wheeler	Belongs to Chad

PROPERTY TRANSFERRED

<u>Item Number</u>	<u>Description of Property</u>	<u>Date of Transfer</u>	<u>Person to Whom Transferred</u>
1.	1989 Ford Tempo (Wife sold)	Unknown	Unknown
2.	Worker's Compensation Settlement	?	W's mother

LIABILITIES

<u>Item Number</u>	<u>Description of Property</u>	<u>Creditor</u>	<u>Debtor</u>	<u>Amount</u>
1.	Garage/land Trailer/land	CB&T	J	\$15,395.93
2.	2001 Oldsmobile Van	Citizens Bank	J	\$5,556.37
3.	2000 Dodge Van	CB&T	J	\$1,660.85
4.	Consolid. Loan	CB&T	J	\$12,786.09
5.	Storage Units	CB&T	J	\$18,395.99
6.	Credit Card	Chase	W	\$21,177.30
7.	Repairs (4-wheeler)	CB&T	J	\$3,785.66*
8.	Credit Card	Bank of Amer.	W	\$22,943.19

*Husband has paid this off since separation.

Items:**Value:****Owner:**

Vacuum Cleaner	\$20.00	H
Hunting clothes	?	W
I-Pod	\$60.00	W
Folding Chairs	?	W
55" Television	\$500.00	H
Mattress/Box springs	\$50.00	H
Microwave	\$10.00	H
Refrigerator	\$75.00	H
Rocker/glider	\$10.00	W
Rocking chair	\$10.00	W
Rocker/glider - outdoor swing	\$5.00	W

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

:
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:

No. 08-542-CD

INCOME AND EXPENSE
STATEMENT

Filed on behalf of

Defendant

Counsel of Record for
this Party:

Kimberly M. Kubista
Attorney-at-Law
Pa. I.D. 52782

BELIN KUBISTA & RYAN LLP
15 North Front Street
P.O. Box 1
Clearfield, PA 16830

(814) 765-8972

FILED
01/10/40
MAR 29 2010

William A. Shaw
Prothonotary/Clerk of Courts

@

INCOME AND EXPENSE STATEMENT

NAME: Scott Kaiser

Date: 3/15/2010

SOCIAL SECURITY NO. _____

EMPLOYER'S NAME: Cornell Companies

ADDRESS: _____

TYPE OF WORK: Corrections Officer

INCOME:

Gross Pay Per Month \$ 4,057.52

Itemized Payroll Deductions:

Federal Withholding \$ 606.71

Social Security \$ 251.55

Local Wage Tax \$ 40.59

State Income Tax \$ 127.82

Retirement \$ 486.90

Savings Bonds _____

Credit Union _____

Life Insurance _____

Health Insurance _____

Other (specify) _____

Medicare Tax \$ 58.85

Net Pay per Pay Month: \$ 2,485.10

Other Income:

Interest _____

Dividends _____

Pension _____

Annuity _____

Social Security _____

Rents _____

Royalties _____

Expense Account _____

Gifts _____

Unemployment Compensation _____

Workman's Compensation _____

Total Other Income: \$ -

TOTAL INCOME FOR MONTH: \$ 2,485.10

EXPENSES:

Home

Mortgage/Rent	
Maintenance	\$ 50.00
Utilities	
Electric	\$ 63.30
Gas	
Oil & Coal	\$ 123.00
Telephone	\$ 142.00
Water & Sewer	\$ 58.12
Garbage Disposal	\$ 18.00

EMPLOYMENT

Public Transportation	
Lunches	\$ 160.00

TAXES

Real Estate	\$ 25.50
Personal Property	
Income	

INSURANCE

Homeowners	\$ 21.56
Automobile	\$ 65.50
Life	
Accident & Health	
Other	

AUTOMOBILE

Payments	
Fuel	\$ 160.00
Repairs	\$ 37.50

MEDICAL

Doctor	\$ 100.00
Dentist	
Orthodontist	
Hospital	
Medicine	\$ 108.00
Special Needs (Glasses, Braces, Orthopedic Devices)	\$ 40.00

EDUCATION

Private School	
Parochial School	
College	
Religious	

PERSONAL

Clothing	\$ 45.00
Food	\$ 450.00
Barber/Hairdresser	
Credit Payments	
Credit Cards	\$ 190.00
Charge Accounts	
Memberships (Dues)	\$ 6.58

LOANS

Credit Union	\$ 91.84
Banks	
CB&T - joint	\$ 181.11
CB&T - joint	\$ 357.00
401(k) Loan	\$ 99.50

MISCELLANEOUS

Household Help	
Child Care	
Papers/Books/Magazines	
Entertainment	\$ 50.00
Cable Television	\$ 61.27
Vacations	
Gifts	
Legal Fees	\$ 100.00
Charitable Contributions	
Child Support	\$ 685.80
Alimony Payments	
Other:	
Dog license	\$ 7.00

TOTAL EXPENSES FOR MONTH:

\$ 3,497.58

	Description	Value	Ownership		
			H	W	J
Checking Accounts					
Savings Accounts					
Credit Union					
Stocks/Bonds					
Real Estate					
Other					
	Total:	0			

	<u>Company</u>	<u>Policy No.</u>	<u>Coverage</u>
			<u>H</u> <u>W</u> <u>C</u>
Hospital			
Blue Cross			
Other			
Medical			
Blue Shield			
Other			
Health/Accident			
Disability Income			
Dental			
Other			

I verify that the statements made in this Statement 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.

NAME

William A. Shaw
Prothonotary/Clerk of Courts

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

*
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*
*
*

No. 2008-542-CD

PRE-HEARING MEMORANDUM

I. List of Assets (marital and non-marital).

See inventory and appraisalment.

II. Experts/Witnesses.

1. Jennifer L. Kaiser as to merits of the case.

2. Scott J. Kaiser as to merits of the case.

3. All experts necessary to validate documentation necessary to support values for the Court to consider for purposes of equitable distribution.

Plaintiff reserves the right to call such other experts as may be deemed necessary at the time of the Master's hearing.

III. Exhibits.

1. Real Property Appraisals. Copies to be supplied.

2. Price Guides as to all vehicles. See attached.

3. Checking account statements. See attached

- a. Clearfield Bank and Trust
- b. PSECU

4. Savings Account statements

- a. PSECU
- b. Clearfield Bank and Trust

c. Northwest

5. Clearfield Bank and Trust Loans Statements. See attached.

- a. Consolidation Loan
- b. Garage Loan
- c. Storage Shed Loan
- d. Dodge Caravan Loan
- e. 4-wheeler repair loan

6. Business Records for 2009. See attached.

- a. Kaiser Storz It
- B. Kaiser Transport

7. Tax Returns for 2006, 2007, 2008 and 2009. See attached.

8. Plaintiff's SERS Pension Statement. See attached.

9. Plaintiff's Deferred Compensation Statement. See attached.

10. Defendant's 401k Statement. See attached.

11. Any and all exhibits utilized by Defendant at the time of the Master's hearing.

Plaintiff reserves the right to use such other exhibits as are deemed necessary to support valuations set forth in the Inventory.

IV. Gross Income.

See income and expense statement.

V. Expenses.

See income and expense statement.

VI. Value of pension or retirement benefits.

See inventory.

VII. Counsel Fees.

N/A

VIII. Disputes.

Disputes will center around equitable distribution, alimony.

IX. Marital debts.

See inventory and appraisement.

X. Proposed resolution.

Equal distribution of the marital assets and debts.

NADDEO & LEWIS, LLC

BY:

James A. Naddeo
James A. Naddeo, Esquire
Attorney for Plaintiff



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FIND THE RIGHT CAR

Compare Used vs. New

Under \$5,000

Both New and Used

Van/Minivan

To View List, Click

VIEW ANOTHER VEHICLE

Select Year...

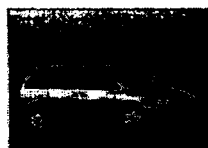
Select Make...

Select Model...

Or Search by Category

Or Change ZIP Code

BLUE BOOK® TRADE-IN VALUE



More Photos

Condition	Value
Excellent	\$763
Good	\$650
Fair	\$463

NEXT STEP: Price New Cars

Local Listings:

- ☒ Search Dodge Caravan
- ☐ Search Certified Pre-Owned Dodge Caravan
- ☐ Search all Classifieds near 16830

Average Consumer Rating (169 Reviews)

[Read Reviews](#)

★★★★☆ 4.0 out of 5

[Review this Vehicle](#)

Vehicle Highlights

Mileage: 129,000
Engine: V6 3.0 Liter
Transmission: Automatic
Drivetrain: FWD

Selected Equipment

Change Equipment

Standard

5 Passenger
Air Conditioning

Power Steering
AM/FM Stereo

Cassette
Dual Front Air Bags

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Blue Book Trade-In Value

Kelley Blue Book Trade-In Value is the amount consumers can expect to receive from a dealer for a trade-in vehicle, assuming an accurate appraisal of the vehicle's condition, mileage and features. This value will likely be less than the Private Party Value because the reselling dealer incurs the cost of safety inspections, reconditioning and other costs of doing business.

Vehicle Condition Ratings

Check Vehicle Title History

Excellent



\$763

- Looks new, is in excellent mechanical condition and needs no reconditioning.
- Never had any paint or body work and is free of rust.
- Clean title history and will pass a smog and safety inspection.
- Engine compartment is clean, with no fluid leaks and is free of any wear or visible defects.
- Complete and verifiable service records.

Less than 5% of all used vehicles fall into this category.

Good



\$650

- Free of any major defects.
- Clean title history, the paint, body, and interior have only minor (if any) blemishes, and there are no major mechanical problems.
- Little or no rust on this vehicle.
- Tires match and have substantial tread wear left.
- A "good" vehicle will need some reconditioning to be sold at retail.

Most consumer owned vehicles fall into this category.

Fair



\$463

- Some mechanical or cosmetic defects and needs servicing but is still in reasonable running condition.
- Clean title history, the paint, body and/or interior need work performed by a professional.
- Tires may need to be replaced.
- There may be some repairable rust damage.

Poor



N/A

- Severe mechanical and/or cosmetic defects and is in poor running condition.
- May have problems that cannot be readily fixed such as a damaged frame or a rusted-through body.
- Branded title (salvage, flood, etc.) or unsubstantiated mileage.

Kelley Blue Book does not attempt to report a value on a "poor" vehicle because the value of these vehicles varies greatly. A vehicle in poor condition may require an independent appraisal to determine its value.

* Pennsylvania 3/25/2010

Accurate Condition Appraisal

Change Condition

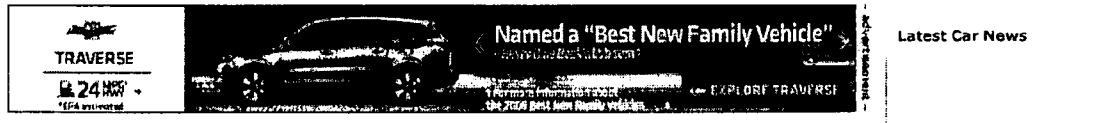
Accurately appraising the condition of a vehicle is an important aspect in determining its Blue Book value. Taking our 16 question condition quiz will ensure you know the correct condition rating.



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1993 Ford Tempo GL Sedan 4D

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Specifications

BLUE BOOK® TRADE-IN VALUE



Condition	Value
Excellent	\$188
Good	\$163
Fair	\$113

NEXT STEP: Price New Cars

Local Listings:

- ☒ Search Ford Tempo
☐ Search all Classifieds near 16830

Average Consumer Rating (75 Reviews)

Read Reviews

3.9 out of 5

Review this Vehicle

Vehicle Highlights

Mileage: 140,000
Engine: 4-Cyl. 2.3 Liter
Transmission: Automatic
Drivetrain: FWD

Selected Equipment

Change Equipment

Standard

Air Conditioning Power Steering AM/FM Stereo

Blue Book Trade-In Value

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Vehicle Condition Ratings

Check Vehicle Title History

Excellent



\$188

- Looks new, is in excellent mechanical condition and needs no reconditioning.
- Never had any paint or body work and is free of rust.

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FIND THE RIGHT CAR

Compare Used vs. New

Under \$5,000

Both New and Used

Sedan

To View List, Click

VIEW ANOTHER VEHICLE

Select Year...

Select Make...

Select Model...

Or Search by Category

Or Change ZIP Code

- Less than 5% of all used vehicles fall into this category.

Good

9509
9509

\$163

- Free of any major defects.
- Clean title history, the paints, body, and interior have only minor (if any) blemishes, and there are no major mechanical problems.
- Little or no rust on this vehicle.
- Tires match and have substantial tread wear left.
- A "good" vehicle will need some reconditioning to be sold at retail.

Most consumer owned vehicles fall into this category.

Fair

1997

\$113

- Some mechanical or cosmetic defects and needs servicing but is still in reasonable running condition.
- Clean title history, the paint, body and/or interior need work performed by a professional.
- Tires may need to be replaced.
- There may be some repairable rust damage.

Foor

1500

N/A

- Severe mechanical and/or cosmetic defects and is in poor running condition.
- May have problems that cannot be readily fixed such as a damaged frame or a rusted-through body.
- Branded title (salvage, flood, etc.) or unsubstantiated mileage.

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† Pennsylvania 3/25/2010

Accurate Condition Appraisal

Change Condition

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NEXT STEP: Price New Cars

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The specific information required to determine the value for this particular vehicle was supplied by the person generating this report. Vehicle valuations are opinions and may vary from vehicle to vehicle. Actual valuations will vary based upon market conditions, specifications, vehicle condition or other particular circumstances pertinent to this particular vehicle or the transaction or the parties to the transaction. This report is intended for the individual use of the person generating this report only and should not be used for any other purpose. Kelley Blue Book assumes no responsibility for errors or omissions. (U0100331)





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LOCATE DEALER

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More Photos

Condition	Value
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Good	\$2,025
Fair	\$1,525

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Average Consumer Rating (187 Reviews)

Read Reviews

4.3 out of 5

Review this Vehicle

Shopping Tools

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with Progressive
Payment Calculator
Find a Dealer

FIND THE RIGHT CAR

Compare Used vs. New

Under \$5,000

Both New and Used

Van/Minivan

To View List, Click

Vehicle Highlights

Mileage: 147,000
Engine: V6 3.4 Liter
Transmission: Automatic
Drivetrain: FWD

Selected Equipment

Standard

Air Conditioning
Power Steering
Power Windows
Power Door Locks
Tilt Wheel
Cruise Control
AM/FM Stereo
Single Compact Disc
OnStar
Dual Front Air Bags

Change Equipment

ABS (4-Wheel)
Roof Rack
Privacy Glass

VIEW ANOTHER VEHICLE

Select Year...

Select Make...

Select Model...

Or Search by Category

Or Change ZIP Code

Blue Book Trade-In Value

Kelley Blue Book Trade-In Value is the amount consumers can expect to receive from a dealer for a trade-in vehicle, assuming an accurate appraisal of the vehicle's condition, mileage and features. This value will likely be less than the Private Party Value because the reselling dealer incurs the cost of safety inspections, reconditioning and other costs of doing business.

Vehicle Condition Ratings

Check Vehicle Title History

Excellent**\$2,350**

- Looks new, is in excellent mechanical condition and needs no reconditioning.
- Never had any paint or body work and is free of rust.
- Clean title history and will pass a smog and safety inspection.
- Engine compartment is clean, with no fluid leaks and is free of any wear or visible defects.
- Complete and verifiable service records.

Less than 5% of all used vehicles fall into this category.

Good**\$2,025**

- Free of any major defects.
- Clean title history, the paint, body, and interior have only minor (if any) blemishes, and there are no major mechanical problems.
- Little or no rust on this vehicle.
- Tires match and have substantial tread wear left.
- A "good" vehicle will need some reconditioning to be sold at retail.

Most consumer owned vehicles fall into this category.

Fair**\$1,525**

- Some mechanical or cosmetic defects and needs servicing but is still in reasonable running condition.
- Clean title history, the paint, body and/or interior need work performed by a professional.
- Tires may need to be replaced.
- There may be some repairable rust damage.

Poor**N/A**

- Severe mechanical and/or cosmetic defects and is in poor running condition.
- May have problems that cannot be readily fixed such as a damaged frame or a rusted-through body.
- Branded title (salvage, flood, etc.) or unsubstantiated mileage.

Kelley Blue Book does not attempt to report a value on a "poor" vehicle because the value of these vehicles varies greatly. A vehicle in poor condition may require an independent appraisal to determine its value.

* Pennsylvania 3/23/2010

Accurate Condition Appraisal**Change Condition**

Accurately appraising the condition of a vehicle is an important aspect in determining its Blue Book value. Taking our 16 question condition quiz will ensure you know the correct condition rating.

NEXT STEP: Price New Cars

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The specific information required to determine the value for this particular vehicle was supplied by the person generating this report. Vehicle valuations are opinions and may vary from vehicle to vehicle. Actual valuations will vary based upon market conditions, specifications, vehicle condition or other particular circumstances pertinent to this particular vehicle or the transaction or the parties to the transaction. This report is intended for the individual use of the person generating this report only and shall not be sold or transmitted to another party. Kelley Blue Book assumes no responsibility for errors or omissions. (v.10033)

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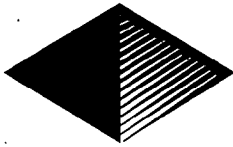
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001766



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CBTF

Date 2/25/08
 Primary Account

Page 1
 12475769



001766 0.8139 AV 0.312 TR00008

JENNIFER L KAISER
 OR SCOTT J KAISER
 179 CHURCH ST
 MORRISDALE PA 16858-8325

Record keeping for taxes can be a nightmare.
 We can help, contact our Trust Department at 765-7682
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***** S U M M A R Y O F A C C O U N T S *****
 Account Number Type of Account Current Balance
 12475769 REG CKING TRUNCATED 938.74
 1026313 INSTALLMENT LOAN 4,738.07

***** C H E C K I N G A C C O U N T *****
 Account Title: JENNIFER L KAISER
 OR SCOTT J KAISER

REG CKING TRUNCATED		Item Truncation
Account Number	12475769	Statement Dates 1/28/08 thru 2/25/08
Previous Balance	1,205.59	Days in the statement period 29
3 Deposits/Credits	2,583.62	Average Ledger 509.55
42 Checks/Debits	2,850.47	Average Collected 509.55
Service Charge	.00	
Interest Paid	.00	
Ending Balance	938.74	
Overdraft item fees this statement period		27.00
Overdraft item fees year to date		27.00
Return item fees this statement period		.00
Return item fees year to date		.00

DEPOSITS AND ELECTRONIC ACTIVITY

DATE	DESCRIPTION	REFERENCE	AMOUNT
1/28	ATM W/D 1405 01/26/08 6894 19 IRWIN DRIVE CLEARFIELD PA Card# 4390	260800338	60.00-
1/28	DBT CRD 0420 01/28/08 41241003 DUNHAMS SPORTS00000794 DU BOIS PA Card# 4390	270802469	24.99-
1/29	ATM W/D 1202 01/29/08 7316 19 IRWIN DRIVE CLEARFIELD PA Card# 4382	290800194	100.00-
1/29	DBT CRD 0315 01/29/08 16202067 CVS PHARMACY #4013 Q03	270802093	27.69-

CBTF-003-001766-001-002-080226 001766 S03
 16858832579



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JOINT OWNER

JENNIFER L KAISER

PAGE 2

MEMBER NUMBER	STATEMENT DATE	
0178XXXXXX	02/29/08	
POST EFF	DESCRIPTION	AMOUNT BALANCE
0201	ID 01 REGULAR SHARE BEGINNING BALANCE	1398.49
0229	PAYMENT: DIVIDEND 1.240%	1.38 1399.87
	ANNUAL PERCENTAGE YIELD EARNED 1.25% FROM 02/01/08 THROUGH 02/29/08	
	BASED ON AVERAGE DAILY BALANCE OF 1,398.49	
0229	ENDING BALANCE	1399.87
POST EFF	DESCRIPTION	AMOUNT BALANCE
0201	ID 04 CHECKING BEGINNING BALANCE	243.89
0201 0131	WITHDRAWAL CHECK CARD	21.40- 222.49
	01/30 2469216DE00NXS2VJ 4816 INTELIIUS-INTELIIUS.COM 425-974-6100 MA	
0208	PAYMENT: DIRECT DEPOSIT PA TREASURY DEPT	912.23 1134.72
	TYPE: PAYROLL ID: 1236003133	
	CO: PA TREASURY DEPT	
0210	WITHDRAWAL CHECK CARD	164.64- 970.08
	02/08 2442733DRLM877HT4 5411 WEIS MARKETS #118 S PHILIPSBURG PA	
0213	CHECK 000765	12.98- 957.10
0213	WITHDRAWAL CHECK CARD	61.27- 895.83
	02/11 2401339DVOHSLEKDL 7221 CHERISHED MEMORIES 724-3757911 PA	
0222	PAYMENT: DIRECT DEPOSIT PA TREASURY DEPT	916.23 1812.06
	TYPE: PAYROLL ID: 1236003133	
	CO: PA TREASURY DEPT	
0222	CHECK 000764	139.00- 1673.06
0225	CHECK 000766	153.00- 1520.06
0225	CHECK 000767	214.00- 1306.06
0227	WITHDRAWAL CHECK CARD	60.22- 1245.84
	02/26 2416407E9EG1VK4SB 5541 SHEETZ 00000646 PHILIPSBURG PA	
0228	WITHDRAWAL CHECK CARD	29.48- 1216.36
	02/26 2401339EA0J8KG4BW 5812 THE ITALIAN OVEN DUBOI DU BOIS PA	
--- CONTINUED ON FOLLOWING PAGE ---		



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JOINT OWNER

JENNIFER L KAISER

PAGE 2

MEMBER NUMBER	STATEMENT DATE	
0178XXXXXX	02/29/08	
POST EFF	DESCRIPTION	AMOUNT BALANCE
0201	ID 01 REGULAR SHARE BEGINNING BALANCE	1398.49
0229	PAYMENT: DIVIDEND 1.240%	1.38 1399.87
	ANNUAL PERCENTAGE YIELD EARNED 1.25% FROM 02/01/08 THROUGH 02/29/08	
	BASED ON AVERAGE DAILY BALANCE OF 1,398.49	
0229	ENDING BALANCE	1399.87
POST EFF	DESCRIPTION	AMOUNT BALANCE
0201	ID 04 CHECKING BEGINNING BALANCE	243.89
0201 0131	WITHDRAWAL CHECK CARD	21.40- 222.49
	01/30 2469216DE00NXS2VJ 4816 INTELIOUS-INTELIOUS.COM 425-974-6100 WA	
0208	PAYMENT: DIRECT DEPOSIT PA TREASURY DEPT	912.23 1134.72
	TYPE: PAYROLL ID: 1236003133	
	CO: PA TREASURY DEPT	
0210	WITHDRAWAL CHECK CARD	164.64- 970.08
	02/08 2442733DRLM877HT4 5411 WEIS MARKETS #118 S PHILIPSBURG PA	
0213	CHECK 000765	12.98- 957.10
0213	WITHDRAWAL CHECK CARD	61.27- 895.83
	02/11 2401339DV0HSLEKDL 7221 CHERISHED MEMORIES 724-3757911 PA	
0222	PAYMENT: DIRECT DEPOSIT PA TREASURY DEPT	916.23 1812.06
	TYPE: PAYROLL ID: 1236003133	
	CO: PA TREASURY DEPT	
0222	CHECK 000764	139.00- 1673.06
0225	CHECK 000766	153.00- 1520.06
0225	CHECK 000767	214.00- 1306.06
0227	WITHDRAWAL CHECK CARD	60.22- 1245.84
	02/26 2416407E9EG1VK4SB 5541 SHEETZ 00000646 PHILIPSBURG PA	
0228	WITHDRAWAL CHECK CARD	29.48- 1216.36
	02/26 2401339EA0J8KG4BW 5812 THE ITALIAN OVEN DUBOI DU BOIS PA	
--- CONTINUED ON FOLLOWING PAGE ---		

11/03/08
SCOTT J KAISER
JENNIFER L KAISER
179 CHURCH ST
MORRISDALE PA 16858-8325

Loan Inquiry

Page 01 of 11 15:22:03

CIF number: K000021
Phone: (H) (814) 342-0727 Birth date:
(B) (814) 231-7000 10/06/1969
Tax ID number: 205-64-3252
Loan type: IH SIMPLE INT HE INSTL
Loan number: 887870 L

Past due Messages	Insurance	AFT Cr
Original loan amt	28,727.48	
Current balance	13,416.98	
Accrued interest	127.37	
Late charges due	35.70	
Current payoff	12,786.09	
Payoff good thru	11/03/08	
Next period payoff	.00	
Int base/rate	365/365	8.250000%
Per diem		3.03260
Other Charges		.00
Amt partially paid		.00

Internet Banking 1 of 2
Officer JAM JERRY MCKINNEY
Org date/Maturity 11/06/02 1/15/13
Loan term/remaining pmts 120 M / 52
Next payment due date 10/15/08
Next scheduled pay date 11/15/08
Payment amount 356.97
Princ & Int pmt 356.97
Escrow Payment Amt .00
Current Amount Due .00
Amount Past Due 392.67
Total Amount Due 392.67
Payment type/freq Int. included 1 M

Last payment date 9/22/08
F1=Addl functions F3=Exit
F6=Messages F8=Maintenance

F4=Sweep Inquiry F5=History
F9=Relationships F24=More Keys

More...

Consolidation

11/03/08
SCOTT J KAISER
JENNIFER L KAISER
79 CHURCH ST
MORRISDALE PA 16858-8325

Loan Inquiry

Page 01 of 11 15:22:13

CIF number: K000021
Phone: (H) (814) 342-0727 Birth date:
(B) (814) 231-7000 10/06/1969
Tax ID number: 205-64-3252
Loan type: IH SIMPLE INT HE INSTL
Loan number: 919160 L

Past due Messages	AFT Cr	Internet Banking	SLTV Property Types	1 of 1
Original loan amt	19,500.00	Officer	JAM JERRY MCKINNEY	
Current balance	15,308.98	Org date/Maturity	4/08/03 6/15/18	
Accrued interest	59.77	Loan term/remaining pmts	180 M / 117	
Late charges due	27.18	Next payment due date	10/15/08	
Current payoff	15,395.93	Next scheduled pay date	11/15/08	
Payoff good thru	11/03/08	Payment amount	181.11	
Next period payoff	.00	Princ & Int pmt	181.11	
		Escrow Payment Amt	.00	
Int base/rate	365/365	Current Amount Due	.00	
Per diem	7.500000%	Amount Past Due	208.29	
Other Charges	3.14568	Total Amount Due	208.29	
Amt partially paid	.00	Payment type/freq Int. included	1 M	

Last payment date 10/15/08
F1=Addl functions F3=Exit
F6=Messages F8=Maintenance

F4=Sweep Inquiry F5=History
F9=Relationships F24=More Keys

More...

GARAGE

10/14/08
SCOTT J KAISER
JENNIFER L KAISER
179 CHURCH ST
MORRISDALE PA 16858-8325

Loan Inquiry

Page 01 of 11 15:17:16

CIF number: K000021
Phone: (H) (814) 342-0727 Birth date:
(B) (814) 231-7000 10/06/1969
Tax ID number: 205-64-3252
Loan type: IH SIMPLE INT HE INSTL
Loan number: 909858 L

Messages AFT Cr Internet Banking SLTV Property Types

1 of 1

Original loan amt 23,564.00
Current balance 18,395.99
Accrued interest 127.89
Late charges due .00
Current payoff 18,523.88
Payoff good thru 10/14/08
Next period payoff .00

Officer JAM JERRY MCKINNEY
Org date/Maturity 3/03/03 4/07/18
Loan term/remaining pmts 180 M / 115
Next payment due date 10/07/08
Next scheduled pay date 11/07/08
Payment amount 235.89
Princ & Int pmt 235.89
Escrow Payment Amt .00
Current Amount Due 235.89
Amount Past Due .00
Total Amount Due 235.89
Payment type/freq Int. included 1 M

Int base/rate 365/365 8.750000%
Per diem 4.40999
Other Charges .00
Amt partially paid .00

Last payment date 9/15/08
F1=Addl functions F3=Exit
F6=Messages F8=Maintenance

F4=Sweep Inquiry
F9=Relationships

F5=History
F24=More Keys

More...

Storage

```

16:16:14
1026593 L
      1 of 1
    163.21
    8/26/09
1=View 6=Print T=TS

```

1=View 6=Print T=TS

F4=Redisplay F7=Scan forward F8=Scan backward F11=Sort
F13=Allocation Hist F14=Esc Only F17=Top F24=More Keys

```

16:16:50
1026593 L
      1 of 1
    163.21
    8/26/09
1=View 6=Print T=TS

```

1=View 6=Print T=TS

```
F4=Redisplay      F7=Scan forward  F8=Scan backward  F11=Sort
F13=Allocation Hist F14=Esc Only     F17=Top           F24=More Keys
```

Dodge Caravan

3/23/10
JENNIFER L KAISER
Paid-off Messages Insurance
Original balance: 7,672.70
Current balance: .00
Control: From To

Loan Inquiry
Loan number:
Payment amount:
Next due date:

16:13:13
1026313 L
1 of 1
153.76
9/26/09
1=View 6=Print T=TS

Posted	Effective	Due Date	Src	T/C	Affects	Amount	Balance
10/26/07	10/26/07	10/26/07	F	00341	C Q	153.76	5,106.13
11/07/07	11/07/07	11/26/07	G	00842	C N	5.65	5,106.13
11/08/07	11/08/07	11/26/07	G	00842	C N	7.81	5,106.13
11/26/07	11/26/07	11/26/07	F	00341	C Q	153.76	4,984.89
12/07/07	12/07/07	12/26/07	G	00842	C N	7.58	4,984.89
12/07/07	12/07/07	12/26/07	G	00842	C N	5.52	4,984.89
12/26/07	12/26/07	12/26/07	F	00341	C Q	153.76	4,861.86
1/07/08	1/07/08	1/26/08	G	00842	C N	5.38	4,861.86
1/08/08	1/08/08	1/26/08	G	00842	C N	7.37	4,861.86
1/25/08	1/25/08	1/26/08	F	00341	C Q	153.76	4,738.07
2/07/08	2/07/08	2/26/08	G	00842	C N	5.23	4,738.07
2/08/08	2/10/08	2/26/08	G	00842	C N	7.16	4,738.07

More...

F4=Redisplay F7=Scan forward F8=Scan backward F11=Sort
F13=Allocation Hist F14=Esc Only F17=Top F24=More Keys

3/23/10
JENNIFER L KAISER
Paid-off Messages Insurance
Original balance: 7,672.70
Current balance: .00
Control: From To

Loan Inquiry
Loan number:
Payment amount:
Next due date:

16:18:03
1026313 L
1 of 1
153.76
9/26/09
1=View 6=Print T=TS

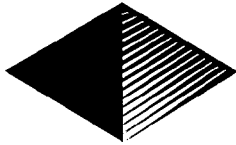
Posted	Effective	Due Date	Src	T/C	Affects	Amount	Balance
6/05/09	6/05/09	6/26/09	G	00842	C N	2.83	2,656.87
6/08/09	6/08/09	6/26/09	G	00842	C N	3.69	2,656.87
6/16/09	6/16/09	6/26/09	C	00010	C Q	153.76	2,517.30
7/07/09	7/07/09	7/26/09	G	00842	C N	2.68	2,517.30
7/08/09	7/08/09	7/26/09	G	00842	C N	3.46	2,517.30
7/29/09	7/29/09	7/26/09	C	00010	C Q	153.76	2,385.78
8/07/09	8/07/09	8/26/09	G	00842	C N	3.26	2,385.78
8/07/09	8/07/09	8/26/09	G	00842	C N	2.51	2,385.78
8/31/09	8/31/09	8/26/09	C	00010	C Q	153.76	2,248.20
9/04/09	9/04/09	9/26/09	G	00842	C N	2.35	2,248.20
9/08/09	9/08/09	9/26/09	G	00842	C N	3.03	2,248.20
9/23/09	9/22/09	9/26/09	M	00008	C Y	2,223.12	.00

Bottom

F4=Redisplay F7=Scan forward F8=Scan backward F11=Sort
F13=Allocation Hist F14=Esc Only F17=Top F24=More Keys

Repairs For 400EX Four Wheeler

001863



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Date 1/30/09
Primary Account

Page 1
11007400

001863 0.4739 AT 0.346 TR00007

KAISER STORZ IT
179 CHURCH ST
PO BOX 275
MORRISDALE PA 16858-0275

On October 3, 2008, FDIC deposit insurance
temporarily increased from \$100,000 to \$250,000
per depositor through December 31, 2009

***** C H E C K I N G A C C O U N T *****

Account Title: KAISER STORZ IT

REGULAR CHECKING

Account Number	11007400	Statement Dates	1/01/09 thru 2/01/09
Previous Balance	168.58	Days in the statement period	32
3 Deposits/Credits	270.00	Average Ledger	256.98
1 Checks/Debits	235.89	Average Collected	256.98
Service Charge	6.00		
Interest Paid	.00		
Current Balance	196.69		
Overdraft item fees this statement period			.00
Overdraft item fees year to date			.00
Return item fees this statement period			.00
Return item fees year to date			.00
Overdraft item fees year to date 2008			.00
Return item fees year to date 2008			27.00

DEPOSITS AND ELECTRONIC ACTIVITY

DATE	DESCRIPTION	REFERENCE	AMOUNT
1/05	Regular Deposit	031002500	175.00
1/08	Regular Deposit	031006300	45.00
1/12	Regular Deposit	030001000	50.00
1/15	Transfer to Loan	090700082	235.89-
	Acct No.	909858	
1/30	Total Service Charge Amount		6.00-

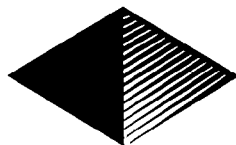
-----Daily Balance Summary-----

Date	Balance	Date	Balance	Date	Balance
1/01	168.58	1/08	388.58	1/15	202.69
1/05	343.58	1/12	438.58	1/30	196.69

* * END OF STATEMENT * *

CBTF-001-001863-001-000-090204 001863 S04
16858027575

001869



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Toll Free (888) 225-6065

Date 2/27/09
 Primary Account

Page 1
 11007400

001869 0.4739 AT 0.346 TR00007

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 179 CHURCH ST
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 MORRISDALE PA 16858-0275

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***** C H E C K I N G A C C O U N T *****

Account Title: KAISER STORZ IT

REGULAR CHECKING

Account Number	11007400	Statement Dates	2/02/09 thru 3/01/09
Previous Balance	196.69	Days in the statement period	28
4 Deposits/Credits	480.00	Average Ledger	312.61
2 Checks/Debits	359.67	Average Collected	301.90
Service Charge	6.00		
Interest Paid	.00		
Current Balance	311.02		
Overdraft item fees this statement period			.00
Overdraft item fees year to date			.00
Return item fees this statement period			.00
Return item fees year to date			.00

DEPOSITS AND ELECTRONIC ACTIVITY

DATE	DESCRIPTION	REFERENCE	AMOUNT
2/06	Regular Deposit	030003900	150.00
2/11	Regular Deposit	010005700	45.00
2/13	Transfer to Loan	090700282	235.89-
	Acct No. 909858		
2/18	Regular Deposit	010005500	35.00
2/18	Regular Deposit	010006300	250.00
2/25	PASTSALETX COMMWLTHOFPA INT	669278840	123.78-
	CCD 82677209		
	TXP*82677209 *ST301*0812		
	31*T*0000012378\		
2/27	Total Service Charge Amount		6.00-

-----Daily Balance Summary-----

Date	Balance	Date	Balance	Date	Balance
2/02	196.69	2/13	155.80	2/27	311.02
2/06	346.69	2/18	440.80		
2/11	391.69	2/25	317.02		

* * END OF STATEMENT * *

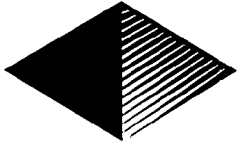
814-765-7551

1-888-765-7551

www.cbtfincial.com

CBTF-001-001869-001-000-090302 001869 S06
 16858027575

001711



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ATM Network

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(814) 765-2053 or

Toll Free (888) 225-6065

Date 3/31/09
Primary Account

Page 1
11007400



001711 0.4435 AT 0.346 TR00007
KAISER STORZ IT
179 CHURCH ST
PO BOX 275
MORRISDALE PA 16858-0275

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***** C H E C K I N G A C C O U N T *****

Account Title: KAISER STORZ IT

REGULAR CHECKING

Account Number	11007400	Statement Dates	3/02/09 thru 3/31/09
Previous Balance	311.02	Days in the statement period	30
6 Deposits/Credits	465.00	Average Ledger	494.88
2 Checks/Debits	263.29	Average Collected	494.88
Service Charge	6.00		
Interest Paid	.00		
Current Balance	506.73		
Overdraft item fees this statement period			.00
Overdraft item fees year to date			.00
Return item fees this statement period			.00
Return item fees year to date			.00

DEPOSITS AND ELECTRONIC ACTIVITY

DATE	DESCRIPTION	REFERENCE	AMOUNT
3/02	Regular Deposit	010008100	50.00
3/04	Regular Deposit	011010300	35.00
3/06	Regular Deposit	011007000	100.00
3/09	Regular Deposit	010006800	35.00
3/12	Regular Deposit	011004400	195.00
3/13	Transfer to Loan	090700233	235.89-
	Acct No. 909858		
3/25	Regular Deposit	010004600	50.00
3/31	Total Service Charge Amount		6.00-

-----Summary By Check Number-----

DATE	CHECK NO	AMOUNT	REFERENCE
3/27	2001	27.40	001001400

* Denotes missing check numbers

-----Daily Balance Summary-----

Date	Balance	Date	Balance	Date	Balance
3/02	361.02	3/09	531.02	3/25	540.13
3/04	396.02	3/12	726.02	3/27	512.73
3/06	496.02	3/13	490.13	3/31	506.73

* * E N D O F S T A T E M E N T * *

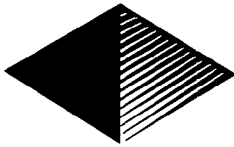
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001713



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Date 5/29/09
Primary AccountPage 1
11007400

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***** C H E C K I N G A C C O U N T *****

Account Title: KAISER STORZ IT

REGULAR CHECKING

Account Number	11007400	Statement Dates	5/01/09 thru 5/31/09
Previous Balance	579.78	Days in the statement period	31
3 Deposits/Credits	345.00	Average Ledger	580.38
3 Checks/Debits	336.89	Average Collected	580.38
Service Charge	6.00		
Interest Paid	.00		
Current Balance	581.89		

DEPOSITS AND ELECTRONIC ACTIVITY

DATE	DESCRIPTION	REFERENCE	AMOUNT
5/07	Regular Deposit	011009900	50.00
5/15	Transfer to Loan	090700280	235.89-
	Acct No. 909858		
5/18	Regular Deposit	01001500C	140.00
5/21	Regular Deposit	01100370C	155.00
5/29	Total Service Charge Amount		6.00-

-----Summary By Check Number-----

DATE	CHECK NO	AMOUNT	REFERENCE	DATE	CHECK NO	AMOUNT	REFERENCE
5/26	2003	45.00	001004100	5/21	2004	56.00	011025000

* Denotes missing check numbers

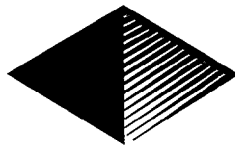
-----Daily Balance Summary-----

Date	Balance	Date	Balance	Date	Balance
5/01	579.78	5/18	533.89	5/29	581.89
5/07	629.78	5/21	632.89		
5/15	393.89	5/26	587.89		

* * E N D O F S T A T E M E N T * *

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Page 1

Primary Account

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***** C H E C K I N G A C C O U N T *****

Account Title: KAISER STORZ IT

REGULAR CHECKING

Account Number	11007400	Statement Dates	6/01/09 thru 6/30/09
Previous Balance	581.89	Days in the statement period	30
2 Deposits/Credits	495.00	Average Ledger	763.38
2 Checks/Debits	296.89	Average Collected	761.71
Service Charge	.00		
Interest Paid	.00		
Current Balance	780.00		

DEPOSITS AND ELECTRONIC ACTIVITY

DATE	DESCRIPTION	REFERENCE	AMOUNT
6/10	Regular Deposit	010038600	295.00
6/11	Regular Deposit	011020200	200.00
6/15	1256038677 ERIE INSURANCE	051376989	61.00-
	CHECK # 2005		
6/15	Transfer to Loan	090700122	235.89-
	Acct No. 909858		

-----Summary By Check Number-----

DATE	CHECK NO	AMOUNT	REFERENCE
6/15	2005	-See above-	051376989

* Denotes missing check numbers

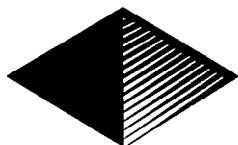
-----Daily Balance Summary-----

Date	Balance	Date	Balance
6/01	581.89	6/11	1,076.89
6/10	876.89	6/15	780.00

* * END OF STATEMENT * *

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***** C H E C K I N G A C C O U N T *****

Account Title: KAISER STORZ IT

REGULAR CHECKING

Account Number	11007400	Statement Dates	7/01/09 thru 8/02/09
Previous Balance	780.00	Days in the statement period	33
3 Deposits/Credits	344.00	Average Ledger	845.51
2 Checks/Debits	296.89	Average Collected	845.51
Service Charge	.00		
Interest Paid	.00		
Current Balance	827.11		

DEPOSITS AND ELECTRONIC ACTIVITY

DATE	DESCRIPTION	REFERENCE	AMOUNT
7/01	Regular Deposit	010016600	95.00
7/14	Regular Deposit	011031300	199.00
7/15	Transfer to Loan	090700090	235.89-
	Acct No. 909858		
7/23	1256038677 ERIE INSURANCE	037902920	61.00-
	CHECK # 2006		
7/30	Regular Deposit	011026800	50.00

-----Summary By Check Number-----

DATE	CHECK NO	AMOUNT	REFERENCE
7/23	2006	-See above-	037902920

* Denotes missing check numbers

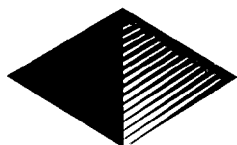
-----Daily Balance Summary-----

Date	Balance	Date	Balance	Date	Balance
7/01	875.00	7/15	838.11	7/30	827.11
7/14	1,074.00	7/23	777.11		

* * END OF STATEMENT * *

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Primary Account

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***** C H E C K I N G A C C O U N T *****

Account Title: KAISER STORZ IT

REGULAR CHECKING

Account Number	11007400	Statement Dates	8/03/09 thru 8/31/09
Previous Balance	827.11	Days in the statement period	29
5 Deposits/Credits	460.00	Average Ledger	793.35
4 Checks/Debits	567.12	Average Collected	793.35
Service Charge	.00		
Interest Paid	.00		
Current Balance	719.99		

DEPOSITS AND ELECTRONIC ACTIVITY

DATE	DESCRIPTION	REFERENCE	AMOUNT
8/10	Regular Deposit	011016600	100.00
8/14	Regular Deposit	011025800	65.00
8/14	Transfer to Loan	090700237	235.89-
	Acct No. 909858		
8/18	Regular Deposit	010017000	55.00
8/20	Regular Deposit	011003500	130.00
8/20	1256038677 ERIE INSURANCE	719843845	67.00-
	CHECK # 2007		
8/24	PASTSALETX COMMWLTHOFPA INT	099374834	139.23-
	CCD 82677209		
	TXP*82677209 *ST301*0906		
	30*T*0000013923\		
8/31	Regular Deposit	011011100	110.00

-----Summary By Check Number-----

DATE	CHECK NO	AMOUNT	REFERENCE	DATE	CHECK NO	AMOUNT	REFERENCE
8/20	2007	-See above-	719843845	8/27	2008	125.00	010000800

* Denotes missing check numbers

-----Daily Balance Summary-----

Date	Balance	Date	Balance	Date	Balance
8/03	827.11	8/18	811.22	8/27	609.99
8/10	927.11	8/20	874.22	8/31	719.99
8/14	756.22	8/24	734.99		

* * END OF STATEMENT * *

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***** C H E C K I N G A C C O U N T *****

Account Title: KAISER STORZ IT

REGULAR CHECKING

Account Number	11007400	Statement Dates	9/01/09 thru 9/30/09
Previous Balance	719.99	Days in the statement period	30
4 Deposits/Credits	474.00	Average Ledger	787.41
2 Checks/Debits	290.89	Average Collected	784.94
Service Charge	.00		
Interest Paid	.00		
Current Balance	903.10		

DEPOSITS AND ELECTRONIC ACTIVITY

DATE	DESCRIPTION	REFERENCE	AMOUNT
9/08	Regular Deposit	010000400	100.00
9/11	Regular Deposit	010011600	50.00
9/15	Transfer to Loan	090700099	235.89-
	Acct No. 909858		
9/17	Regular Deposit	011014000	140.00
9/23	Regular Deposit	010008100	184.00

-----Summary By Check Number-----

DATE	CHECK NO	AMOUNT	REFERENCE
9/14	2009	55.00	011013600

* Denotes missing check numbers

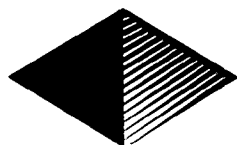
-----Daily Balance Summary-----

Date	Balance	Date	Balance	Date	Balance
9/01	719.99	9/14	814.99	9/23	903.10
9/08	819.99	9/15	579.10		
9/11	869.99	9/17	719.10		

* * END OF STATEMENT * *

3TF-001-001691-001-000-091001 001691 S07
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3 INSERT

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***** C H E C K I N G A C C O U N T *****

Account Title: KAISER STORZ IT

REGULAR CHECKING

Account Number	11007400	Statement Dates	10/01/09 thru 11/01/09
Previous Balance	903.10	Days in the statement period	32
6 Deposits/Credits	475.00	Average Ledger	648.36
3 Checks/Debits	1,200.57	Average Collected	648.05
Service Charge	6.00		
Interest Paid	.00		
Current Balance	171.53		

DEPOSITS AND ELECTRONIC ACTIVITY

DATE	DESCRIPTION	REFERENCE	AMOUNT
10/01	Regular Deposit	010012000	110.00
10/07	Regular Deposit	010029100	50.00
10/09	Regular Deposit	010008900	50.00
10/14	Regular Deposit	010035400	100.00
10/15	Transfer to Loan	090700086	235.89-
	Acct No. 909858		
10/19	Regular Deposit	012016900	115.00
10/26	Regular Deposit	010029300	50.00
10/30	Total Service Charge Amount		6.00-

-----Summary By Check Number-----

DATE	CHECK NO	AMOUNT	REFERENCE	DATE	CHECK NO	AMOUNT	REFERENCE
10/05	2010	20.00	001019200	10/19	2011	944.68	010021000

* Denotes missing check numbers

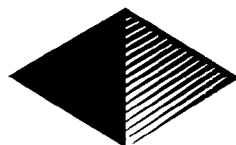
-----Daily Balance Summary-----

Date	Balance	Date	Balance	Date	Balance
10/01	1,013.10	10/09	1,093.10	10/19	127.53
10/05	993.10	10/14	1,193.10	10/26	177.53
10/07	1,043.10	10/15	957.21	10/30	171.53

* * END OF STATEMENT * *

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***** C H E C K I N G A C C O U N T *****

Account Title: KAISER STORZ IT

REGULAR CHECKING

Account Number	11007400	Statement Dates	11/02/09 thru 11/30/09
Previous Balance	171.53	Days in the statement period	29
2 Deposits/Credits	180.00	Average Ledger	143.39
1 Checks/Debits	235.89	Average Collected	143.39
Service Charge	6.00		
Interest Paid	.00		
Current Balance	109.64		

DEPOSITS AND ELECTRONIC ACTIVITY

DATE	DESCRIPTION	REFERENCE	AMOUNT
11/05	Regular Deposit	012013400	130.00
11/13	Transfer to Loan	090700269	235.89-
	Acct No. 909858		
11/30	Regular Deposit	010039800	50.00
11/30	Total Service Charge Amount		6.00-

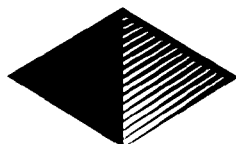
-----Daily Balance Summary-----

Date	Balance	Date	Balance
11/02	171.53	11/13	65.64
11/05	301.53	11/30	109.64

* * E N D O F S T A T E M E N T * *

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001673 0.5048 AT 0.357 TR00008

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***** C H E C K I N G A C C O U N T *****

Account Title: KAISER STORZ IT

REGULAR CHECKING

Account Number	11007400	Statement Dates	12/01/09 thru 12/31/09
Previous Balance	109.64	Days in the statement period	31
4 Deposits/Credits	300.00	Average Ledger	74.95
1 Checks/Debits	235.89	Average Collected	74.95
Service Charge	6.00		
Interest Paid	.00		
Current Balance	167.75		

DEPOSITS AND ELECTRONIC ACTIVITY

DATE	DESCRIPTION	REFERENCE	AMOUNT
12/14	Regular Deposit	011051600	85.00
12/15	Regular Deposit	010036600	50.00
12/15	Transfer to Loan	090700094	235.89-
	Acct No. 909858		
12/28	Regular Deposit	012015400	130.00
12/31	Regular Deposit	010028800	35.00
12/31	Total Service Charge Amount		6.00-

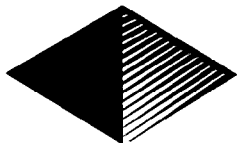
-----Daily Balance Summary-----

Date	Balance	Date	Balance	Date	Balance
12/01	109.64	12/15	8.75	12/31	167.75
12/14	194.64	12/28	138.75		

* * END OF STATEMENT * *

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A little less paper... a few more trees

***** C H E C K I N G A C C O U N T *****

Account Title: KAISER STORZ IT

REGULAR CHECKING

Account Number	11007400	Statement Dates	1/01/10 thru 1/31/10
Previous Balance	167.75	Days in the statement period	31
3 Deposits/Credits	449.00	Average Ledger	322.64
1 Checks/Debits	235.89	Average Collected	317.16
Service Charge	6.00		
Interest Paid	.00		
Current Balance	374.86		

DEPOSITS AND ELECTRONIC ACTIVITY

DATE	DESCRIPTION	REFERENCE	AMOUNT
1/04	Regular Deposit	011001200	184.00
1/14	Regular Deposit	010001600	80.00
1/15	Transfer to Loan	090700297	235.89-
	Acct No. 909858		
1/20	Regular Deposit	010019500	185.00
1/29	Total Service Charge Amount		6.00-

-----Daily Balance Summary-----

Date	Balance	Date	Balance	Date	Balance
1/01	167.75	1/14	431.75	1/20	380.86
1/04	351.75	1/15	195.86	1/29	374.86

* * E N D O F S T A T E M E N T * *

S03
 CBTF-001-001670-001-000-100201 001670
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9/13/07


Erie Insurance

100 Erie Ins. Place • Erie, PA 16530

NOTICE OF PAYMENT DUE**BILLING DATE** 11-09-09
ULTRAFLEX PACKAGE POLICY NUMBER
 Q412550412

AGENT NUMBER
 AA4242

HRENKO INS AGENCY, INC.
 814-342-5204

 KAISER STORZIT
 JENNIFER & SCOTT KAISER D/B/A
 PO BOX 275
 MORRISDALE PA 16858-0275

AMOUNT DUE 10-25-09 \$	61.00
AMOUNT DUE 11-25-09 \$	61.00
PLEASE PAY \$ 122.00	

POLICY TRANSACTIONS

05-25-09 PREMIUM	\$	505.00
05-20-09 PAYMENT	\$	56.00CR
05-25-09 SERVICE CHG	\$	40.00
06-12-09 PAYMENT	\$	61.00CR
07-22-09 PAYMENT	\$	61.00CR
08-19-09 PAYMENT	\$	67.00CR
09-11-09 PAYMENT	\$	55.00CR

CURRENT BALANCE \$ 245.00

 PAST DUE AMOUNT MUST BE RECEIVED
 WITHIN 15 DAYS TO AVOID LATE FEES
FUTURE INSTALLMENTS

DUE 12-25-09 \$	61.00
DUE 01-25-10 \$	62.00

11946

 TRANSACTIONS OCCURRING IN THE LAST 10 DAYS MAY NOT APPEAR ON THIS STATEMENT.
 IF THERE IS AN ERROR, PLEASE CONTACT YOUR AGENT OR THE HOME OFFICE.
 RETURNED PAYMENT FEES WILL BE ADDED TO YOUR ACCOUNT.

KEEP THIS PORTION FOR YOUR RECORDS

 KAISER STORZIT
 JENNIFER & SCOTT KAISER D/B/A
 PO BOX 275
 MORRISDALE PA 16858-0275

PLEASE RETURN THIS PORTION WITH YOUR PAYMENT

↑
DETACH HERE
 AA4242
 HRENKO INS AGENCY, INC.

Q412550412 ULTRAFLEX PACKAGE POLICY

ADDRESS CHANGE

☐ PERMANENT ☐ TEMPORARY

PLEASE SHOW ABOVE POLICY NUMBER ON YOUR CHECK

MAKE CHECK PAYABLE TO:

AMOUNT YOU ARE PAYING _____

ERIE INSURANCE GROUP

PHONE ()

MINIMUM AMOUNT DUE \$	122.00
BALANCE \$	245.00

 PAY PLAN MONTHLY
 SEE PAYMENT PLANS ON REVERSE SIDE

 CHANGE PAYMENT PLAN TO _____
 CONTACT YOUR AGENT FOR OTHER CHANGES

PLEASE DO NOT WRITE BELOW THIS LINE

-010142424125504120521100000000-001220000024500-


Erie Insurance
100 Erie Ins. Place
Erie, PA 16530

1025



ERIE Insurance Group
P.O. Box 1699 Erie, PA 16530

12/30/2009 3:45:02 PM

RECEIPT OF PAYMENT

Received by:

(DEB)

on 12/30/2009 3:44:49 PM

Check Tendered: \$255.00

Check Number: 0992

Cash Tendered: \$0.00

Total Amount Received: \$255.00

Policy Information

<u>Policy Number</u>	<u>Account Billing Number</u>	<u>Policyholder Name</u>	<u>Amount</u>
Q41-2550412		KAISER STORZIT	\$255.00

Thank you HRENKO INS AGENCY, INC. (AA4242)
HRENKO INSURANCE AGENCY, INC
962 TYRONE PIKE
PO BOX 29
PHILIPSBURG PA 16866

Received by: _____

INVOICE NO. 088809

INVOICE

BILL TO Jennifer Kaiser		SERVICE PERFORMED AT Storage Facility	
ADDRESS		ADDRESS	
CITY, STATE, ZIP		CITY, STATE, ZIP	
CUSTOMER'S ORDER #	SALESPERSON Kyle Kovach	TERMS	DATE
5/20	→ Initial GC		\$85
7/3	→ GC		\$40
			<hr/>
			\$125
<p>KYLE KOVACH 202 S. CENTRE ST PHILPSBURG, PA 16806</p>			

NC8745

INVOICE NO. 088813

INVOICE

BILL TO Jennifer Kaiser		SERVICE PERFORMED AT Storage Facility	
ADDRESS		ADDRESS	
CITY, STATE, ZIP		CITY, STATE, ZIP	
CUSTOMER'S ORDER #	SALESPERSON Kyle Kovach	TERMS	DATE
8/30 → GC	Paid Check #2012 \$40.00		\$40
202 S. Centre St. Philipsburg PA 16866 * Grass Cutting			\$40

NC8745

Storage
Postage

*** U.S. POSTAL SERVICE ***
MORRISDALE PA 16858
415600 80.00
LORI # 01
03-25-09 09:01:51

CUSTOMER RECEIPT

158 FOR FEE 6 MONTH 19.00
007 FOREVER STAMP 8.40

TOTAL 27.40
CHECK #001 27.40
CHANGE .00

*** THANK YOU ***

CVS/pharmacy
for all the ways you care™

815 N FRONT STREET, PHILIPSBURG, PA
PHARMACY: 342-2646 STORE: 342-2639

REG#02 TRAN#7647 CSHR#643849 STR#1919

ExtraCare Card #: *****9032

1 RECEIPT BOOK 2501 2.99T

SUBTOTAL 2.99
PA 6.0% TAX .18
TOTAL 3.17
CASH 10.00
CHANGE 6.83



2501 9199 2827 6470 28
RETURNS WITH RECEIPT THRU 12/08/2009

OCTOBER 9, 2009 4:10 PM

*** U.S. POSTAL SERVICE ***
MORRISDALE PA 16858
415600 82.00
LORI # 01
09-30-09 15:22:21

FORM 3544 - RCPT FOR MONEY

RECEIPT # 010038
PO BOX #: 275
AMOUNT: \$ 20.00

000000020*DOLLARS*00*CENTS

AIC 158 FOR FEE 6 MONTH

NAME: JENNIFER KAISER

RECEIPT

DATE	December 5, 2008		No.	061235	
RECEIVED FROM	David Mollura			\$50.00	
Fifty and 00/100				DOLLARS	
FOR RENT	Day #13 Check # 3682 10X15				
FOR					
ACCOUNT		<input type="radio"/> CASH <input type="radio"/> MONEY ORDER <input checked="" type="radio"/> CHECK <input type="radio"/> CREDIT CARD	FROM	January to 2009	
PAYMENT			BY	Kaiser Storz It	
BAL. DUE					

RECEIPT

DATE January 5, 2009 No. 061242

RECEIVED FROM Heather Roos \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #03 (10x15) Check # 2223

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>January 2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	

☐ CREDIT CARD BY Kaiser Story It

1182

RECEIPT

DATE December 15 2008 No. 061243

RECEIVED FROM Della Bell \$45.00

Forty-five and 00/100 DOLLARS

☒ FOR RENT Bay #14 (10x10) Check # 1195

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>January 2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	

☐ CREDIT CARD BY Kaiser Story It

1182

RECEIPT

DATE December 2008 No. 061244

RECEIVED FROM David Mollura \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #13 (10x15) Check # 3735

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>February 2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	

☐ CREDIT CARD BY Kaiser Story It

1182

RECEIPT

DATE JANUARY 2, 2009 No. 061246

RECEIVED FROM VIRGINIA McCracken \$ 50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #04 (10x15) Check # 3359

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>JANUARY 2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	
		<input type="checkbox"/> CREDIT CARD	

BY Kaiser Storz It

1182

RECEIPT

DATE JANUARY 2, 2009 No. 061247

RECEIVED FROM Barry Steinkamp \$ 35.00

Thirty-five and 00/100 DOLLARS

☒ FOR RENT Bay #09 (5x10) Check # 743

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>January 2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	
		<input type="checkbox"/> CREDIT CARD	

BY Kaiser Storz It

1182

RECEIPT

DATE February 5, 2009 No. 061248

RECEIVED FROM David Mollura \$ 50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #13 (10x15) Check # 3329

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>March</u> TO <u>2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	
		<input type="checkbox"/> CREDIT CARD	

BY Kaiser Storz It

1182

RECEIPT

DATE February 5, 2009 No. 061249

RECEIVED FROM Heather Roos \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Check # 2234 Bay # 03 (10x15)

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>February 2009</u>
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input checked="" type="radio"/> CHECK	

☐ CREDIT CARD

BY Kaiser Storz It

1182

RECEIPT

DATE February 5, 2009 No. 061250

RECEIVED FROM Virginia McCracken \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Check # 3376 Bay # 4 (10x15)

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>February 2009</u>
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input checked="" type="radio"/> CHECK	

☐ CREDIT CARD

BY Kaiser Storz It

1182

RECEIPT

DATE February 5, 2009 No. 061251

RECEIVED FROM Della Bell \$45.00

Forty-five and 00/100 DOLLARS

☒ FOR RENT 10x10 Bay # 14 Check # 1207

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>February 2009</u>
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input checked="" type="radio"/> CHECK	

☐ CREDIT CARD

BY Kaiser Storz It

1182

RECEIPT

DATE February 12, 2009 No. 061252

RECEIVED FROM Barry Steinkamp \$35.00

Thirty-five and 00/100 DOLLARS

☒ FOR RENT Bay # 01 (5x10) Check # 753

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>February 2009</u>
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input checked="" type="radio"/> CHECK	

☐ CREDIT CARD

BY Kaiser Storz It

1182

RECEIPT

DATE February 27, 2009 No. 061253

RECEIVED FROM David Mollura \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Check # 3392 10x15 Bay #13

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>April</u> TO <u>2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	
		<input type="checkbox"/> CREDIT CARD	

BY Kaiser Storz It

1182

RECEIPT

DATE March 5, 2009 No. 061254

RECEIVED FROM Barry Steinkamp \$35.00

Thirty-five and 00/100 DOLLARS

☒ FOR RENT Bay #09 Check # 757 (5x10)

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>March</u> TO <u>2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	
		<input type="checkbox"/> CREDIT CARD	

BY Kaiser Storz It

RECEIPT

DATE March 5, 2009 No. 061256

RECEIVED FROM Virginia McCracken \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Check # 3394 Bay #4 (10x15)

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>March</u> TO <u>2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	
		<input type="checkbox"/> CREDIT CARD	

BY Kaiser Storz It

1182

RECEIPT

DATE March 5, 2009 No. 061257

RECEIVED FROM Heather Ross \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Check # 2242 (10x15) Bay # 03

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>March 2009</u> TO <u>March 2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	

☐ CREDIT CARD BY Kaiser Storz II

1182

RECEIPT

DATE March 5, 2009 No. 061258

RECEIVED FROM Della Bell \$45.00

Forty-five and 00/100 DOLLARS

☒ FOR RENT Check # 1224 Bay # 14 (10x10)

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>March 2009</u> TO <u>March 2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	

☐ CREDIT CARD BY Kaiser Storz II

1182

*Balance Due for MARCH 2009 is \$45.00

\$45 each month for rent

RECEIPT

DATE March 12, 2009 No. 061259

RECEIVED FROM Sherry Olinger \$150.00

One hundred Fifty and 00/100 DOLLARS

☒ FOR RENT Check # 839 Bay # 01 (10x20)

☐ FOR

ACCOUNT	<u>195.00</u>	<input type="checkbox"/> CASH	FROM <u>Jan. 2009</u> TO <u>* MAR. 2009</u>
PAYMENT	<u>150.00</u>	<input type="checkbox"/> MONEY ORDER	
BAL. DUE	<u>45.00</u>	<input checked="" type="checkbox"/> CHECK	

☐ CREDIT CARD BY Kaiser Storz II

1182

*55.00 Sec. Deposit

RECEIPT

DATE April 1, 2009 No. 061260

RECEIVED FROM Edith Stiner \$110.00

One hundred Ten and 00/100 DOLLARS

☒ FOR RENT 10x15 Bay # 12 Check # 3353

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>April 2009</u> TO <u>April 2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	

☐ CREDIT CARD BY Kaiser Storz II

1182

RECEIPT

DATE Upper A, crew No. **001201**

RECEIVED FROM David Mollu \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #13 (10x15) Check #3972

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>May 2009</u>
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input checked="" type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz It

1182

RECEIPT

DATE April 2, 2009 No. **061262**

RECEIVED FROM Ray Maines \$100.00

One hundred and 00/100 DOLLARS

☒ FOR RENT Bay #11 (10x15)

☐ FOR

ACCOUNT	<u>200.00</u>	<input type="radio"/> CASH	FROM <u>January</u> TO <u>February 2009</u>
PAYMENT	<u>100.00</u>	<input type="radio"/> MONEY ORDER	
BAL. DUE	<u>100.00</u>	<input type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz It

1182

RECEIPT

DATE April 2, 2009 No. **061263**

RECEIVED FROM Heather Ross \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Check # 2253 Bay #03 (10x15)

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>April</u> TO <u>2009</u>
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input checked="" type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz It

1182

RECEIPT

DATE April 2, 2009 No. **061264**

RECEIVED FROM Rosella Quick \$250.00

Two hundred Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #02 (10x15) M.O. #20133385282 (\$50.00 Late Fees)

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>January</u> TO <u>April 2009</u>
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz It

1182

RECEIPT

DATE April 5, 2009 No. 061265

RECEIVED FROM Virginia McCracken \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #04 (10x15) Check # 3414

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH
PAYMENT		<input type="checkbox"/> MONEY ORDER
BAL. DUE		<input checked="" type="checkbox"/> CHECK
		<input type="checkbox"/> CREDIT CARD

FROM April 2009

BY Kaiser Storz It

Still owe
\$30.00
FEB
35.00
MAR
35.00
APR

RECEIPT

DATE April 5, 2009 No. 061266

RECEIVED FROM Mike Lowe \$70.00

Seventy and 00/100 DOLLARS

☒ FOR RENT Bay #06 (5x10) \$30 towards DEC'2008 \$35 to JAN '09

☐ FOR

ACCOUNT	<u>170 00</u>	<input checked="" type="checkbox"/> CASH
PAYMENT	<u>70 00</u>	<input type="checkbox"/> MONEY ORDER
BAL. DUE	<u>100 00</u>	<input type="checkbox"/> CHECK
		<input type="checkbox"/> CREDIT CARD

FROM Dec. 2008 JAN 2009 \$5 towards FEB' 2009 TO PARTIAL FEB '09

BY Kaiser Storz It.

RECEIPT

DATE May 5, 2009 No. 061267

RECEIVED FROM Heather Ross \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #03 (10x15) Check # 2258

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH
PAYMENT		<input type="checkbox"/> MONEY ORDER
BAL. DUE		<input checked="" type="checkbox"/> CHECK
		<input type="checkbox"/> CREDIT CARD

FROM May 2009

BY Kaiser Storz It

RECEIPT

DATE May 5, 2009 No. 061268

RECEIVED FROM David Mollura \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #13 (10x15) Check # 4045

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH
PAYMENT		<input type="checkbox"/> MONEY ORDER
BAL. DUE		<input checked="" type="checkbox"/> CHECK
		<input type="checkbox"/> CREDIT CARD

FROM June 2009

BY Kaiser Storz It

RECEIPT

DATE May 5, 2009 No. 061269

RECEIVED FROM Rosella Quirk \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay # 02 (10x15) MO# R201109679826

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>May 2009</u>
PAYMENT		<input checked="" type="radio"/> MONEY ORDER	
BAL. DUE		<input type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz It

1182

RECEIPT

DATE May 5, 2009 No. 061271

RECEIVED FROM Virginia Mc Cracken \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay # 04 (10x15) Check # 3428

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>May 2009</u>
PAYMENT		<input checked="" type="radio"/> MONEY ORDER	
BAL. DUE		<input type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz It

1182

RECEIPT

DATE May 5, 2009 No. 061271

RECEIVED FROM EDITH C. STINER \$55.00

Fifty-five and 00/100 DOLLARS

☒ FOR RENT Bay # 12 (10x15) Check # 3356

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>May 2009</u>
PAYMENT		<input checked="" type="radio"/> MONEY ORDER	
BAL. DUE		<input type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz It

1182

45⁰⁰
SECURITY
DEPOSIT
45⁰⁰
RENT

RECEIPT

DATE May 15, 2009 No. 061272

RECEIVED FROM Kathy Crumly \$90.00

Ninety and 00/100 DOLLARS

☒ FOR RENT Bay # 14 (10x10) Check # 4719

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>May 2009</u>
PAYMENT		<input checked="" type="radio"/> MONEY ORDER	
BAL. DUE		<input type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz It

1182

35⁰⁰
Security
Deposit
35⁰⁰
Rent

RECEIPT

DATE	June 1, 2009	No.	061273
RECEIVED FROM	Kathy L. Crumly	\$	70.00
Seventy and 00/100 DOLLARS			
<input checked="" type="checkbox"/> FOR RENT Bay # 07 (5x10) Check # 0803			
<input type="checkbox"/> FOR			
ACCOUNT		<input type="checkbox"/> CASH	FROM June TO 2009
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	BY Kaiser Storz It
		<input type="checkbox"/> CREDIT CARD	

RECEIPT

DATE	June 1, 2009	No.	061274
RECEIVED FROM	Edith C. Stiner	\$	55.00
Fifty-five and 00/100 DOLLARS			
<input checked="" type="checkbox"/> FOR RENT Bay # 12 (10x15) Check # 3357			
<input type="checkbox"/> FOR			
ACCOUNT		<input type="checkbox"/> CASH	FROM June TO 2009
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	BY
		<input type="checkbox"/> CREDIT CARD	

RECEIPT

DATE	April 5, 2009	No.	061275
RECEIVED FROM	Barry Steinkamp	\$	99.00
Ninety-nine and 00/100 DOLLARS			
<input checked="" type="checkbox"/> FOR RENT Bay # 09 (5x10) Check # 769 [33.00/month]			
<input type="checkbox"/> FOR			
ACCOUNT		<input type="checkbox"/> CASH	FROM April 2009 TO June 2009
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	BY Kaiser Storz It
		<input type="checkbox"/> CREDIT CARD	

RECEIPT

DATE	April 8, 2009	No.	061276
RECEIVED FROM	Della Bell	\$	45.00
Forty-five and 00/100 DOLLARS			
<input checked="" type="checkbox"/> FOR RENT Bay # 14 (10x10) Check # 1240			
<input type="checkbox"/> FOR			
ACCOUNT		<input type="checkbox"/> CASH	FROM April TO 2009
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	BY Kaiser Storz It
		<input type="checkbox"/> CREDIT CARD	

RECEIPT

DATE June 5, 2009 No. 061277

RECEIVED FROM Virginia McCracken \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #04 (10x15) Check #3442

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>June 2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input type="checkbox"/> CREDIT CARD	

BY Kaiser Story It

1182

RECEIPT

DATE June 5, 2009 No. 061278

RECEIVED FROM Heather Roos \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #03 (10x15) Check #2278

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>June 2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input type="checkbox"/> CREDIT CARD	

BY Kaiser Story It

1182

RECEIPT

DATE June 5, 2009 No. 061279

RECEIVED FROM David Mollura \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #13 (10x15) Check # 4117

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>July 2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input type="checkbox"/> CREDIT CARD	

BY Kaiser Story It

1182

RECEIPT

DATE June 5, 2009 No. 061280

RECEIVED FROM Mike Lowe \$70.00

Seventy and 00/100 DOLLARS

☒ FOR RENT Bay #06 (5x10) 30⁰⁰ FEB/35⁰⁰ MAR/5⁰⁰ APR TO 30⁰⁰ Remaining

☐ FOR

ACCOUNT	<u>170 00</u>	<input type="checkbox"/> CASH	FROM <u>FEBRUARY 2009 TO PARTIAL APRIL 2009</u>
PAYMENT	<u>70 00</u>	<input type="checkbox"/> MONEY ORDER	
BAL. DUE	<u>100 00</u>	<input type="checkbox"/> CREDIT CARD	

BY Kaiser Story It

1182

RECEIPT

DATE June 10, 2009 No. 061281

RECEIVED FROM Sherry Olinger \$50.00

One hundred Fifty and 00/100 DOLLARS

☒ FOR RENT Check # 503 (10x20) Bay #01 \$45.00 - Remaining of 03/2009

☐ FOR

ACCOUNT	<u>240 00</u>	<input type="radio"/> CASH	FROM <u>MARCH 2009</u> TO <u>*MAY 2009</u>
PAYMENT	<u>150 00</u>	<input type="radio"/> MONEY ORDER	
BAL. DUE	<u>90 00</u>	<input checked="" type="radio"/> CHECK	

☐ CREDIT CARD

BY KAISER STORZ IT

** Remaining Due For MAY / JUNE 2009 **

RECEIPT

DATE June 26, 2009 No. 061282

RECEIVED FROM Kathy Crumly \$45.00

Forty-five and 00/100 DOLLARS

☒ FOR RENT Check # 0847 (10x10) Bay #14

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>June 2009</u> TO
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input checked="" type="radio"/> CHECK	

☐ CREDIT CARD

BY KAISER STORZ IT

#35.00 Security Deposit

+20.00 Rent
55.00
+35.00
90.00

RECEIPT

DATE August 11, 2009 No. 061283

RECEIVED FROM Randy A. Bratton \$65.00

Sixty-five and 00/100 DOLLARS

☒ FOR RENT Bay #10 (5x10) Check # 165

☐ FOR

ACCOUNT	<u>90 00</u>	<input type="radio"/> CASH	FROM <u>August 11</u> TO <u>Aug 31, 2009</u>
PAYMENT	<u>65 00</u>	<input type="radio"/> MONEY ORDER	
BAL. DUE	<u>25 00</u>	<input checked="" type="radio"/> CHECK	

☐ CREDIT CARD

BY Kaiser Storz It

FOR SEPTEMBER RENT.

RECEIPT

DATE July 2009 No. 061284

RECEIVED FROM Barry Feinkamp \$99.00

Ninety-nine and 00/100 DOLLARS

☒ FOR RENT Bay #09 (5x10) Check # 806 (33.00/month)

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>July 2009</u> TO <u>Sept 2009</u>
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input checked="" type="radio"/> CHECK	

☐ CREDIT CARD

BY Kaiser Storz It

342-0267

RECEIPT

DATE July 2009 No. **061285**

RECEIVED FROM David Mollura \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #13 (10x15) Check #4222

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>August 2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	
		<input type="checkbox"/> CREDIT CARD	

BY Kaiser Storz It

adamer 1182

RECEIPT

DATE August 2009 No. **061286**

RECEIVED FROM David Mollura \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #13 (10x15) Check #4282

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>September 2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	
		<input type="checkbox"/> CREDIT CARD	

BY Kaiser Storz It

adamer 1182

RECEIPT

DATE July 2009 No. **061287**

RECEIVED FROM Heather Ross \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #03 (10x15) Check #2284

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>July 2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	
		<input type="checkbox"/> CREDIT CARD	

BY Kaiser Storz It

adamer 1182

RECEIPT

DATE August 2009 No. **061288**

RECEIVED FROM Heather Ross \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #03 (10x15) Check #2294

☐ FOR

ACCOUNT		<input type="checkbox"/> CASH	FROM <u>August 2009</u>
PAYMENT		<input type="checkbox"/> MONEY ORDER	
BAL. DUE		<input checked="" type="checkbox"/> CHECK	
		<input type="checkbox"/> CREDIT CARD	

BY Kaiser Storz It

adamer 1182

263-4514

RECEIPT

DATE July 2009 No. 061207

RECEIVED FROM Virginia McCracken \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay # 04 (10x15) Check # 3465

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>July 2009</u>
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input checked="" type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz It

1182

RECEIPT

DATE August 2009 No. 061290

RECEIVED FROM Virginia McCracken \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay # 04 (10x15) Check # 3490

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>August 2009</u>
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input checked="" type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz It

1182

RECEIPT

August Due

DATE July 2009 No. 061291

RECEIVED FROM Edith C. Stine \$55.00

Fifty-five and 00/100 DOLLARS

☒ FOR RENT Bay # 12 (10x15) Check # 3358

☐ FOR

ACCOUNT	<u>110 00</u>	<input type="radio"/> CASH	FROM <u>July 2009</u>
PAYMENT	<u>55 00</u>	<input type="radio"/> MONEY ORDER	
BAL. DUE	<u>55 00</u>	<input checked="" type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz It

1182

RECEIPT

DATE August 2009 No. 061292

RECEIVED FROM Kathy Crumley \$80.00

Eighty and 00/100 DOLLARS

☒ FOR RENT Check # 4778 Bay # 7 (5x10) # 35 / Bay # 14 (10x10) # 45

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>August 2009</u>
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input checked="" type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz It

1182

RECEIPT

DATE August 2009 No. 061293

RECEIVED FROM David Mollenc \$ 50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Bay #13 (10x15) Check # 4361

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>October 2009</u>
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input checked="" type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz IT.

1182

RECEIPT

DATE August 24, 2009 No. 061294

RECEIVED FROM Heather Ross \$ 50.00

Twenty and 00/100 DOLLARS

☒ FOR RENT 10x15 Bay # 3 Check # 2296

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>September 2009</u>
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input checked="" type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz IT

1182

RECEIPT

DATE August 24, 2009 No. 061295

RECEIVED FROM Randy A. Bixton \$ 25.00

Twenty-five and 00/100 DOLLARS

☒ FOR RENT 5x10 Bay # 10 Check # 168

☐ FOR

ACCOUNT		<input type="radio"/> CASH	FROM <u>September 2009</u>
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input checked="" type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz IT

1182

RECEIPT

DATE August 24, 2009 No. 061296

RECEIVED FROM Michelle Jones \$ 35.00

Thirty-five and 00/100 DOLLARS

☒ FOR RENT 5x10 Bay # 10 30 for Feb 2009 5 for Mar '09

☐ FOR

ACCOUNT	<u>240 00</u>	<input type="radio"/> CASH	FROM <u>OUT - 30 for Mar '09</u>
PAYMENT	<u>35 00</u>	<input type="radio"/> MONEY ORDER	
BAL. DUE	<u>205 00</u>	<input type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	

BY Kaiser Storz IT

+ 35 for Apr thru Aug '09 = \$175
Total Due 205.00

1182

RECEIPT

DATE September 2009 No. 061298

RECEIVED FROM Sherry Olinger \$140.00

One hundred Forty and 00/100 DOLLARS

☒ FOR RENT Check #509 Bay #01 (10x20) \$40 Due From May/June 2009

☐ FOR \$50 for July, still owe \$15 for July.

ACCOUNT	
PAYMENT	
BAL. DUE	<u>210.00</u>

☐ CASH
☐ MONEY ORDER
☒ CHECK
☐ CREDIT CARD

FROM TO

BY Kaiser Storz It

adamer 1182

\$15-July/65-Aug/65-Sep/65-Oct

RECEIPT

DATE September 2009 No. 061298

RECEIVED FROM Rosella Quick \$100.00

One hundred and 00/100 DOLLARS

☒ FOR RENT MO #09-035061980 \$50.00/20146010788 \$50.00 Bay #02

☐ FOR

ACCOUNT	
PAYMENT	
BAL. DUE	<u>195.00</u>

☐ CASH
☒ MONEY ORDER
☐ CHECK
☐ CREDIT CARD

FROM June 2009 TO July 2009

BY Kaiser Storz It

adamer 1182

\$50-Aug/50-Sep/50-Oct.

RECEIPT

DATE September 2009 No. 061299

RECEIVED FROM Heather Roos \$50.00

Fifty and 00/100 DOLLARS

☒ FOR RENT Check #2303 Bay #03 (10x15)

☐ FOR

ACCOUNT	
PAYMENT	
BAL. DUE	

☐ CASH
☐ MONEY ORDER
☒ CHECK
☐ CREDIT CARD

FROM September 2009 TO 2009

BY Kaiser Storz It

adamer 1182

RECEIPT

DATE October 2009 No. 061300

RECEIVED FROM Virginia McCracken \$100.00

One hundred and 00/100 DOLLARS

☒ FOR RENT Bay #04 Check #3510 (50) CHK #3530 (50)

☐ FOR

ACCOUNT	
PAYMENT	
BAL. DUE	

☐ CASH
☐ MONEY ORDER
☒ CHECK
☐ CREDIT CARD

FROM September TO October 2009

BY Kaiser Storz It

adamer 1182

RECEIPT

DATE	December 2009	No.	517901
FROM	Heather Roos		\$50.00
	Fifty and 00/100		DOLLARS
<input checked="" type="checkbox"/> FOR RENT	Check # 2321	Bay # 03 (10x15)	
<input type="checkbox"/> FOR			
ACCT.		<input type="radio"/> CASH	
PAID		<input checked="" type="radio"/> CHECK	FROM December 2009
DUE		<input type="radio"/> MONEY ORDER	
		<input type="radio"/> CREDIT CARD	BY Kaiser Storz II

2501

RECEIPT

RECEIPT

DATE <u>November 2009</u>		No. <u>517902</u>
FROM <u>Virginia Mc Cracker</u>		\$ <u>50.00</u>
<u>Fifty and 00/100</u>		DOLLARS
<input checked="" type="checkbox"/> FOR RENT <u>Bay # 04 Check # 3550 (10x15)</u>		
<input type="checkbox"/> FOR		
ACCT.		<input type="radio"/> CASH
PAID		<input checked="" type="radio"/> CHECK
DUE		<input type="radio"/> MONEY ORDER
		<input type="radio"/> CREDIT CARD
		FROM <u>November 2009</u>
		BY <u>Kaiser Storz It</u>

2501

RECEIPT

RECEIPT

DATE <u>December 2009</u>		No. <u>517903</u>
FROM <u>Virginia McCracken</u>		\$ <u>50.00</u>
<u>Fifty and 00/100</u>		DOLLARS
FOR RENT <u>Check # 3571 Bay # 04 (10-15)</u>		
FOR <u>December 2009</u>		
ACCT.	<input type="checkbox"/>	<input type="radio"/> CASH
PAID	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> CHECK
DUE	<input type="checkbox"/>	<input type="radio"/> MONEY ORDER
		<input type="radio"/> CREDIT CARD
FROM <u>December 2009</u>		By <u>Kaiser Storz, It</u>

2501

DATE 12-11-09 TIME 1:30

FROM Mike Lowe

TO Bay #6 (5x10)

AMOUNT \$65.00

PAID ✓

DUE 30-Mar-2009

CASH ✓

CHECK ○

MONEY ORDER ○

CREDIT CARD ○

RECEIPT

RECEIPT

DATE December 2009 No. 517904

FROM Mike Lowe \$ 65.00

Sixty-five and 00/100 DOLLARS

TO Bay #6 (5x10) *30-Mar-2009

FROM 35-April 2009

BY Kaiser Storz Inc.

2501

RECEIPT

RECEIPT

DATE	October 2009	No.	517905
FROM	Kathy Crumly		\$100.00
One hundred Sixty and 00/100 DOLLARS			
Check # 4855 - September 2009			
FOR RENT Bay # 7/14 Check # 4856 - October 2009			
ACCT.		<input type="radio"/> CASH	
PAID		<input checked="" type="radio"/> CHECK	FROM _____ TO _____
DUE		<input type="radio"/> MONEY ORDER	
		<input type="radio"/> CREDIT CARD	
BY Kaiser Stone, Inc.			
adams 2501			

RECEIPT

RECEIPT

DATE	December 2009	No.	517906
FROM	Barry Steinkamp		\$09.00
	Ninety-nine and 09/100		DOLLARS
FOR RENT	Check #833		\$33.00/month
FOR			
ACCT.		<input type="radio"/> CASH	
PAID		<input checked="" type="radio"/> CHECK	
DUE		<input type="radio"/> MONEY ORDER	
		<input type="radio"/> CREDIT CARD	
		FROM	Oct. 2009 to Dec 2009
		BY	Kaiser Storz Jr

DATE	12/01/09
FROM	Randy Bratton
TO	
AMOUNT	\$105.00
REMARKS	One hundred Five and 00/100
PAID	
DUE	
RECEIVED	
BY	

RECEIPT

RECEIPT

DATE	December 1 2009	No.	517907
FROM	Randy Bratton	\$105.00	
One hundred Five and 00/100 DOLLARS			
<input checked="" type="checkbox"/> FOR RENT <input type="checkbox"/> FOR		Check # 171 (35) - OCTOBER 2009 Check # 224 (35) - November 2009 Check # 233 (35) - DECEMBER 2009	
ACCT.		<input type="checkbox"/> CASH <input checked="" type="checkbox"/> CHECK <input type="checkbox"/> MONEY ORDER <input type="checkbox"/> CREDIT CARD	
PAID		FROM _____ TO _____	
DUE		BY Kaiser Storz II	

RECEIPT

RECEIPT

DATE	September 2009	No.	517908
FROM	Edith Stiner		\$110.00
One hundred Ten and 00/100 DOLLARS			
FOR RENT Check # 3367 Bay # 12 (10x15)			
ACCT.		<input type="radio"/> CASH	
PAID		<input checked="" type="radio"/> CHECK	
DUE		<input type="radio"/> MONEY ORDER	
		<input type="radio"/> CREDIT CARD	
		FROM	Aug 2009 to Sept 2009
		BY	Kaiser Storz Jr

edra 2501

DATE December 2009

FROM David Mollura

TO One hundred and 9/100

FOR Check # 4485 - NOV 2009

FOR Check # 4532 - DEC 2009

FOR RENT Bay #13 (10x15)

FOR

ACCT.

PAID

DUE

CASH

CHECK

MONEY ORDER

CREDIT CARD

RECEIPT

RECEIPT

DATE December 2009 No. 517909

FROM David Mollura \$ 100.00

One hundred and 9/100 DOLLARS

FOR RENT Bay #13 (10x15) Check # 4485 - NOV 2009

FOR Check # 4532 - DEC 2009

ACCT.

PAID

DUE

CASH

CHECK

MONEY ORDER

CREDIT CARD

FROM Kaiser Storz Inc TO

2501

RECEIPT

RECEIPT

DATE	January 2010	No.	517911
FROM	Kathy Crumby		\$160.00
One hundred Sixty and 00/100 DOLLARS			
FOR RENT Bay # 7/14 Check # 4961 (NSD) # 4962 (DEC)			
ACCT.		<input type="radio"/> CASH	
PAID		<input checked="" type="radio"/> CHECK	
DUE		<input type="radio"/> MONEY ORDER	
		<input type="radio"/> CREDIT CARD	
		FROM	Nov 2009 TO Dec 2009
		BY	Kaiser Storz II

DATE	
FROM	
FOR RENT	
FOR	
ACCT.	
PAID	
DUE	

DATE Jan 19, 2010

FROM Rosella Quick

FOR RENT Bay #2 (10x15)

FOR MO #20183168930 \$100.00 / #20178863815 \$50.00

ACCT.	300 00
PAID	150 00
DUE	150 00

BY Kaiser Storz

RECEIPT

DATE Jan. 19, 2010 No. 517918

FROM Rosella Quick \$ 150.00

One hundred Fifty and 00/100 DOLLARS

FOR RENT Bay #2 (10x15)

FOR MO #20183168930 \$100.00 / #20178863815 \$50.00

☐ CASH

☐ CHECK

☒ MONEY ORDER

☐ CREDIT CARD

FROM Aug 2009 TO Oct 2009

BY Kaiser Storz

Nov / Dec 2009 + Jan 2010



Citizens
Automobile Finance

P.O. Box 42002
Providence, RI 02940-2002



INSTALLMENT LOAN STATEMENT



Equal Housing Lender

Member FDIC

Customer Service 1-877-265-3278

Payment Remittance Address:
Citizens Automobile Finance, Inc.
P.O. Box 42113
Providence, RI 02940-2113

ACCOUNT INFORMATION

Account Number: 2713003131
Statement Date: February 15, 2009
Current Interest Rate: 7.990%
Current Principal Balance: 4,507.65

*Estimated Payoff Amount Good
For March 07, 2009 4,533.51

* Please call Customer Service for an actual payoff amount.



JENNIFER L KAISER
408 N 11TH ST
PHILIPSBURG, PA 16866-1110



PAYMENT DUE SUMMARY

Regular Monthly Payment Amount:	335.22
Past Due Amount:	0.00
Fees:	0.00
Total Payment Amount Due:	335.22

PAYMENT DUE DATE: March 07, 2009

ACCOUNT ACTIVITY

Date	Description	Principal	Interest	Late Charge	Other	Amount
02/09/09	PAYMENT - THANK YOU	255.83	75.49	0.00	0.00	331.32
02/09/09	PRINCIPAL CREDIT	168.68	0.00	0.00	0.00	168.68

Should you have questions regarding your account, please call our Customer Service phone number listed on this statement. Our Customer Service Representatives are available 24 hours, 7 days a week. Thank you for banking with Citizens.

Did you know that you can make your payment by phone, or online for a small convenience fee? Please call our automated pay by phone system at 1-888-805-0200, or visit www.citizensbank.com/onetimepay.

PLEASE DETACH AND RETURN THE PORTION BELOW WITH YOUR CHECK PAYABLE TO CITIZENS AUTOMOBILE FINANCE, INC.

Please allow 7 days for mailing to ensure payment is delivered by the due date.



Member FDIC

Please allow 7 days for mailing to ensure payment is delivered by the due date.



Citizens
Automobile Finance

P.O. Box 42002
Providence, RI 02940-2002



INSTALLMENT LOAN STATEMENT

Equal Housing Lender

Member FDIC

Customer Service 1-877-265-3278

Payment Remittance Address:
Citizens Automobile Finance, Inc.
P.O. Box 42113
Providence, RI 02940-2113

ACCOUNT INFORMATION

Account Number: 2713003131
Statement Date: April 17, 2009
Current Interest Rate: 7.990%
Current Principal Balance: 3,600.05

* Estimated Payoff Amount Good
For May 07, 2009 3,650.26

* Please call Customer Service for an actual payoff amount.



JENNIFER L KAISER
408 N 11TH ST
PHILIPSBURG, PA 16866-1110

PAYMENT DUE SUMMARY

Regular Monthly Payment Amount:	335.22
Past Due Amount:	335.22
Fees:	0.00
Total Payment Amount Due:	670.44

PAYMENT DUE DATE: May 07, 2009

ACCOUNT ACTIVITY

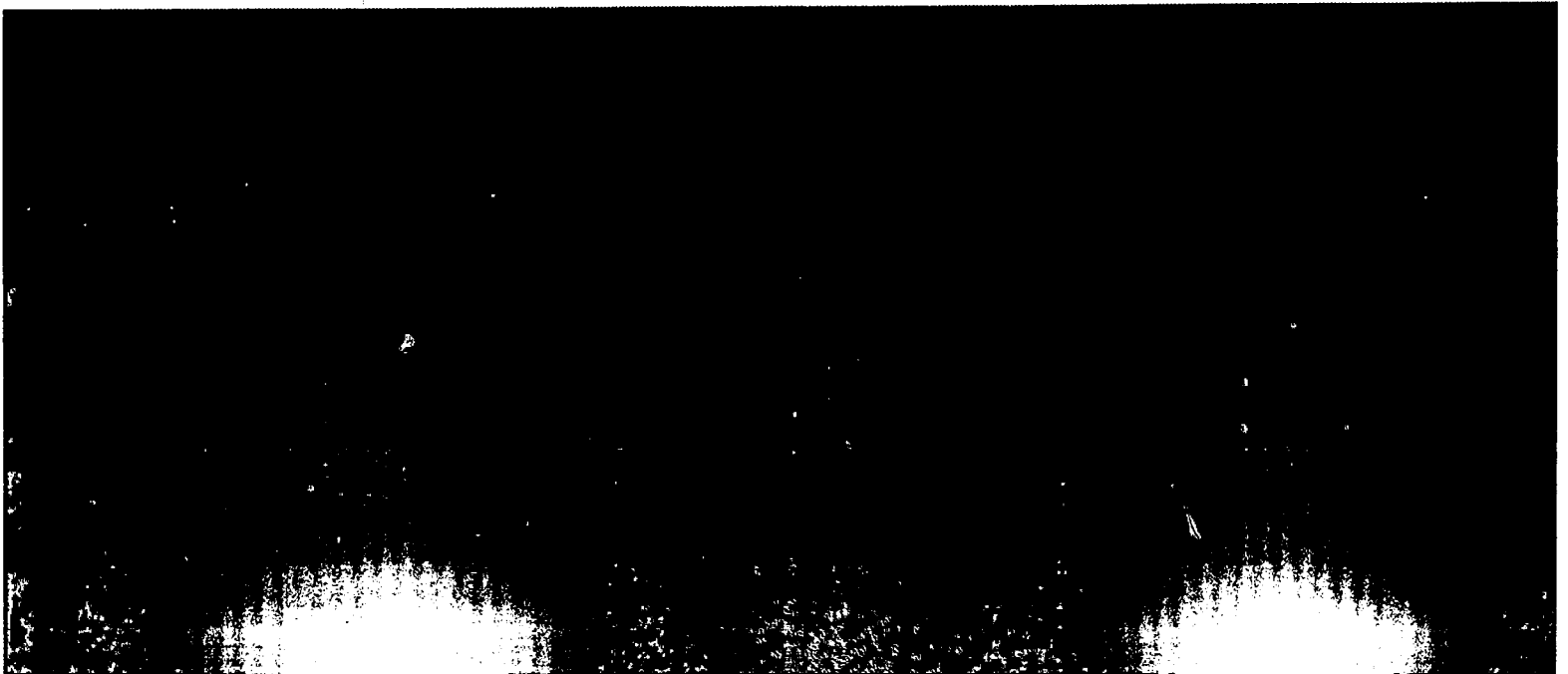
Date	Description	Principal	Interest	Late Charge	Other	Amount
04/17/09	PRINCIPAL CREDIT	435.22	0.00	0.00	0.00	435.22

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Citizens
Automobile Finance

P.O. Box 42002
Providence, RI 02940-2002



INSTALLMENT LOAN STATEMENT



Equal Housing Lender

Member FDIC

Customer Service 1-877-265-3278

Payment Remittance Address:
Citizens Automobile Finance, Inc.
P.O. Box 42113
Providence, RI 02940-2113

ACCOUNT INFORMATION

Account Number: 2713003131
Statement Date: May 18, 2009
Current Interest Rate: 7.990%
Current Principal Balance: 2,977.46

*Estimated Payoff Amount Good
For June 07, 2009 3,006.32

* Please call Customer Service for an actual payoff amount.

PAYMENT DUE SUMMARY

Regular Monthly Payment Amount:	335.22
Past Due Amount:	0.00
Fees:	6.70
Total Payment Amount Due:	341.92

PAYMENT DUE DATE: June 07, 2009

ACCOUNT ACTIVITY

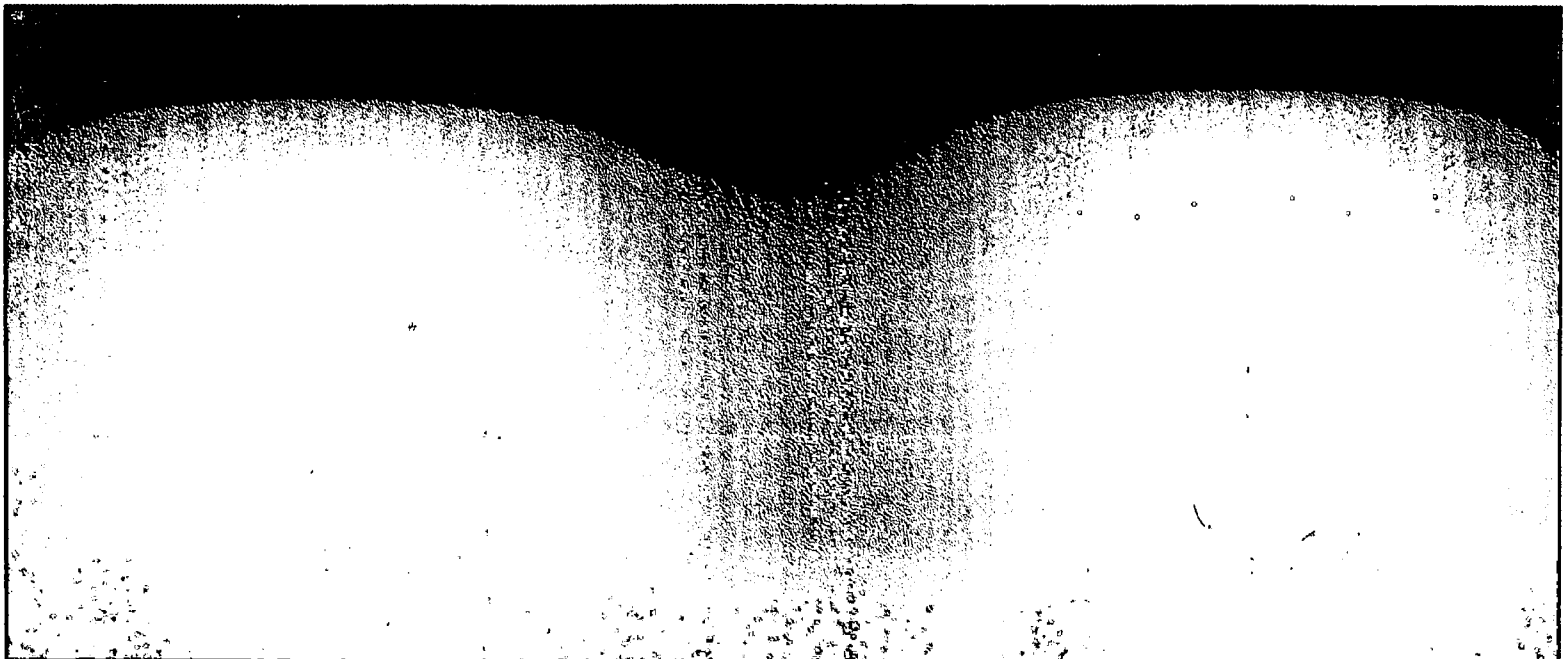
Date	Description	Principal	Interest	Late Charge	Other	Amount
04/18/09	LATE CHARGE ASSESSED	0.00	0.00	6.70	0.00	6.70
05/04/09	PAYMENT - THANK YOU	622.59	47.85	0.00	0.00	670.44

Should you have questions regarding your account, please call our Customer Service phone number listed on this statement. Our Customer Service Representatives are available 24 hours, 7 days a week. Thank you for banking with Citizens.

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Please allow 7 days for mailing to ensure payment is delivered by the due date.



**Citizens**

Automobile Finance

P.O. Box 42002

Providence, RI 02940-2002

**INSTALLMENT LOAN STATEMENT**

Equal Housing Lender

Member FDIC

Customer Service 1-877-265-3278

Payment Remittance Address:
Citizens Automobile Finance, Inc.P.O. Box 42113
Providence, RI 02940-2113

JENNIFER L KAISER

408 N 11TH ST

PHILIPSBURG, PA 16866-1110

**ACCOUNT INFORMATION**

Account Number:	2713003131
Statement Date:	July 18, 2009
Current Interest Rate:	7.990%
Current Principal Balance:	2,343.80

*Estimated Payoff Amount Good For August 07, 2009	2,363.32
------------------------------------------------------	----------

* Please call Customer Service for an actual payoff amount.

PAYMENT DUE SUMMARY

Regular Monthly Payment Amount:	335.22
Past Due Amount:	0.00
Fees:	6.70

Total Payment Amount Due:	335.22
---------------------------	--------

PAYMENT DUE DATE: August 07, 2009

ACCOUNT ACTIVITY

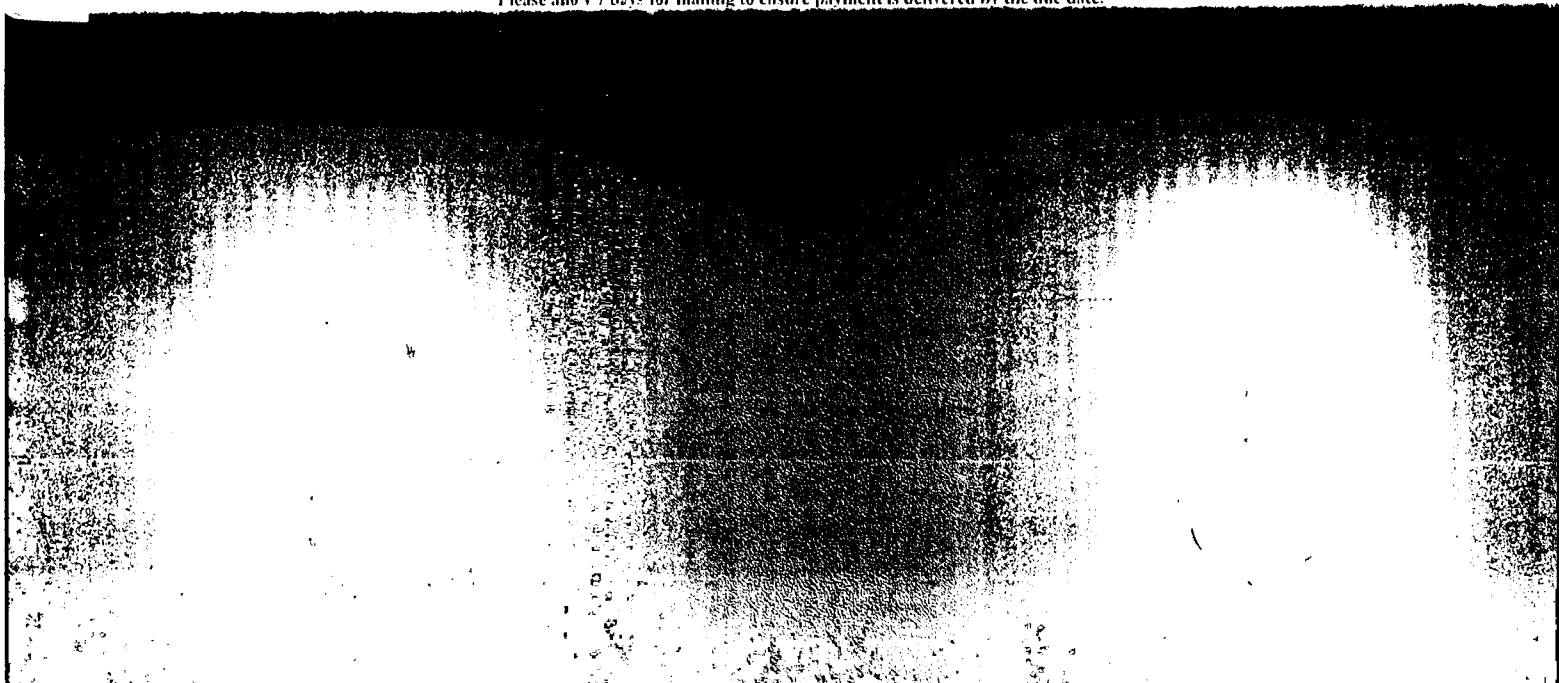
Date	Description	Principal	Interest	Late Charge	Other	Amount
07/13/09	PAYMENT - THANK YOU	317.16	18.06	0.00	0.00	335.22

Should you have questions regarding your account, please call our Customer Service phone number listed on this statement. Our Customer Service Representatives are available 24 hours, 7 days a week. Thank you for banking with Citizens.

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PLEASE DETACH AND RETURN THE PORTION BELOW WITH YOUR CHECK PAYABLE TO CITIZENS AUTOMOBILE FINANCE, INC.

Please allow 7 days for mailing to ensure payment is delivered by the due date.





Citizens
Automobile Finance

P.O. Box 42002
Providence, RI 02940-2002

INSTALLMENT LOAN STATEMENT



Equal Housing Lender

Member FDIC

Customer Service 1-877-265-3278

Payment Remittance Address:
Citizens Automobile Finance, Inc.
P.O. Box 42113
Providence, RI 02940-2113

|||||

JENNIFER L KAISER
408 N 11TH ST
PHILIPSBURG, PA 16866-1110
|||||

ACCOUNT INFORMATION

Account Number: 2713003131
Statement Date: August 18, 2009
Current Interest Rate: 7.990%
Current Principal Balance: 2,343.80

*Estimated Payoff Amount Good
For September 07, 2009 2,385.80

*Please call Customer Service for an actual payoff amount.

PAYMENT DUE SUMMARY

Regular Monthly Payment Amount:	335.22
Past Due Amount:	328.52
Fees:	13.27
Total Payment Amount Due:	677.01

PAYMENT DUE DATE: September 07, 2009

ACCOUNT ACTIVITY

Date	Description	Principal	Interest	Late Charge	Other	Amount
08/18/09	LATE CHARGE ASSESSED	0.00	0.00	6.57	0.00	6.57

Due 341.79 9/07 | Payoff 1,699.04 As of 08/31/09

Should you have questions regarding your account, please call our Customer Service phone number listed on this statement. Our Customer Service Representatives are available 24 hours, 7 days a week. Thank you for banking with Citizens.

Did you know that you can make your payment by phone, or online for a small convenience fee? Please call our automated pay by phone system at 1-888-805-0200, or visit www.citizensbank.com/onetimepay.

PLEASE DETACH AND RETURN THE PORTION BELOW WITH YOUR CHECK PAYABLE TO CITIZENS AUTOMOBILE FINANCE, INC.

Please allow 7 days for mailing to ensure payment is delivered by the due date.



Citizens
Automobile Finance

P.O. Box 42002
Providence, RI 02940-2002



INSTALLMENT LOAN STATEMENT



Equal Housing Lender

Member FDIC

Customer Service 1-877-265-3278

Payment Remittance Address:
Citizens Automobile Finance, Inc.
P.O. Box 42113
Providence, RI 02940-2113



JENNIFER L KAISER
408 N 11TH ST
PHILIPSBURG, PA 16866-1110



PAYMENT DUE SUMMARY

Regular Monthly Payment Amount:	335.22
Past Due Amount:	0.00
Fees:	13.27
Total Payment Amount Due:	335.22

PAYMENT DUE DATE: October 07, 2009

ACCOUNT ACTIVITY

Date	Description	Principal	Interest	Late Charge	Other	Amount
08/19/09	PAYMENT - THANK YOU	316.24	18.98	0.00	0.00	335.22
08/19/09	PRINCIPAL CREDIT	328.52	0.00	0.00	0.00	328.52
09/14/09	PAYMENT - THANK YOU	332.11	9.68	0.00	0.00	341.79

Account Number: 2713003131
Statement Date: September 17, 2009
Current Interest Rate: 7.990%
Current Principal Balance: 1,366.93

* Estimated Payoff Amount Good
For October 07, 2009 1,387.09

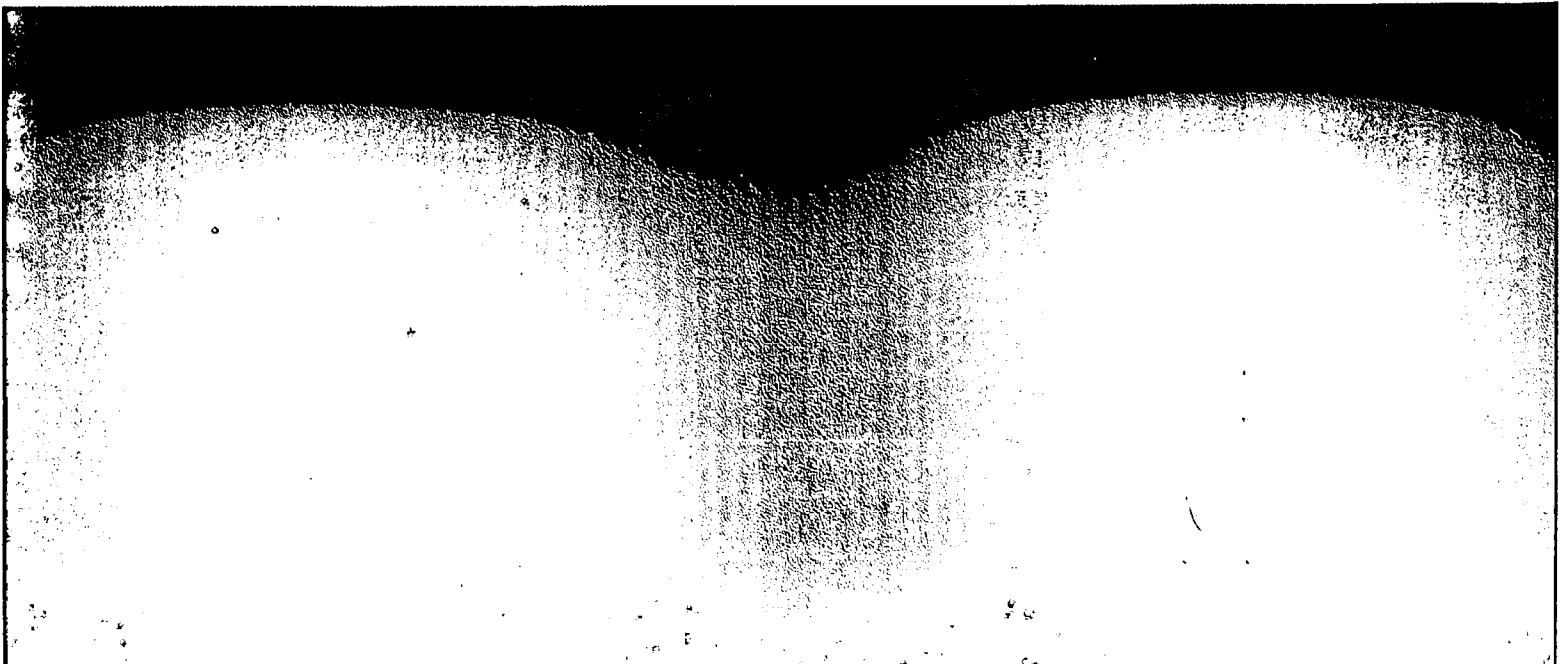
* Please call Customer Service for an actual payoff amount.

Should you have questions regarding your account, please call our Customer Service phone number listed on this statement. Our Customer Service Representatives are available 24 hours, 7 days a week. Thank you for banking with Citizens.

Did you know that you can make your payment by phone, or online for a small convenience fee? Please call our automated pay by phone system at 1-888-805-0290, or visit www.citizensbank.com/onetimepay.

PLEASE DETACH AND RETURN THE PORTION BELOW WITH YOUR CHECK PAYABLE TO CITIZENS AUTOMOBILE FINANCE, INC.

Please allow 7 days for mailing to ensure payment is delivered by the due date.



**Citizens**

Automobile Finance

P.O. Box 42002

Providence, RI 02940-2002

**INSTALLMENT LOAN STATEMENT**

Equal Housing Lender

Member FDIC

Customer Service 1-877-265-3278

Payment Remittance Address:
Citizens Automobile Finance, Inc.P.O. Box 42113
Providence, RI 02940-2113JENNIFER L KAISER
408 N 11TH ST
PHILIPSBURG, PA 16866-1110**ACCOUNT INFORMATION**Account Number: 271303131
Statement Date: October 18, 2009
Current Interest Rate: 7.990%
Current Principal Balance: 1,040.38*Estimated Payoff Amount Good
For November 07, 2009 1,059.35

* Please call Customer Service for an actual payoff amount.

PAYMENT DUE SUMMARYRegular Monthly Payment Amount: 335.22
Past Due Amount: 0.00
Fees: 13.27
Total Payment Amount Due: 335.22

PAYMENT DUE DATE: November 07, 2009

ACCOUNT ACTIVITY

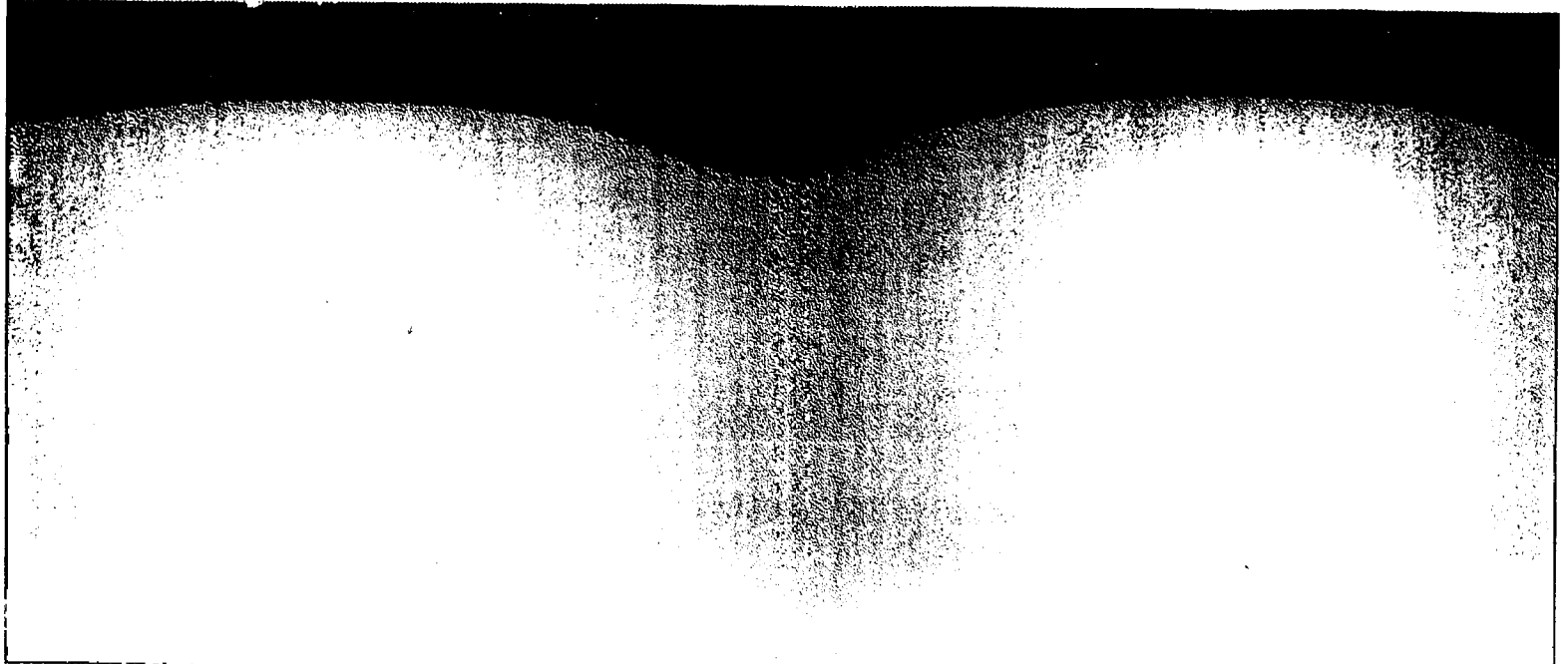
Date	Description	Principal	Interest	Late Charge	Other	Amount
10/13/09	PAYMENT - THANK YOU	326.55	8.67	0.00	0.00	335.22

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Did you know that you can make your payment by phone, or online for a small convenience fee? Please call our automated pay by phone system at 1-888-805-0200, or visit www.citizensbank.com/onetimepay.

PLEASE DETACH AND RETURN THE PORTION BELOW WITH YOUR CHECK PAYABLE TO CITIZENS AUTOMOBILE FINANCE, INC.

Please allow 7 days for mailing to ensure payment is delivered by the due date.





Citizens
Automobile Finance
P.O. Box 42002
Providence, RI 02940-2002



INSTALLMENT LOAN STATEMENT



Equal Housing Lender

Member FDIC

Customer Service 1-877-265-3278

Payment Remittance Address:
Citizens Automobile Finance, Inc
P.O. Box 42113
Providence, RI 02940-2113



JENNIFER L KAISER
408 N 11TH ST
PHILIPSBURG, PA 16866-1110

ACCOUNT INFORMATION

Account Number: 2713003131
Statement Date: November 17, 2009
Current Interest Rate: 7.990%
Current Principal Balance: 723.90

*Estimated Payoff Amount Good
For December 07, 2009 728.81

* Please call Customer Service for an actual payoff amount.

PAYMENT DUE SUMMARY

Regular Monthly Payment Amount	335.22
Past Due Amount:	0.00
Fees:	0.00
Total Payment Amount Due:	335.22

PAYMENT DUE DATE: December 07, 2009

ACCOUNT ACTIVITY

Date	Description	Principal	Interest	Late Charge	Other	Amount
11/06/09	PAYMENT - THANK YOU	316.48	5.47	13.27	0.00	335.22

Should you have questions regarding your account, please call our Customer Service phone number listed on this statement. Our Customer Service Representatives are available 24 hours, 7 days a week. Thank you for banking with Citizens.

Did you know that you can make your payment by phone, or online for a small convenience fee? Please call our automated pay by phone system at 1-888-805-0200, or visit www.citizensbank.com/onetimepay.

PLEASE DETACH AND RETURN THE PORTION BELOW WITH YOUR CHECK PAYABLE TO CITIZENS AUTOMOBILE FINANCE, INC.

Please allow 7 days for mailing to ensure payment is delivered by the due date.





Citizens
Automobile Finance

P.O. Box 42002
Providence, RI 02940-2002



INSTALLMENT LOAN STATEMENT

Equal Housing Lender

Member FDIC

Customer Service 1-877-265-3278

Payment Remittance Address:
Citizens Automobile Finance, Inc.
P.O. Box 42113
Providence, RI 02940-2113

|||||

JENNIFER L KAISER
408 N 11TH ST
PHILIPSBURG, PA 16866-1110
|||||

ACCOUNT INFORMATION

Account Number: 2713003131
Statement Date: December 18, 2009
Current Interest Rate: 7.990%
Current Principal Balance: 394.85

*Estimated Payoff Amount Good
For January 07, 2010 396.84

* Please call Customer Service for an actual payoff amount.

PAYMENT DUE SUMMARY

Regular Monthly Payment Amount:	335.22
Past Due Amount:	0.00
Fees:	0.00
Total Payment Amount Due:	335.22

PAYMENT DUE DATE: January 07, 2010

ACCOUNT ACTIVITY

Date	Description
12/15/09	PAYMENT - THANK YOU

396.84
335.22

61.62

Principal	Interest	Late Charge	Other	Amount
329.05	6.17	0.00	0.00	335.22

Should you have questions regarding your account, please call our Customer Service phone number listed on this statement. Our Customer Service Representatives are available 24 hours, 7 days a week. Thank you for banking with Citizens.

Did you know that you can make your payment by phone, or online for a small convenience fee? Please call our automated pay by phone system at 1-888-805-0200, or visit www.citizensbank.com/onetimepay.

PLEASE DETACH AND RETURN THE PORTION BELOW WITH YOUR CHECK PAYABLE TO CITIZENS AUTOMOBILE FINANCE, INC.



REFERENCE	DATE PERIOD	RELATIONSHIP	ACCOUNT INFORMATION	QTY	CHARGES	DITS	AMOUNT PAID
10C24516	03/01/2009 - 05/31/2009	814-649-9532	0006665	3	MONTHLY PAGER SERVICE		30.00
	03/01/2009 - 05/31/2009	814-649-9532	0006665	3	Voice Mail Fee		6.00
	03/01/2009 - 05/31/2009	814-649-9532	0006665	3	CUSTOM VOICE PROMPTS		3.00
	03/01/2009 - 05/31/2009	814-649-9532	0006665	3	PAGE INSURE		3.00

**Billing
Summary**

ACCOUNT NO.	CLOSING DATE	BILL DUE BY
2102	02/24/2009	03/15/2009

**Past Due
Summary**

CURRENT	1-30 DAYS	31-60 DAYS	61-90 DAYS	OVER 90 DAYS
44.52	0.00	0.00	0.00	0.00

Previous Balance	0.00
Credit Applied	0.00
Current Charges	42.00
Sales tax	2.52
Tax Exempt	
County tax	
Telecomm tax	
Misc. tax	
TOTAL DUE	44.52

billing questions? 8146967929

MultiComm, Inc.

Page 1 of 1

We Sincerely Appreciate Your Business

REFERENCE	DATE PERIOD	RELATIONSHIP	ACCOUNT INFORMATION	QTY	CHARGES	CREDITS	AMOUNT PAID
10024682	06/01/2009 - 08/31/2009	814-649-5532	0006665	3	MONTHLY PAGER SERVICE		30.00
	06/01/2009 - 08/31/2009	814-649-5532	0006665	3	Voice Mail Fee		6.00
	06/01/2009 - 08/31/2009	814-649-5532	0006665	3	CUSTOM. VOICE PROMPTS		3.00
	06/01/2009 - 08/31/2009	814-649-5532	0006665	3	PAGE INSURE		3.00

**Billing
Summary**

ACCOUNT NO.	CLOSING DATE	BILL DUE EY
2102	05/21/2009	06.15.2009

**Past Due
Summary**

CURRENT	1-30 DAYS	31-60 DAYS	61-90 DAYS	OVER 90 DAYS
44.52	0.00	0.00	0.00	0.00

Previous Balance	0.00
Credit Applied	0.00
Current Charges	42.00
Sales tax	2.52
Tax Exempt	
County tax	
Telecomm tax	
Misc. tax	
TOTAL DUE	44.52

For billing questions? 8146967929

MultiComm, Inc.

Page 1 of 1

PRODUCT 13624T

We Sincerely Appreciate Your Business

FOLD AT (b) TO FIT COMPANION #40 STANDARD ENVELOPE. PRINTED IN U.S.A. A

REFERENCE	DATE PERIOD	RELAT	ING INFORMATION	QTY	CHARGES	DITS	AMOUNT PAID
10024853	09/01/2009 - 11/30/2009	814-649-9532	0006665	3	MONTHLY PAGER SERVICE		30.00
	09/01/2009 - 11/30/2009	814-649-9532	0006665	3	Voice Mail Fee		6.00
	09/01/2009 - 11/30/2009	814-649-9532	0006665	3	JUSTOM VCICE PROMPTS		3.00
	09/01/2009 - 11/30/2009	814-649-9532	0006665	3	PAGE INSURE		3.00

Billing
Summary

ACCOUNT NO.	CLOSING DATE	BILL DUE BY
2102	08/24/2009	09/15/2009

Past Due
Summary

CURRENT	1-30 DAYS	31-60 DAYS	61-90 DAYS	OVER 90 DAYS
44.52	0.00	0.00	0.00	0.00

Previous Balance	0.00
Credit Applied	0.00
Current Charges	42.00
Sales tax	2.52
Tax Exempt	
County tax	
Telecomm tax	
Misc. tax	
TOTAL DUE	44.52

billing questions? 8146967929

MultiComm, Inc.

Page 1 of 1

PRODUCT 13324

We Sincerely Appreciate Your Business

FOLD AT (x) TO FIT COMPANION 710 STANDARD ENVELOPE. PRINTED IN U.S.A. A

REFERENCE	DATE PERIOD	RELATE	ING INFORMATION	QTY	CHARGES & UNITS	AMOUNT PAID
10025014	12/01/2009 - 02/28/2010	814-649-9532	0006665	3	MONTHLY PAGER SERVICE	30.00
	12/01/2009 - 02/28/2010	814-649-9532	0006665	3	Voice Mail Fee	6.00
	12/01/2009 - 02/28/2010	814-649-9532	0006665	3	CUSTOM VOICE PROMPTS	3.00
	12/01/2009 - 02/28/2010	814-649-9532	0006665	3	PAGE INSURE	3.00

**Billing
Summary**

ACCOUNT NO.	CLOSING DATE	BILL DUE BY
2102	11/23/2009	12/15/2009

**Past Due
Summary**

CURRENT	1-30 DAYS	31-60 DAYS	61-90 DAYS	OVER 90 DAYS
44.52	0.00	0.00	0.00	0.00

Previous Balance	0.00
Credit Applied	0.00
Current Charges	42.00
Sales tax	2.52
Tax Exempt	
County tax	
Telecomm tax	
Misc. tax	
TOTAL DUE	44.52

billing questions? 8146967929

MultiComm, Inc.

Page 1 of 1

We Sincerely Appreciate Your Business



700 CRANBERRY WOODS DR.
CRANBERRY TWP., PA 16066

Manage Your Account

My Verizon at www.verizonwireless.com

Account Number

Date Due

220819251-00001

02/05/09

Invoice Number

1505897985

10021948 01 AT C.346 **AUTO T7 0 3710 16866-111008 1 E PITT1012



JENNIFER KAISER
408 N ELEVENTH ST
PHILIPSBURG, PA 16866-1110

Quick Bill Summary

Dec 11 - Jan 10

Previous Balance (see back for details)	\$69.35
Payment - Thank You	-\$70.00
Adjustments	-\$58.48
Credit Balance	-\$59.13
Monthly Access Charges	\$136.88
Usage Charges	
Voice	\$.00
Data	\$10.95
Equipment Charges	\$328.53
Verizon Wireless' Surcharges and Other Charges & Credits	\$35.97
Taxes, Governmental Surcharges & Fees	\$10.74
Total Current Charges	\$523.07

Change to Your Service

This month's bill reflects a change to your service. This bill may include partial month charges or credits from the date of change to the first day of your bill cycle as well as your standard monthly access charges for next month, billed in advance.

Total Charges Due by February 05, 2009 **\$463.94**

Pay from Wireless

Pay on the Web

Questions:

#PMT (#768)

My Verizon at www.verizonwireless.com

1.800.922.0204 or *611 from your wireless



700 CRANBERRY WOODS DR.
CRANBERRY TWP., PA 16066

Manage Your Account

My Verizon at www.verizonwireless.com

Account Number

Date Due

220819251-00001

03/05/09

Invoice Number

1513639789

10022278 01 AT 0.346 **AUTO T5 0 3810 16866-111008 12 E PITT 1012



JENNIFER KAISER
408 N ELEVENTH ST
PHILIPSBURG, PA 16866-1110

Quick Bill Summary

Jan 11 - Feb 10

Previous Balance <i>(see back for details)</i>	\$463.94
Payment - Thank You	-\$463.94
Balance Forward	\$0.00
Monthly Access Charges	\$150.75
Usage Charges	
Voice	\$0.00
Data	\$1.99
Verizon Wireless' Surcharges and Other Charges & Credits	\$7.62
Taxes, Governmental Surcharges & Fees	\$7.54
Total Current Charges	\$167.90

Verizon Wireless News

Add a line to your account - It's easy!

It's a great time to add a line to your account. We have a lot of cool phones and features for the entire family, along with all-inclusive Calling Plans. Plus, the network reliability you need. Call 1-866-745-4662 today!

Total Charges Due by March 05, 2009 **\$167.90**

Pay from Wireless

Pay on the Web

Questions:

#PMT (#768)

My Verizon at www.verizonwireless.com

1.800.922.0204 or *611 from your wireless



700 CRANBERRY WOODS DR.
CRANBERRY TWP., PA 16066

Manage Your Account

My Verizon at www.verizonwireless.com

Account Number

Date Due

220819251-00001

04/05/09

Invoice Number

1527453891

10022530 01 AT 0.346 **AUTO T8 0 3510 16366-111008 12 E PITT1012

|||||

JENNIFER KAISER
408 N ELEVENTH ST
PHILIPSBURG, PA 16866-1110

Quick Bill Summary

Feb 11 - Mar 10

Previous Balance <i>(see back for details)</i>	\$167.90
Payment - Thank You	-\$167.90
Balance Forward	\$0.00
Monthly Access Charges	\$108.26
Usage Charges	
Voice	\$0.00
Data	\$0.00
Verizon Wireless' Surcharges and Other Charges & Credits	\$7.62
Taxes, Governmental Surcharges & Fees	\$7.54
Total Current Charges	\$123.42

Total Charges Due by April 05, 2009

\$123.42

Pay from Wireless	Pay on the Web	Questions:
#PMT (#768)	My Verizon at www.verizonwireless.com	1.800.922.0204 or *611 from your wireless



700 CRANBERRY WOODS DR.
CRANBERRY TWP., PA 16066

Manage Your Account

Account Number

Date Due

My Verizon at www.verizonwireless.com

220819251-00001

05/05/09

Invoice Number

1538292429

10022409 01 AT 0.545 **AUTO T8 0 4010 16866-111008 1 3 E P17T1012



JENNIFER KAISER
408 N ELEVENTH ST
PHILIPSBURG, PA 16866-1110

Quick Bill Summary

Mar 11 - Apr 10

Previous Balance <i>(see back for details)</i>	\$123.42
Payment - Thank You	-\$123.42
Balance Forward	\$0.00
Monthly Access Charges	\$116.76
Usage Charges	
Voice	\$0.30
Data	\$1.39
Verizon Wireless Surcharges and Other Charges & Credits	\$7.84
Taxes, Governmental Surcharges & Fees	\$7.55
Total Current Charges	\$134.14

Verizon Wireless News

It's Easy Being Green

With Paperless Billing and AutoPay, you
can do your part for the environment,
save time and save on stamps.

Visit www.verizonwireless.com/myverizon

Total Charges Due by May 05, 2009

\$134.14

Pay from Wireless

Pay on the Web

Questions:

#PMT (#768)

My Verizon at www.verizonwireless.com

1.800.922.0204 or *611 from your wireless



700 CRANBERRY WOODS DR.
CRANBERRY TWP., PA 15036

Manage Your Account

My Verizon at www.verizonwireless.com

Account Number

Date Due

220819251-00001

06/05/09

Invoice Number

1549073261

10022317 01 AT 0.357 **ALTO T9 0 4110 16866-111008 12 E PIT 1112



JENNIFER KAISER
408 N ELEVENTH ST
PHILIPSBURG, PA 16866-1110

Quick Bill Summary

Apr 11 - May 10

Previous Balance (see back for details)	\$134.14
Payment - Thank You	-\$134.14
Balance Forward	\$0.00
Monthly Access Charges	\$115.76
Usage Charges	
Voice	\$0.00
Data	\$0.00
Verizon Wireless' Surcharges and Other Charges & Credits	\$7.84
Taxes, Governmental Surcharges & Fees	\$7.55
Total Current Charges	\$132.15

Total Charges Due by June 05, 2009 **\$132.15**

Verizon Wireless News

It's Easy Being Green

With Paperless Billing and AutoPay, you
can do your part for the environment,
save time and save on stamps.

Visit www.verizonwireless.com/myverizon

Pay from Wireless

#PMT (#768)

Pay on the Web

My Verizon at www.verizonwireless.com

Questions:

1.800.922.0204 or *611 from your wireless



700 CRANBERRY WOODS DR.
CRANBERRY TWP., PA 16066

Manage Your Account

My Verizon at www.verizonwireless.com

Account Number

Date Due

220819251-00001

Past Due

Invoice Number

1559888359

10022203 01 AT 0.357 **AUTO T6.0 4210 15:66-111006 1 3 E PITT1012



JENNIFER KAISER
408 N E TENTH ST
PHILADELPHIA, PA 19106-1110

Quick Bill Summary

May 11 - Jun 10

Previous Balance (see back for details)	\$132.15
No Payment Received	\$0.00
Balance Forward Due Immediately	\$132.15
Account Charges and Credits	
Includes Late Fee of \$5.00	\$5.00
Monthly Access Charges	\$116.76
Usage Charges	
Voice	\$1.49
Data	\$0.00
Verizon Wireless' Surcharges and Other Charges & Credits	\$7.96
Taxes, Governmental Surcharges & Fees	\$7.65
Total Current Charges Due by July 05, 2009	\$138.86

Total Amount Due

\$271.01

It's Easy Being Green

With Paperless Billing and AutoPay, you
can do your part for the environment,
save time and save on stamps.

Visit www.verizonwireless.com/myverizon.

Our records indicate your account is past due. Please send payment now to avoid service disruption.

Pay from Wireless

Pay on the Web

Questions:

#PMT (#768)

My Verizon at www.verizonwireless.com

1.800.922.0204 or *611 from your wireless



703 CRANBERRY WOODS DR.
CRANBERRY TWP., PA 16066

Manage Your Account

Account Number

Date Due

My Verizon at www.verizonwireless.com

220819251-00001

Past Due

Invoice Number

6288719339

10021926 01 AT 0.357 **AUTO T8 0 5310 16866-111008 1 3 E PTT1012



JENNIFER KAISER
408 N ELEVENTH ST
PHILIPSBURG, PA 16866-1110

Quick Bill Summary

Jun 11 - Jul 10

Previous Balance (see back for details)	\$271.01
Payment - Thank You	-\$132.15
Balance Forward Due Immediately	\$133.86
Account Charges and Credits	
Includes Late Fee of \$5.00	\$5.00
Monthly Access Charges	\$116.76
Usage Charges	
Voice	\$.00
Data	\$.00
Verizon Wireless' Surcharges and Other Charges & Credits	\$3.22
Taxes, Governmental Surcharges & Fees	\$7.57
Total Current Charges Due by August 05, 2009	\$137.55

Total Amount Due

\$276.41

Verizon Wireless News

Save Time with Auto Bill Pay

Pay your bills automatically every month,
and never be late on a payment again!
It's easy to enroll in Auto Bill Pay. See
back of Payment Coupon below for
details.

Our records indicate your account is past due. Please send payment now to avoid service disruption.

Pay from Wireless	Pay on the Web	Questions:
#PMT (#768)	My Verizon at www.verizonwireless.com	1.800.922.0204 or *611 from your wireless



700 CRANBERRY WOODS DR.
CRANBERRY TWP., PA 16066

Manage Your Account

My Verizon at www.verizonwireless.com

Account Number

Date Due

2208 1925 1 0000 1

09/05/09

Invoice Number

6302212242

10021881 01 AT 0.357 **AUTO T9 1 4410 16866-111008 1 E PITT1012



JENNIFER KAISER
408 N ELEVENTH ST
PHILIPSBURG, PA 16866-1110

Quick Bill Summary

Jul 11 – Aug 10

Previous Balance <i>(see back for details)</i>	\$276.41
Payment – Thank You	-\$277.00
Credit Balance	-\$0.59
Monthly Access Charges	\$116.76
Usage Charges	
Voice	\$0.00
Data	\$0.00
Verizon Wireless' Surcharges and Other Charges & Credits	\$8.22
Taxes, Governmental Surcharges & Fees	\$7.57
Total Current Charges	\$132.55

Verizon Wireless' Tips

Save Time with Auto Bill Pay

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and never be late on a payment again!
It's easy to enroll in Auto Bill Pay. See
back of Payment Coupon below for
details.

Total Charges Due by September 05, 2009

\$131.96

Pay from Wireless

Pay on the Web

Questions:

#PMT (#700)

My Verizon at www.verizonwireless.com

1-800-922-0204 or 611 from your wireless



700 CRANBERRY WOODS DR.
CRANBERRY TWP., PA 16066

Manage Your Account

Account Number

Date Due

My Verizon at www.verizonwireless.com

220819251-00001

Past Due

Invoice Number

6315665444

63010680 01 AT 0.357 **AUTO T3 0 4510 16866-111008 12 E FTT1012



JENNIFER KAISER
408 N ELEVENTH ST
PHILIPSBURG, PA 16866-1110

Quick Bill Summary

Aug 11 – Sep 10

Previous Balance (see back for details)	\$131.96
No Payment Received	\$0.00
Balance Forward Due Immediately	\$131.96

Account Charges and Credits	
Includes Late Fee of \$5.00	\$5.00
Monthly Access Charges	\$116.76
Usage Charges	
Voice	\$0.00
Data	\$3.98

Verizon Wireless' Surcharges and Other Charges & Credits	\$8.22
Taxes, Governmental Surcharges & Fees	\$7.57
Total Current Charges Due by October 05, 2009	\$141.53

Total Amount Due **\$273.49**

Verizon Wireless News

Save Time with Auto Bill Pay

Pay your bills automatically every month,
and never be late on a payment again!
It's easy to enroll in Auto Bill Pay. See
back of Payment Coupon below for
details.

Our records indicate your account is past due. Please send payment now to avoid service disruption.

Pay from Wireless

Pay on the Web

Questions:

#PMT (#768)

My Verizon at www.verizonwireless.com

1.800.922.0204 or *611 from your wireless

700 CRANBERRY WOODS DR.
CRANBERRY TWP., PA 16066

Manage Your Account

My Verizon at www.verizonwireless.com

Account Number

Date Due

220819251-00001

11/05/09

Invoice Number

6329054334

13027700 01 AT 0.357 **AUTO **9 0 4310 15366-11003 12 E PMT1011

|||||

JENNIFER KA SER
408 N ELEVENTH ST
PHILIPSBURG, PA 16866-1110

Quick Bill Summary

Sep 11 - Oct 10

Previous Balance <i>(see back for details)</i>	\$273.49
Payments - Thank You	-\$273.49
Balance Forward	\$0.00
Monthly Access Charges	\$116.73
Usage Charges	
Voice	\$0.00
Data	\$1.99
Verizon Wireless' Surcharges and Other Charges & Credits	\$3.10
Taxes, Governmental Surcharges & Fees	\$7.56
Total Current Charges	\$134.41

Total Charges Due by November 05, 2009 \$134.41

Verizon Wireless News

Save Time with Auto Bill Pay

Pay your bills automatically every month,
and never be late on a payment again!
It's easy to enroll in Auto Bill Pay. See
back of Payment Coupon below for
details.

Pay from Wireless

#PMT (#768)

Pay on the Web

My Verizon at www.verizonwireless.com

Questions:

1.800.922.0204 or *611 from your wireless



700 CRANBERRY WOODS DR.
CRANBERRY TWP., PA 16066

Manage Your Account

My Verizon at www.verizonwireless.com

Account Number

Date Due

220819251-00001

12/05/09

Invoice Number

6342391280

10021727 01 A- C.357 **AUTO TO 0 4710 13866-111008 12 E FITT1012



JENNIFER KAISER
408 N ELEVENTH ST
PHILIPSBURG PA 16855-1110

Quick Bill Summary

Oct 11 - Nov 10

Previous Balance (see back for details)	\$134.41
Payment - Thank You	-\$134.41
Balance Forward	\$0.00
Monthly Access Charges	\$116.76
Usage Charges	
Voice	\$0.00
Data	\$0.00
Verizon Wireless' Surcharges and Other Charges & Credits	\$8.10
Taxes, Governmental Surcharges & Fees	\$7.56
Total Current Charges	\$132.42

Total Charges Due by December 05, 2009 \$132.42

Save Time with Auto Bill Pay

Pay your bills automatically every month,
and never be late on a payment again!
It's easy to enroll in Auto Bill Pay. See
back of Payment Coupon, below for
details.

Pay from Wireless

Pay on the Web

Questions:

#PMT (#768)

My Verizon at www.verizonwireless.com

1.800.922.0204 or *611 from your wireless



700 CRAWBERRY WOODS DR.
CRAWBERRY TWP., PA 16066

Manage Your Account

My Verizon at www.verizonwireless.com

Account Number

Date Due

220819251-00001 Past Due

Invoice Number

6355714369

1C021ES0 01 AT 0.357 **AUTO T7 0 4810 16866-111020 1 E PITT1012

|||||

JENNIFER KAISER
420 N 11TH ST
PILPSBURG PA 16836-1110

Quick Bill Summary

Nov 11 - Dec 10

Previous Balance <i>(see back for details)</i>	\$132.42
No Payment Received	\$0.00
Balance Forward Due Immediately	\$132.42

Account Charges and Credits

Includes Late Fee of \$5.00	\$5.00
Monthly Access Charges	\$116.76
Usage Charges	
Voice	\$0.00
Data	\$9.99
Verizon Wireless' Surcharges and Other Charges & Credits	\$8.10
Taxes, Governmental Surcharges & Fees	\$7.56
Total Current Charges Due by January 05, 2011	\$147.41

Save Time with Auto Bill Pay

Pay your bills automatically every month,
and never be late on a payment again!
It's easy to enroll in Auto Bill Pay. See
back of Payment Coupon below for
details.

Total Amount Due **\$279.83**

Our records indicate your account is past due. Please send payment now to avoid service disruption.

Pay from Wireless

Pay on the Web

Questions:

MT # 769

My Verizon at www.verizonwireless.com

1-800-922-0204 or 1-800-451-1111 from your wireless



February 16, 2009

Account Number: 01-33002

Billing Cycle: February through October

8 Installments Remaining: March through October

See back of statement for a record of payments received in this billing cycle.

JENNIFER & SCOTT KAISER
KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-0000

Billing Summary

Total due last month.....	134.00
---------------------------	--------

Total paid last month.....	-134.00
----------------------------	---------

Amount Past Due00
-----------------------	-----

This month's installment	135.00
--------------------------------	--------

Please Pay 135.00

Due Date..... 03-01-09

Please call your Agent listed below if you have any questions about your billing statement.

AA4332

HRENKO INS AGENCY, INC.

814-342-5204

Policy Number	Type of Policy	Previous Balance	PREMIUM TRANSACTIONS SINCE LAST STATEMENT			Payments received since last statement		Current Balance
			Date	Transaction Type	Amount	Amount	Date	
Q020131183	Comm Auto	902.00				-100.00	02-06	802.00
Q260101182	Gen Liab	304.00	02-08	Service Charge	5.00	-34.00	02-06	275.00
ACCOUNT TOTALS		1206.00			5.00	-134.00		1077.00

Transactions occurring in the last 10 days may not appear on this statement.

RETURNED PAYMENT FEES WILL BE ADDED TO YOUR ACCOUNT.

KEEP THIS PORTION FOR YOUR RECORDS

Thank you HRENKO INS AGENCY, INC. (AA4332)
HRENKO INSURANCE AGENCY INC
P O BOX 29
PHILIPSBURG PA 16866

Received by:

[illegible]

June 5, 2009

Account Number: 01-33002

Billing Cycle: February through October

4 Installments Remaining: July through October

See back of statement for a record of payments received in this billing cycle.

JENNIFER KAISER
KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Billing Summary

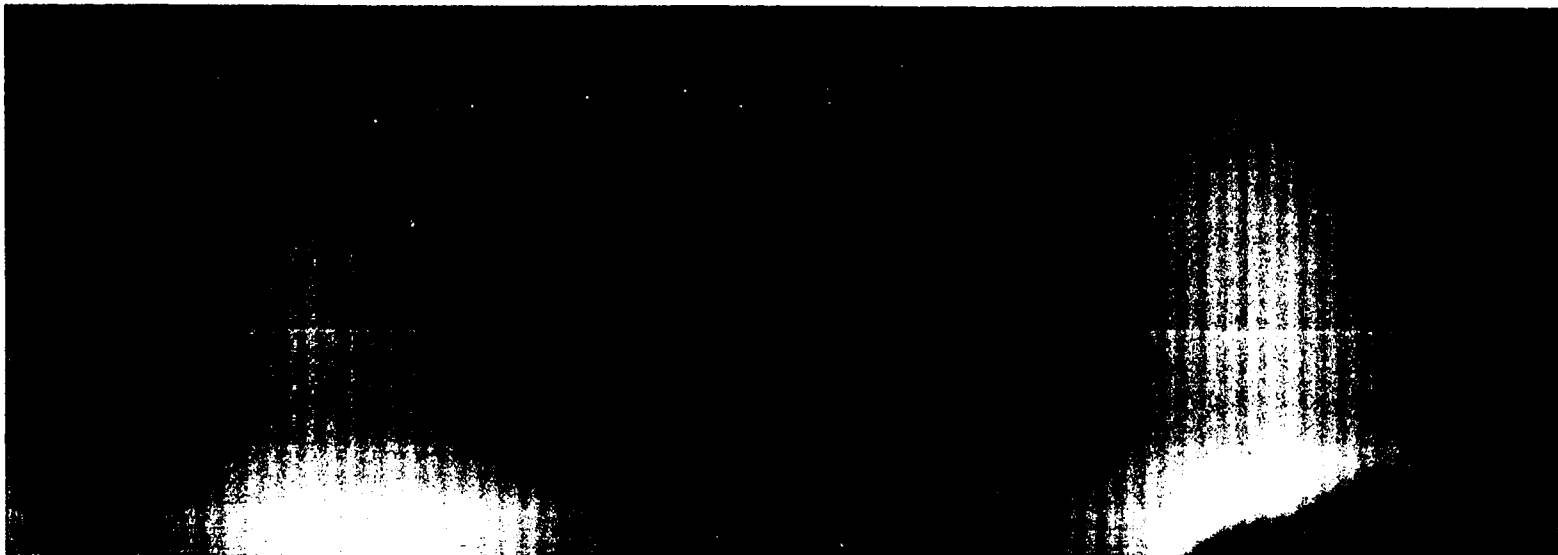
Total due last month.....	125.00
Total paid last month.....	-125.00
Amount Past Due.....	.00
This month's installment.....	126.00
Please Pay	126.00
Due Date.....	07-01-09

Please call your Agent listed below if you have any questions about your billing statement.

AA4332
HRENKO INS AGENCY, INC.
814-342-5204

Policy Number	Type of Policy	Previous Balance	PREMIUM TRANSACTIONS SINCE LAST STATEMENT			Payments received since last statement		Current Balance
			Date	Transaction Type	Amount	Amount	Date	
Q020131183	Comm Auto	452.00	06-07	Service Charge	5.00	-91.00	05-20	366.00
Q260101182	Gen Liab	172.00				-34.00	05-20	138.00
ACCOUNT TOTALS		624.00			5.00	-125.00		504.00

Transactions occurring in the last 10 days may not appear on this statement.
RETURNED PAYMENT FEES WILL BE ADDED TO YOUR ACCOUNT.
KEEP THIS PORTION FOR YOUR RECORDS



July 10, 2009

Account Number: 01-33002

Billing Cycle: February through October

3 Installments Remaining: August through October

See back of statement for a record of payments received in this billing cycle.

JENNIFER KAISER
KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Billing Summary

Total due last month.....	126.00
Total paid last month.....	-126.00
Amount Past Due.....	.00
This month's installment.....	128.00
Please Pay	128.00
Due Date.....	08-01-09

Please call your Agent listed below if you have any questions about your billing statement.

AA4332
HRENKO INS AGENCY, INC.
814-342-5204

Policy Number	Type of Policy	Previous Balance	PREMIUM TRANSACTIONS SINCE LAST STATEMENT			Payments received since last statement		Current Balance
			Date	Transaction Type	Amount	Amount	Date	
Q020131183	Comm Auto	366.00	07-12	Service Charge	5.00	-92.00	06-17	279.00
Q260101182	Gen Liab	138.00				-34.00	06-17	104.00
ACCOUNT TOTALS		504.00			5.00	-126.00		383.00

Transactions occurring in the last 10 days may not appear on this statement.

RETURNED PAYMENT FEES WILL BE ADDED TO YOUR ACCOUNT.

01797

KEEP THIS PORTION FOR YOUR RECORDS

PLEASE RETURN THIS PORTION WITH YOUR PAYMENT

August 7, 2009

Account Number: 01-33002

Billing Cycle: February through October

2 Installments Remaining: September through October

See back of statement for a record of payments received in this billing cycle.

JENNIFER KAISER
KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Billing Summary

Total due last month.....	128.00
Total paid last month.....	-128.00
Amount Past Due.....	.00
This month's installment.....	130.00
Please Pay	130.00
Due Date.....	09-01-09

Please call your Agent listed below if you have any questions about your billing statement.

AA4332
HRENKO INS AGENCY, INC.
814-342-5204

Policy Number	Type of Policy	Previous Balance	PREMIUM TRANSACTIONS SINCE LAST STATEMENT			Payments received since last statement		Current Balance
			Date	Transaction Type	Amount	Amount	Date	
Q020131183	Cmm Auto	279.00	08-39	Service Charge	5.00	-93.00	07-22	191.00
Q260101182	Gen Liab	104.00				-35.00	07-22	69.00
ACCOUNT TOTALS		383.00			5.00	-128.00		260.00

September 4, 2009

Account Number: 01-33002

Billing Cycle: February through October

1 Installments Remaining: October

See back of statement for a record of payments received in this billing cycle.

JENNIFER KAISER
KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Billing Summary

Total due last month.....	130.00
Total paid last month.....	-130.00
Amount Past Due.....	.00
This month's installment.....	135.00
Please Pay	135.00
Due Date.....	10-01-09

Please call your Agent listed below if you have any questions about your billing statement.

AA4332
HRENKO INS AGENCY, INC.
814-342-5204

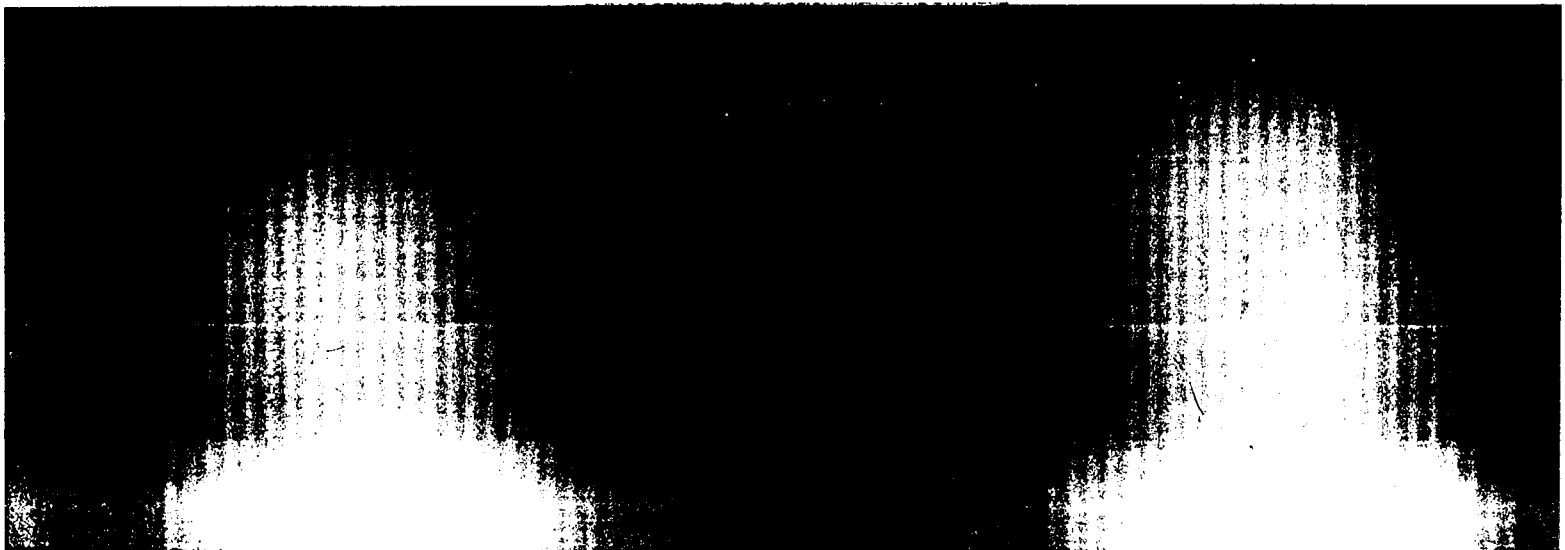
Policy Number	Type of Policy	Previous Balance	PREMIUM TRANSACTIONS SINCE LAST STATEMENT			Payments received since last statement		Current Balance
			Date	Transaction Type	Amount	Amount	Date	
Q020131183	Comm Auto	191.00	09-06	Service Charge	5.00	-95.00	08-19	101.00
Q260101182	Gen Liab	69.00				-35.00	08-19	34.00
ACCOUNT TOTALS		260.00			5.00	-130.00		135.00

Transactions occurring in the last 10 days may not appear on this statement.

RETURNED PAYMENT FEES WILL BE ADDED TO YOUR ACCOUNT.

01784

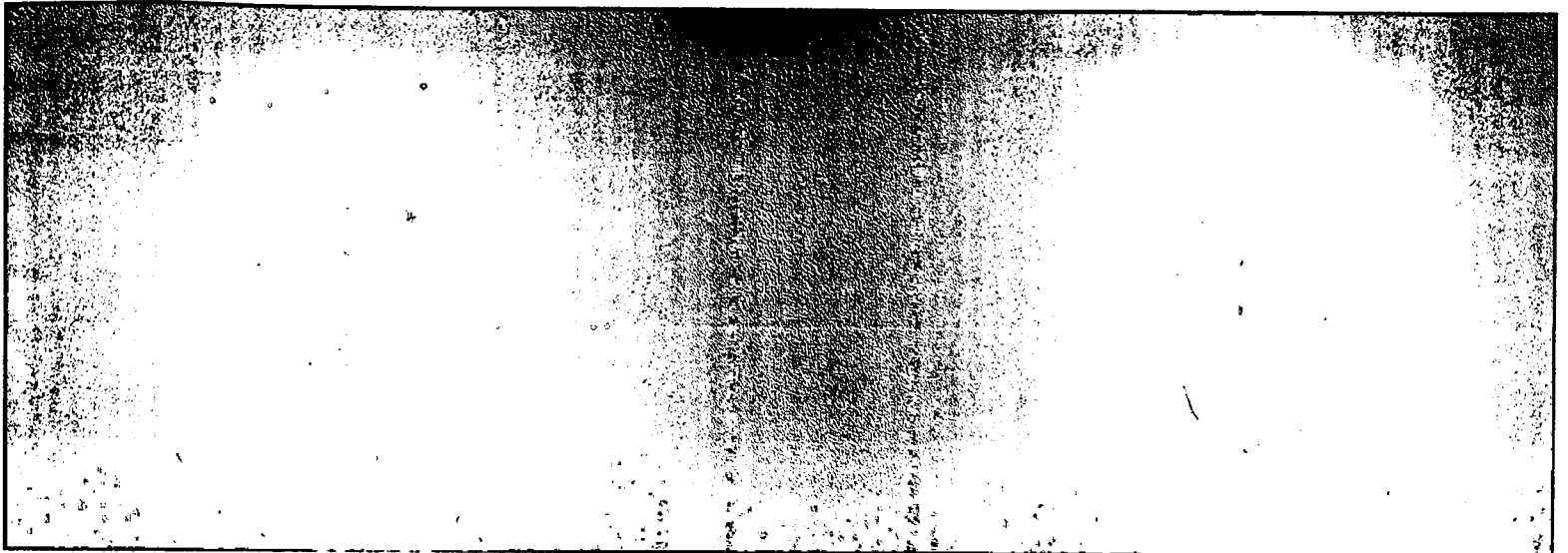
KEEP THIS PORTION FOR YOUR RECORDS





PAYMENT TRANSACTIONS IN THIS BILLING CYCLE

TRANSACTION	AMOUNT	DATE	TRANSACTION	AMOUNT	DATE	TRANSACTION	AMOUNT	DATE
Payment	-134.00	02-06-09						
Payment	-135.00	02-20-09						
Payment	-123.00	03-27-09						
Payment	-124.00	05-06-09						
Payment	-125.00	05-20-09						
Payment	-126.00	06-17-09						
Payment	-128.00	07-22-09						
Payment	-130.00	08-19-09						



PLACE AN "L" NEXT TO THE DATE/MILEAGE WITH A LOADED VEHICLE

	DATE	START MILEAGE	END MILEAGE	DATE	START MILEAGE	END MILEAGE	
	1-1	136255	136257	Feb 19	137384	137389	
	1-2	136257	136438	Feb 19	137389	137484	
(L)	JAN 2	136438	136602	Feb 19	137484	137589	(L)
	JAN 2	136602	136630	Feb 19	137589	137600	
	JAN 7	136633	136651	Feb 28	137600	137619	
(L)	JAN 11	136651	136710	Feb 28	137619	137662	(L)
	JAN 11	136710	136750	Feb 28	137662	137689	
	JAN 14	136750	136751	MAR 3	137689	137716	
(L)	JAN 14	136751	136762	MAR 3	137716	137746	(L)
	JAN 14	136762	136794	MAR 3	137746	137750	
	JAN 19	136774	136793	MAR 3	137750	137753	
(L)	JAN 19	136793	136812	MAR 5	137753	137759	(L)
	JAN 19	136812	136824	MAR 5	137759	137760	
	24 JAN	136824	136845	MAR 5	137760	137772	
(L)	24 JAN	136845	136861	MAR 5	137772	137782	(L)
	24 JAN	136861	136865	MAR 6	137782	137800	
	JAN 25	136865	136884	MAR 6	137800	137814	
(L)	JAN 25	136884	136900	MAR 6	137814	137819	(L)
	JAN 25	136900	136905	MAR 7	137819	137838	
	JAN 30	136905	136924	MAR 7	137838	137882	
(L)	JAN 30	136924	136940	MAR 7	137882	137909	(L)
	JAN 30	136940	136945	MAR 8	137909	137935	
	Feb 5	136945	136964	MAR 8	137935	137964	
(L)	Feb 5	136964	136980	MAR 8	137964	137969	(L)
	Feb 5	136980	136984	MAR 8	137969	137974	
	Feb 6	136984	137010	MAR 8	137974	137979	
	Feb 7	137010	137027	MAR 8	137979	137997	
(L)	Feb 7	137027	137046	MAR 8	137997	138041	(L)
	Feb 7	137046	137057	MAR 8	138041	138051	
	Feb 13	137057	137074	MAR 8	138051	138091	
(L)	Feb 13	137074	137087	MAR 8	138091	138110	(L)
	Feb 13	137087	137091	MAR 9	138110	138150	
	Feb 16	137091	137132	MAR 9	138150	138230	
(L)	Feb 16	137132	137211	MAR 9	138230	138270	(L)
	Feb 16	137211	137251	MAR 10	138270	138289	
	Feb 16	137251	137268	MAR 10	138289	138305	
(L)	Feb 16	137268	137288	MAR 10	138305	138309	(L)
	Feb 16	137288	137299	MAR 14	138309	138350	
	Feb 17	137299	137337	MAR 14	138350	138415	
(L)	Feb 17	137337	137367	MAR 14	138415	138446	(L)
	Feb 17	137367	137378	MAR 15	138446	138473	
	Feb 19	137378	137379	MAR 15	138473	138547	
(L)	Feb 19	137379	137384	MAR 15	138547	138595	(L)

2009 OLDSMOBILE SILHOUETTE

PLACE AN "L" NEXT TO THE DATE/MILEAGE WITH A LOADED VEHICLE

~~6-3~~

	DATE	START MILEAGE	END MILEAGE	DATE	START MILEAGE	END MILEAGE
	MAR 16	138595	138604	MAR 19	140424	
①	MAR 16	138604	138609	21 MAR 09	140428	140428
	MAR 16	138609	138620	03 JUNE	140428	140447
②	MAR 22	138620	138645	3 JUNE	140447	140505
	MAR 22	138645	138675	3 JUNE	140505	140546
	MAR 22	138675	138679	9 JUNE	140546	140550
	MAR 31	138679	138698	9 JUNE	140550	140597
	MAR 31	138698	138714	9 JUNE	140597	140647
	MAR 31	138714	138718	11 JUNE	140647	140666
	APR 5	138718	138737	11 JUNE	140666	140682
③	APR 5	138737	138795	11 JUNE	140682	140687
	APR 5	138795	138834	12 JUNE	140687	140706
	APR 8	138834	138836	12 JUNE	140706	140764
	APR 8	138836	138841	12 JUNE	140764	140804
	APR 8	138841	138845	15 JUNE	140804	140824
④	APR 11	138845	138880	15 JUNE	140824	140840
	APR 11	138880	138950	15 JUNE	140840	140847
	APR 11	138950	138976	15 JUNE	140847	140865
	APR 15	138976	138995	15 JUNE	140865	140882
⑤	APR 15	138995	139015	15 JUNE	140882	140886
	APR 15	139015	139026	25 JUNE	140886	140923
	APR 16	139026	139045	25 JUNE	140923	140962
⑥	APR 16	139045	139103	25 JUNE	140962	140967
	APR 16	139103	139143	28 JUNE	140967	141007
	APR 16	139143	139183	28 JUNE	141007	141072
⑦	APR 16	139183	139227	28 JUNE	141072	141082
	APR 16	139227	139231	28 JUNE	141082	141147
	APR 23	139231	139267	28 JUNE	141147	141202
⑧	APR 23	139267	139307	28 JUNE	141202	141321
	APR 23	139307	139313	3 JULY	141321	141340
	MAY 2	139313	139353	3 JULY	141340	141359
⑨	MAY 2	139353	139432	3 JULY	141359	141370
	MAY 2	139432	139472	17 JULY	141370	141389
	13 MAY	139472	139510	17 JULY	141389	141405
⑩	13 MAY	139510	139553	17 JULY	141405	141410
	13 MAY	139553	139557	19 JULY	141410	141429
	MAY 15	139557	139769	19 JULY	141429	141487
⑪	MAY 15	139769	139972	19 JULY	141487	141527
	MAY 15	139972	139988	19 JULY	141527	
	MAY 16	139988	140029			
⑫	MAY 16	140029	140233			
	MAY 16	140233	140419			
	MAY 20	140419	140423			

2009 OLDSMOBILE SILHOUETTE

PLACE AN "L" NEXT TO THE DATE/MILEAGE WITH A LOADED VEHICLE

DATE	START MILEAGE	END MILEAGE	DATE	START MILEAGE	END MILEAGE	
July 30	141527	141545	26 Sept	143331	143360	(L)
July 30	141545	141561	26 Sept	143360	143366	
July 30	141561	141566	5 OCT	143366	143487	
Aug 1	141566	141606	5 OCT	143487	143643	(L)
Aug 1	141606	141671	5 OCT	143643	143684	
Aug 1	141671	141690	10 OCT	143684	143701	
Aug 1	141690	141755	10 OCT	143701	143744	(L)
Aug 1	141755	141795	10 OCT	143744	143770	
Aug 4	141795	141802	18 OCT	143770	143788	
Aug 5	141802	141821	18 OCT	143788	143832	(L)
Aug 5	141821	141840	18 OCT	143832	143857	
Aug 5	141840	141851	20 OCT	143857	143878	
Aug 7	141851	141856	20 OCT	143878	143962	(L)
Aug 16	141856	141872	20 OCT	143962	143988	
Aug 16	141872	141931	21 OCT	143988	144013	
Aug 16	141931	141972	21 OCT	144013	144078	(L)
Aug 18	141972	141973	21 OCT	144078	144117	
Aug 18	141973	141984	22 OCT	144117	144121	
Aug 18	141984	141995	24 OCT	144121	144125	
Aug 25	141995	142016	24 OCT	144125	144154	(L)
Aug 25	142016	142074	24 OCT	144154	144182	
Aug 25	142074	142114	25 OCT	144182	144207	
Aug 25	142114	142156	25 OCT	144207	144213	(L)
Aug 25	142156	142200	25 OCT	144213	144250	
Aug 25	142200	142204	31 OCT	144250	144267	
31 AUG 09	142204	142251	31 OCT	144267	144291	(L)
31 AUG 09	142251	142528	31 OCT	144291	144302	
31 AUG 09	142528	142776	11 NOV	144302	144343	
01 SEP 09	142776	142789	11 NOV	144343	144422	(L)
03 SEP 09	142789	142793	11 NOV	144422	144486	
12 SEPT	142793	142834	11 NOV	144486	144528	
12 SEPT	142834	142899	11 NOV	144528	144608	(L)
12 SEPT	142899	142924	11 NOV	144608	144648	
13 SEPT	142924	142951	17 NOV	144648	144694	
13 SEPT	142951	143018	17 NOV	144694	144773	(L)
13 SEPT	143018	143061	17 NOV	144773	144798	
18 SEPT	143061	143080	17 NOV	144798	144823	
18 SEPT	143080	143138	17 NOV	144823	144902	(L)
18 SEPT	143138	143178	17 NOV	144902	144941	
18 SEPT	143178	143219	25 NOV	144941	144956	
18 SEPT	143219	143282	25 NOV	144956	144964	(L)
18 SEPT	143282	143306	25 NOV	144964	144979	
26 SEPT	143306	143331	25 NOV	144979		

2009 OLDSMOBILE SILHOUETTE

****PLACE AN "L" NEXT TO THE DATE/MILEAGE WITH A LOADED VEHICLE****

DATE	START MILEAGE	END MILEAGE	DATE	START MILEAGE	END MILEAGE
12-13	144979	144981			
12-13	144981	144993			
12-13	144993	145003			
12-15	145003	145022			
12-15	145022	145081			
12-15	145081	145121			
12-18	145121	145161			
12-18	145161	145226			
12-18	145226	145252			
12-20	145252	145360			
12-20	145360	145508			
12-20	145508	145548			
12-21	145548	145553			
12-22	145553	145578			
12-22	145578	145626			
12-22	145626	145661			
12-25	145661	145680			
12-25	145680	145699			
12-25	145699	145710			
25 DEC 29	145710				

2009 OLDSMOBILE SILHOUETTE

Direct Inquiries to:
800 492-3221



MEMBER FDIC

CNB Bank
25 Irwin Dr
Philipsburg PA 16866

Return Service Requested

CTYN

February 28, 2009

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010366 0.8920 AV 0.324 TR00042

JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Statement of Accounts
2437754

Summary of Account Balances

<i>Account</i>	<i>Number</i>	<i>Ending Balance</i>
Positively Free Small Business	0002437754	\$1,211.63

CTYN-003-010366-001-002-090302 010366 S03
16866111008

OR TO ASCERTAIN WHETHER A PREAUTHORIZATION TRANSFER HAS BEEN MADE

TELEPHONE US AT: 1-800-492-3221 WRITE US AT: CNB BANK, E.F.T., P.O. BOX 42, CLEARFIELD, PA 16830

As soon as possible if you believe your statement is incorrect or if you need more information about a transfer listed on your statement or receipt.

We must hear from you no later than 60 days after we sent the first statement on which the problem or error appeared.

You must tell us:

1. Your name and account number.
2. Describe the error or the transfer you are unsure about and explain as clearly as you can why you believe it is an error or why you need more information.
3. The dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you believe is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

PRIVACY DISCLOSURE

Protecting your privacy is important to us. We want you to understand what information we collect and how we use it. In order to provide our customers with a broad range of financial products and services as effectively and conveniently as possible, we use technology to manage and maintain customer information. "Nonpublic personal information" is information about you that we obtain in connection with providing a financial product or service to you. For example, nonpublic personal information includes information regarding your account balance, payment history and overdraft history.

INFORMATION WE COLLECT ABOUT YOU

We collect nonpublic personal information about you from the following sources:

- Information we receive from you on applications or other forms
- Information about your transactions with us, our affiliates, or others,
- Information we receive from a consumer-reporting agency.

NO DISCLOSURES OUTSIDE OF EXCEPTIONS

We do not disclose any nonpublic personal information about our customers or former customers to anyone, except as permitted by law. We may disclose all of the information we collect, as described above to companies that perform marketing services on our behalf or to other financial institutions with whom we have joint marketing agreements.

CONFIDENTIAL AND SECURITY

We restrict access to nonpublic personal information about customers to those employees who need to know that information to provide products or services to customers. We maintain physical, electronic and procedural safeguards that comply with federal standards to guard your nonpublic personal information.

If you decide to close your account(s) or become an inactive customer, we will continue to adhere to the privacy policies and practices described in this notice.

CHECKBOOK RECONCILIATION

CHECKS OUTSTANDING

[illegible]

ENTER BALANCE
(this statement)

1.)

ADD RECENT DEPOSITS
(not credited on this statement)

2.)

TOTAL

3.)

**SUBTRACT CHECKS
OUTSTANDING**

4.)

BALANCE

5.)

Please examine this statement upon receipt and report any differences to the bank. If no differences are reported within 60 days the account will be considered correct.

Statement of Accounts

0002437754

Jennifer L Kaiser

February 28, 2009

Page 2 of 4

Positively Free Small Business 0002437754

Low balance \$1,211.63

Average balance \$1,615.12

5 Enclosures

Date	Description	Additions	Subtractions	Balance
01-31	Beginning balance			\$2,147.05
02-09	Deposit 200.00			2,347.05
02-09	#POS Purchase MERCHANT PURCHASE TERMINAL 434129 CRYSTAL CLEAN AUTO SPA PHILLIPSB PA 4187040000017288 02-06-09		-9.00	2,338.05
02-09	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSBU PA 4187040000017288 02-06-09		-18.00	2,320.05
02-10	#Electronified Check VZ WIRELESS ARC ARC 090210 1175		-463.94	1,856.11
02-10	Check 1177		-134.00	1,722.11
02-11	Deposit 184.00			1,906.11
02-11	Check 1176		-500.00	1,406.11
02-17	#Electronified Check WAL-MART STORES PURCHASE 090217 CITY=CLEA, ST=PA SER #=1178		-3.65	1,402.46
02-18	#POS Purchase MERCHANT PURCHASE TERMINAL 434129 CRYSTAL CLEAN AUTO SPA PHILLIPSB PA 4187040000017288 02-17-09		-9.00	1,393.46
02-18	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSBU PA 4187040000017288 02-17-09		-33.00	1,360.46
02-20	#POS Purchase MERCHANT PURCHASE TERMINAL 442733 MCDONALD S F5342 PHILIPSBU PA		-13.83	1,346.63

Number	Date	Amount
1175	02-10	463.94
1176	02-11	500.00
1177	02-10	134.00
1178	02-17	3.65
1179	02-24	135.00

CTYN-003-010366-001-002-090302 010366 503

Statement of Accounts

0002437754

Jennifer L Kaiser

February 28, 2009

Page 3 of 4

<i>Date</i>	<i>Description</i>	<i>Additions</i>	<i>Subtractions</i>	<i>Balance</i>	<i>Number</i>	<i>Date</i>	<i>Amount</i>
	4187040000017288 02-19-09						
02-24	Check 1179		-135.00	1,211.63			
02-28	Ending totals	384.00	-1,319.42	\$1,211.63			

Direct Inquiries to:
800 492-3221

CNB Bank
25 Irwin Dr
Philipsburg PA 16866



MEMBER FDIC

March 31, 2009

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Page 1 of 4

JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Statement of Accounts
2437754

Summary of Account Balances

<i>Account</i>	<i>Number</i>	<i>Ending Balance</i>
Positively Free Small Business	0002437754	\$275.44

TELEPHONE US AT: 1-800-492-3221 WRITE TO: CNB BANK, E.F.T., P.O. BOX 42, CLEVELAND, PA 16830

We must hear from you no later than 60 days after we sent the first statement on which the problem or error appeared.

You must tell us:

1. Your name and account number.
2. Describe the error or the transfer you are unsure about and explain as clearly as you can why you believe it is an error or why you need more information.
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If you decide to close your account(s) or become an inactive customer, we will continue to adhere to the privacy policies and practices described in this notice.

CHECKBOOK RECONCILIATION

CHECKS OUTSTANDING

DATE OR NUMBER	AMOUNT
TOTAL	4)

ENTER BALANCE
(this statement)

1.)

ADD RECENT DEPOSITS
(not credited on this statement)

2.) _____,

TOTAL

3.)

**SUBTRACT CHECKS
OUTSTANDING**

4.)

BALANCE

5.)

**Please examine this statement upon receipt and report any differences to the bank.
If no differences are reported within 60 days the account will be considered correct.**

Page 2 of 4

Average balance	\$642.89
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					11 Enclosures		
Date	Description	Additions	Subtractions	Balance	Number	Date	Amount
02-28	Beginning balance			\$1,211.63	1031	03-02	277.80
03-02	Deposit 550.00 ✓			1,761.63	1033 *	03-10	167.90
03-02	Check 1031		✓ -277.80	1,483.83	1034	03-11	500.00
03-02	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSBU PA 4187040000017288 02-28-09		✓ -31.00	1,452.83	1035	03-10	3.00
03-04	Check 1180		✓ -200.00	1,252.83	1036	03-09	600.00
03-05	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 FRED DIEHLS OF01940022 PHILIPSBU PA 4187040000017288 03-03-09		✓ -57.03	1,195.80	1037	03-17	737.57
03-06	Deposit 400.00 ✓			1,595.80	1180 *	03-04	200.00
03-09	Deposit 100.00 ✓			1,695.80	1181	03-30	123.42
03-09	Check 1036		✓ -600.00	1,095.80	1182	03-30	123.00
03-09	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 KFC TACO BELL 00203018 PHILIPSBU PA 4187040000017288 03-07-09		✓ -8.05	1,087.75	* Skip in check sequence		
03-09	#POS Purchase MERCHANT PURCHASE TERMINAL 434129 CRYSTAL CLEAN AUTO SPA PHILLIPSB PA 4187040000017288 03-06-09		✓ -9.00	1,078.75			
03-09	#POS Purchase MERCHANT PURCHASE TERMINAL 442513 TEXAS ROADHOUSE 2 283 STATE COL PA 4187040000017288 03-08-09		✓ -19.41	1,059.34			
03-09	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSBU PA 4187040000017288 03-06-09		✓ -24.01	1,035.33			

Statement of Accounts

0002437754

Jennifer L Kaiser

March 31, 2009

Page 3 of 4

<i>Date</i>	<i>Description</i>	<i>Additions</i>	<i>Subtractions</i>	<i>Balance</i>	<i>Number</i>	<i>Date</i>	<i>Amount</i>
03-10	#Electronified Check VZ WIRELESS ARC ARC 090310 1033		✓ -167.90	867.43			
03-10	Check 1035		✓ -3.00	864.43			
03-10	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSBU PA 4187040000017288 03-09-09		✓ -30.00	834.43			
03-11	Check 1034		✓ -500.00	334.43			
03-16	Deposit 600.00	✓		934.43			
03-16	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSBU PA 4187040000017288 03-15-09		✓ -31.00	903.43			
03-17	Check 1037		✓ -737.57	165.86			
03-26	Deposit 356.00	✓		521.86			
03-30	#Electronified Check VZ WIRELESS ARC ARC 090330 1181		✓ -123.42	398.44			
03-30	#Electronified Check ERIE INSURANCE 1256038677 090330 1182		✓ -123.00	275.44			
03-31	Ending totals	2,006.00	-2,942.19	\$275.44			

40000
 40000
 600

[illegible][illegible][illegible][illegible][illegible]

Jennifer L. Kahan
 505 1/2 River Street
 170 Chapel St
 Hartford, CT 06101

1031
 card type

February 2009

NEW TEL: 860-234-1234

Jennifer Kahan
 19 271.80

Two hundred Seventy-Six and 8/100

EINS.com

Driving Services and Insurance
 800-444-4444

Douglas E. Grier
 1925 S. 2nd Street
 117 Grand St.
 Milwaukee, Wis. 53204

TUSA
 16 APR 1974

March 5, 1974

Mr. J. Edgar Hoover
 U.S. Department of Justice
 Washington, D.C. 20535

Re: Stigerson Automobile Fire, Inc. \$500.00
Five hundred and 00/100 \$500.00

I have enclosed a check for the amount of \$500.00.

Sincerely,
 Douglas E. Grier

2713003021
 03-104-278- 2-1-177- 104 35000 35000

[illegible][illegible]

Direct Inquiries to:
800 492-3221

CNB Bank
25 Irwin Dr
Philipsburg PA 16866

Return Service Requested

CNB BANK

MEMBER FDIC

April 30, 2009

6

Page 1 of 3

003800 0.6093 AV 0.324 TR00017

JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Statement of Accounts
2437754

Summary of Account Balances

<i>Account</i>	<i>Number</i>	<i>Ending Balance</i>
Positively Free Small Business	0002437754	\$276.00

CTYN-002-003800-001-001-090501 003800 S06
16866111008

**YOUR ELECTRONIC TRANSFERS
AUTOMATICALLY TRANSFER HAS BEEN MADE**

1000 E. 100th, P.O. BOX 42, CLEARFIELD, PA 16830

If you need more information about a transfer listed on your statement

Indicate the date and time on which the problem or error appeared.

Explain as clearly as you can why you believe it is an error or why

If we are unable to correct the error within 10 business days, we will credit your account for the amount in error and the time it takes us to complete our investigation.

YOUR ACCOUNT INFORMATION

We use the information we collect and how we use it. In order to provide our services to you as efficiently as possible, we use technology to manage and maintain your account. We also use the information that we obtain in connection with providing a financial service to you to provide information regarding your account balance, payment history

or other

We do not share your financial information with anyone, except as permitted by law. We do not share your information with third parties for marketing services on our behalf or to other finan-

We also inform our employees who need to know that information to provide prod-ucts and services to our customers that comply with federal standards to guard your

We will continue to adhere to the privacy policies and practices described

YOUR ACCOUNT RECONCILIATION

**ENTER BALANCE
(this statement)**

1.) _____

**ADD RECENT DEPOSITS
(not credited on this
statement)**

2.) _____

TOTAL

3.) _____

**SUBTRACT CHECKS
OUTSTANDING**

4.) _____

BALANCE

5.) _____

If you have any differences to the bank,

please contact us at the number provided.

Statement of Accounts

0002437754

Jennifer L Kaiser

April 30, 2009

Page 2 of 3

Positively Free Small Business 0002437754

Low balance \$230.92

Average balance \$591.45

6 Enclosures

Date	Description	Additions	Subtractions	Balance
03-31	Beginning balance			\$275.44
04-03	Check 1038		-44.52	230.92
04-06	Deposit 220.00			450.92
04-06	#POS Purchase		-28.00	422.92
	MERCHANT PURCHASE TERMINAL 416407			
	SHEETZ 0000 0646 PHILIPSBU PA			
	4187040000017288 04-05-09			
04-14	Deposit 600.00			1,022.92
04-16	Deposit 100.00			1,122.92
04-17	#POS Purchase		-31.00	1,091.92
	MERCHANT PURCHASE TERMINAL 416407			
	SHEETZ 0000 0646 PHILIPSBU PA			
	4187040000017288 04-16-09			
04-20	Check 1183		-435.22	656.70
04-24	#POS Purchase		-28.50	628.20
	MERCHANT PURCHASE TERMINAL 416407			
	SHEETZ 0000 0646 PHILIPSBU PA			
	4187040000017288 04-23-09			
04-30	Check 1032		-352.20	276.00
04-30	Ending totals	920.00	-919.44	\$276.00

Number	Date	Amount
1032	04-30	352.20
1038 *	04-03	44.52
1183 *	04-20	435.22

* Skip in check sequence

CTYN-002-003800-001-001-090501 003800 S06

[illegible]

04/06/2009 \$220.00

[illegible]

04/14/2009 \$600.00

[illegible]

04/16/2009 \$100.00

[illegible]

#1032 04/30/2009 \$352.20

[illegible]

#1038 04/03/2009 \$44.52

American L. Express
 1270212, 2nd of 3 attempts
 486 71118 0
 Philadelphia PA 19101

1183
 11/18/87

April 20, 1987

Re: Citizens Outgrowth - France, Inc. 3 435.23
 from hundred & thirty-five and 3/100 ~~one~~ 0 0 0

ECD:JAM
 100-100000-35721

a713025131

001110027700 3-11775-L
 1183 100000-35721

#1183 04/20/2009 \$435.22

Direct Inquiries to:
800 492-3221



MEMBER FDIC

CNB Bank
25 Irwin Dr
Philipsburg PA 16866

Return Service Requested

CTYN

May 31, 2009

6

Page 1 of 4

010410 0.7686 AV 0.335 TR00040

JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Statement of Accounts
2437754

Summary of Account Balances

<i>Account</i>	<i>Number</i>	<i>Ending Balance</i>
Positively Free Small Business	0002437754	\$392.04

The topic of privacy is an important matter, one that has the attention of everyone who deals with personal information. We are committed to protecting your nonpublic personal information. Please take a few minutes to read our Privacy Disclosure which is located on the back of your statement.

CTYN-003-010410-001-002-090601 010410 S04
16866111008

TELEPHONE US AT: 1-800-492-3221 WRIT [REDACTED] AT: CNB BANK, E.F.T., P.O. BOX 42, CLE [REDACTED] ELDT, PA 16830

We must hear from you no later than 60 days after we sent the first statement on which the problem or error appeared.

1. Your name and account number.
2. Describe the error or the transfer you are unsure about and explain as clearly as you can why you believe it is an error or why you need more information.
3. The dollar amount of the suspected error.

PRIVACY DISCLOSURE

INFORMATION WE COLLECT ABOUT YOU

- Information we receive from you on applications or other forms.
- Information about your transactions with us, our affiliates, or others.
- Information we receive from a consumer-reporting agency.

We do not disclose any nonpublic personal information about our customers or former customers to anyone, except as permitted by law. We may disclose all of the information we collect, as described above to companies that perform marketing services on our behalf or to other financial institutions with whom we have joint marketing agreements.

We restrict access to nonpublic personal information about customers to those employees who need to know that information to provide products or services to customers. We maintain physical, electronic and procedural safeguards that comply with federal standards to guard your nonpublic personal information.

CHECKBOOK RECONCILIATION

DATE OR NUMBER	AMOUNT
TOTAL	4)

1.)

2.)

3.)

4.)

5.)

CTVN

Statement of Accounts

0002437754

Jennifer L Kaiser

May 31, 2009

Page 2 of 4

Positively Free Small Business 0002437754

Low balance \$173.31

Average balance \$417.10

6 Enclosures

Date	Description	Additions	Subtractions	Balance	Number	Date	Amount
04-30	Beginning balance			\$276.00	1184	05-05	134.14
05-04	Deposit 940.00			1,216.00	1185	05-07	124.00
05-05	#Electronified Check VZ WIRELESS ARC ARC 090505 1184		-134.14	1,081.86	1186	05-06	670.44
					1187	05-22	17.60
05-06	Check 1186		-670.44	411.42	1188	05-22	125.00
05-07	#Electronified Check ERIE INSURANCE 1256038677 090507 1185		-124.00	287.42	1189	05-26	91.67
05-14	#POS Purchase MERCHANT PURCHASE TERMINAL 405523 COUNTRY CONVENIENCE MORRISDAL PA 4187040000017288 05-13-09		-27.00	260.42			
05-18	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0968 RIDGWAY PA 4187040000017288 05-15-09		-4.10	256.32			
05-18	#POS Purchase MERCHANT PURCHASE TERMINAL 434129 CRYSTAL CLEAN AUTO SPA PHILLIPSB PA 4187040000017288 05-15-09		-9.00	247.32			
05-18	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 WAWA 275 0000 2758 LANCASTER PA 4187040000017288 05-16-09		-36.01	211.31			
05-18	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0968 RIDGWAY PA 4187040000017288 05-15-09		-38.00	173.31			
05-19	Deposit 453.00			626.31			
05-22	Check 1187		-17.60	608.71			

CTYN-003-010410-001-002-090601 010410 S04

Statement of Accounts

0002437754

Jennifer L Kaiser

May 31, 2009

Page 3 of 4

<i>Date</i>	<i>Description</i>	<i>Additions</i>	<i>Subtractions</i>	<i>Balance</i>	<i>Number</i>	<i>Date</i>	<i>Amount</i>
05-22	Check 1188		-125.00	483.71			
05-26	Check 1189		-91.67	392.04			
05-31	Ending totals	1,393.00	-1,276.96	\$392.04			

Invoice # 1185
 05/04/2009
 940.00
 940.00

05/04/2009 \$940.00

Invoice # 1186
 05/19/2009
 453.00
 453.00

05/19/2009 \$453.00

Invoice # 1187
 05/06/2009
 5670.44
 5670.44

#1186 05/06/2009 \$670.44

Invoice # 1187
 05/22/2009
 17.60
 17.60

#1187 05/22/2009 \$17.60

Invoice # 1188
 05/22/2009
 125.00
 125.00

#1188 05/22/2009 \$125.00

Invoice # 1189
 05/26/2009
 91.67
 91.67

#1189 05/26/2009 \$91.67

Direct Inquiries to:
800 492-3221



MEMBER FDIC

CNB Bank
25 Irwin Dr
Philipsburg, PA 16866

Return Service Requested

CTYN

June 30, 2009

5

Page 1 of 4

003674 0.7686 AV 0.335 TR00017

JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Statement of Accounts
2437754

Summary of Account Balances

<i>Account</i>	<i>Number</i>	<i>Ending Balance</i>
Positively Free Small Business	0002437754	\$900.22

The topic of privacy is an important matter, one that has the attention of everyone who deals with personal information. We are committed to protecting your nonpublic personal information. Please take a few minutes to read our Privacy Disclosure which is located on the back of your statement.

CTYN-003-003674-001-002-090702 003674 S04
16866111008

Statement of Accounts

0002437754

Jennifer L Kaiser

June 30, 2009

Page 2 of 4

Positively Free Small Business 0002437754

Low balance \$386.70

Average balance \$836.39

5 Enclosures

Date	Description	Additions	Subtractions	Balance
05-31	Beginning balance			\$392.04
06-04	#POS Purchase MERCHANT PURCHASE TERMINAL 442733 MCDONALD S F5342 PHILIPSBU PA 4187040000017288 06-03-09		-5.34	386.70
06-05	Deposit 366.00			752.70
06-10	Deposit 126.00			878.70
06-11	#POS Purchase MERCHANT PURCHASE TERMINAL 442733 WEIS MARKETS 118 S PHILIPSBU PA 4187040000017288 06-09-09		-6.77	871.93
06-11	#POS Purchase MERCHANT PURCHASE TERMINAL 412254 SNAPPY 2 TYRONE PA 4187040000017288 06-09-09		-43.00	828.93
06-15	Deposit 806.00			1,634.93
06-15	Check 1191		-341.92	1,293.01
06-15	#Electronified Check VZ WIRELESS ARC ARC 090615 1192		-132.15	1,160.86
06-15	#POS Purchase MERCHANT PURCHASE TERMINAL 418616 BURGER KING 2551 TYRONE PA 4187040000017288 06-12-09		-5.50	1,155.36
06-16	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSBU PA 4187040000017283 06-15-09		-38.00	1,117.36
06-18	Check 1190		-44.52	1,072.84
06-18	#Electronified Check ERIE INSURANCE 1256038677		-126.00	946.84

Number	Date	Amount
1190	06-18	44.52
1191	06-15	341.92
1192	06-15	132.15
1193	06-18	126.00

CTYN-003-003674-001-002-090702 003674 S04

Statement of Accounts

0002437754

Jennifer L Kaiser

June 30, 2009

Page 3 of 4

<i>Date</i>	<i>Description</i>	<i>Additions</i>	<i>Subtractions</i>	<i>Balance</i>	<i>Number</i>	<i>Date</i>	<i>Amount</i>
	090618 1193						
06-26	#POS Purchase		-2.62	944.22			
	MERCHANT PURCHASE TERMINAL 416407						
	SHEETZ 0000 1008 ALTOONA PA						
	4187040000017288 06-25-09						
06-26	#POS Purchase		-9.00	935.22			
	MERCHANT PURCHASE TERMINAL 434129						
	CRYSTAL CLEAN AUTO SPA PHILLIPSB PA						
	4187040000017288 06-25-09						
06-29	#POS Purchase		-35.00	900.22			
	MERCHANT PURCHASE TERMINAL 416407						
	SHEETZ 0000 0646 PHILIPSBU PA						
	4187040000017288 06-28-09						
06-30	Ending totals	1,298.00	-789.82	\$900.22			

NAME: CASH
 ADDRESS:
 CITY:
 STATE:
 ZIP:
 PHONE:
 SIGNATURE:
 DATE:
 CD11305778C 500

06/05/2009 \$366.00

NAME: CASH
 ADDRESS:
 CITY:
 STATE:
 ZIP:
 PHONE:
 SIGNATURE:
 DATE:
 CD11305778C 500

06/10/2009 \$126.00

NAME: CASH
 ADDRESS:
 CITY:
 STATE:
 ZIP:
 PHONE:
 SIGNATURE:
 DATE:
 CD11305778C 500

06/15/2009 \$806.00

NAME: CASH
 ADDRESS:
 CITY:
 STATE:
 ZIP:
 PHONE:
 SIGNATURE:
 DATE:
 CD11305778C 500

#1190 06/18/2009 \$44.52

NAME: CASH
 ADDRESS:
 CITY:
 STATE:
 ZIP:
 PHONE:
 SIGNATURE:
 DATE:
 CD11305778C 500

#1191 06/15/2009 \$341.92

Direct Inquiries to:
800 492-3221



MEMBER FDIC

CNB Bank
25 Irwin Dr
Philipsburg PA 16866
Return Service Requested

CTYN

July 31, 2009

3

Page 1 of 3

003730 0.6093 AV 0.335 TR00017

JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Statement of Accounts
2437754

Summary of Account Balances

<i>Account</i>	<i>Number</i>	<i>Ending Balance</i>
Positively Free Small Business	0002437754	\$822.00

003730



CTYN-002-003730-001-001-090803 003730 S05
16866111008



Statement of Accounts

0002437754

Jennifer L Kaiser

July 31, 2009

Page 2 of 3

Positively Free Small Business 0002437754

Low balance \$376.00

Average balance \$808.74

3 Enclosures

Date	Description	Additions	Subtractions	Balance	Number	Date	Amount
06-30	Beginning balance			\$900.22	1194	07-15	335.22
07-08	Deposit 252.00			1,152.22	1195	07-23	128.00
07-15	Check 1194		-335.22	817.00	1196	07-23	277.00
07-20	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSBU PA 418704000001728E 07-17-09		-36.00	781.00			
07-23	#Electronified Check ERIE INSURANCE 1256038677 090723 1195		-128.00	653.00			
07-23	#Electronified Check VZ WIRELESS ARC ARC 090723 1196		-277.00	376.00			
07-30	Deposit 446.00			822.00			
07-31	Ending totals	698.00	-776.22	\$822.00			

CTYN-002-003730-001-001-090803 003730 S05

NAME	DATE
ADDRESS	
CITY	
STATE	
ZIP	
CNS BANK	
CD111062780	600

07/08/2009 \$252.00

NAME	DATE
ADDRESS	
CITY	
STATE	
ZIP	
CNS BANK	
CD111062780	600

07/30/2009 \$446.00

NAME	DATE
ADDRESS	
CITY	
STATE	
ZIP	
CNS BANK	
CD111062780	600

#1194 07/15/2009 \$335.22

=====

010166

Direct Inquiries to:
800-492-3224



MEMBER FDIC

CTYN

CNB Bank
25 Irwin Dr
Philipsburg PA 16866

Return Service Requested

August 31, 2009

4

Page 1 of 3

010166 0.6093 AV 0.335 TR00039

JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Statement of Accounts
2437754

Summary of Account Balances

<i>Account</i>	<i>Number</i>	<i>Ending Balance</i>
Positively Free Small Business	0002437754	\$463.95

CTYN-002-010166-001-001-090902 010166 504
16866111008



Statement of Accounts

0002437754

Jennifer L Kaiser

August 31, 2009

Page 2 of 3

Positively Free Small Business 0002437754

Low balance \$463.95
Average balance \$892.40

4 Enclosures

Date	Description	Additions	Subtractions	Balance	Number	Date	Amount
07-31	Beginning balance			\$822.00	1197	08-10	178.61
08-03	Deposit 500.00			1,322.00	1198	08-20	663.74
08-03	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 063E DUBOIS PA 4187040000017288 08-01-09		-44.00	1,278.00	1199	08-20	130.00
08-06	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0737 CLEARFIEL PA 4187040000017288 08-05-09		-3.70	1,274.30			
08-10	Check 1197		-178.61	1,095.69			
08-17	#POS Purchase MERCHANT PURCHASE TERMINAL 434129 CRYSTAL CLEAN AUTO SPA PHILLIPSB PA 4187040000017288 08-16-09		-7.00	1,088.69			
08-18	Deposit 200.00			1,288.69			
08-20	Check 1198		-663.74	624.95			
08-20	#Electronified Check ERIE INSURANCE 1256038677 090820 1199		-130.00	494.95			
08-26	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSB PA 4187040000017288 08-25-09		-31.00	463.95			
08-31	Ending totals	700.00	-1,058.05	\$463.95			

CTYN-002-010166-001-001-090902 010166 S04

NAME: Levy Transport DATE: 08/03/09
 A/C NO: 21377-54
 CNB BANK
 \$ 500.00
 (CU 1106 2700 2-4375-10)

08/03/2009 \$500.00

NAME: Levy Transport DATE: 08/18/09
 A/C NO: 21377-54
 CNB BANK
 \$ 200.00
 (CU 1106 2700 2-4375-10)

08/18/2009 \$200.00

NAME: Levy Transport DATE: August 1, 2009
 A/C NO: 21377-54
 CNB BANK
 \$ 178.61
 (CU 1106 2700 2-4375-10)

#1197 08/10/2009 \$178.61

NAME: Levy Transport DATE: August 20, 2009
 A/C NO: 21377-54
 CNB BANK
 \$ 663.74
 (CU 1106 2700 2-4375-10)

#1198 08/20/2009 \$663.74

Direct Inquiries to:
800 492-322



MEMBER FDIC

CNB Bank
25 Irwin Dr
Philipsburg PA 16866
Return Service Requested

CTYN

September 30, 2009

5

Page 1 of 4

003708 0.7686 AV 0.335 TR00017

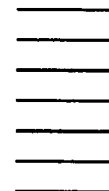
JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Statement of Accounts
2437754

Summary of Account Balances

<i>Account</i>	<i>Number</i>	<i>Ending Balance</i>
Positively Free Small Business	0002437754	\$1,364.38

CTYN-003-003708-001-002-091001 003708 S03
16866111008



Statement of Accounts

0002437754

Jennifer L Kaiser

September 30, 2009

Page 2 of 4

Positively Free Small Business 0002437754

Low balance \$382.28

Average balance \$1,032.07

5 Enclosures

Date	Description	Additions	Subtractions	Balance
08-31	Beginning balance			\$463.95
09-01	#POS Purchase		-6.25	457.70
	MERCHANT PURCHASE TERMINAL 442733		✓	
	MCDONALD S F12375 DU BOIS PA			
	41870400000 7288 08-31-09			
09-01	#POS Purchase		-35.10	422.60
	MERCHANT PURCHASE TERMINAL 416407		✓	
	SHEETZ 0000 0638 DUBOIS PA			
	41870400000 7288 08-31-09			
09-02	Deposit 100.00		✓	522.60
09-03	#POS Purchase		-53.10	469.50
	MERCHANT PURCHASE TERMINAL 416407		✓	
	LOVE S COUNTRY00003244 MIFFINVIL PA			
	41870400000 7288 09-01-09			
09-08	#POS Purchase		-8.05	461.45
	MERCHANT PURCHASE TERMINAL 476197		✓	
	LOVE S 524 MIFFLINVI PA			
	41870400000 7288 09-01-09			
09-08	#POS Purchase		-79.17	382.28
	MERCHANT PURCHASE TERMINAL 416407		✓	
	FRED DIEHLS OF01940022 PHILIPSBU PA			
	41870400000 7288 09-03-09			
09-11	Deposit 994.00		✓	1,376.28
09-14	#POS Purchase		-37.00	1,339.28
	MERCHANT PURCHASE TERMINAL 416407		✓	
	SHEETZ 0000 0646 PHILIPSBU PA			
	41870400000 7288 09-13-09			
09-15	#Electronified Check		-131.96	1,207.32
	VZ WIRELESS ARC ARC		✓	
	090915 1202			
09-16	Check 1201		-341.79	865.53

Number	Date	Amount
1200	09-17	44.52
1201	09-16	341.79
1202	09-15	131.96

CTYN-003-003708-001-002-091001 003708 S03

Statement of Accounts

0002437754

Jennifer L Kaiser

September 30, 2009

Page 3 of 4

<i>Date</i>	<i>Description</i>	<i>Additions</i>	<i>Subtractions</i>	<i>Balance</i>	<i>Number</i>	<i>Date</i>	<i>Amount</i>
09-17	Check 1200		-44.52 ✓	821.01			
09-18	Deposit 604.00		✓	1,425.01			
09-21	#POS Purchase		-28.00	1,397.01			
	MERCHANT PURCHASE TERMINAL 416407		✓				
	SHEETZ 0000 0646 PHILIPSBU PA						
	4187040000017288 09-18-09						
09-28	#POS Purchase		-26.00	1,371.01			
	MERCHANT PURCHASE TERMINAL 416407		✓				
	SHEETZ 0000 0646 PHILIPSBU PA						
	4187040000017288 09-26-09						
09-30	#POS Purchase		-6.63	1,364.38			
	MERCHANT PURCHASE TERMINAL 407105		✓				
	MAIN WON CHINESE RESTA PHILIPSBU PA						
	4187040000017288 09-26-09						
09-30	Ending totals	1,698.00	-797.57	\$1,364.38			

NAME: ADRIAN L. KAY CASH: 100.00
 ADDRESS: 1000 10th St
 CITY: NEW YORK
 STATE: NY
 ZIP: 10001
 ECNS BANK
 ID: 11002780 600

09/02/2009 \$100.00

NAME: ADRIAN L. KAY CASH: 994.00
 ADDRESS: 1000 10th St
 CITY: NEW YORK
 STATE: NY
 ZIP: 10001
 ECNS BANK
 ID: 11002780 600

09/11/2009 \$994.00

NAME: ADRIAN L. KAY CASH: 604.00
 ADDRESS: 1000 10th St
 CITY: NEW YORK
 STATE: NY
 ZIP: 10001
 ECNS BANK
 ID: 11002780 600

09/18/2009 \$604.00

NAME: ADRIAN L. KAY CASH: 44.52
 ADDRESS: 1000 10th St
 CITY: NEW YORK
 STATE: NY
 ZIP: 10001
 ECNS BANK
 ID: 11002780 600

#1200 09/17/2009 \$44.52

NAME: ADRIAN L. KAY CASH: 341.79
 ADDRESS: 1000 10th St
 CITY: NEW YORK
 STATE: NY
 ZIP: 10001
 ECNS BANK
 ID: 11002780 600

#1201 09/16/2009 \$341.79

Direct Inquiries to:
800 492-3221



MEMBER FDIC

CNB Bank
25 Irwin Dr
Philipsburg, PA 16866

Return Service Requested

CTYN

October 31, 2009

5

Page 1 of 4

003818 0.7686 AV 0.335 TR00017

JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

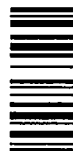
Statement of Accounts
2437754

Summary of Account Balances

<i>Account</i>	<i>Number</i>	<i>Ending Balance</i>
Positively Free Small Business	0002437754	\$708.10

The Unlawful Internet Gambling Act of 2006 prohibits CNB Bank/ERIEBANK from processing restricted transactions through any business account. Restricted transactions include accepting credit, funds, instruments or other proceeds from another person in connection with unlawful Internet gambling. If you are a business account holder and would like more information, please visit our website <http://www.bankcnb.com/business/uigea.php> or call us at 1-800-492-3221.

003818



CTYN-003-003818-001-002-091102 003818 S07
16866111008



Statement of Accounts

0002437754

Jennifer L Kaiser

October 31, 2009

Page 2 of 4

Positively Free Small Business 0002437754

Low balance \$673.19

Average balance \$895.11

5 Enclosures



Date	Description	Additions	Subtractions	Balance
09-30	Beginning balance			\$1,364.38
10-06	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSBU PA 4187040000017288 10-05-09		-38.00 ✓	1,326.38
10-08	Check 1206		-490.20 ✓	836.18
10-09	Deposit 128.00		✓	964.18
10-13	#Electronified Check VZ WIRELESS ARC ARC 091013 1203		-141.53 ✓	822.65
10-13	#Electronified Check ERIE INSURANCE 1256038677 091013 1204		-135.00 ✓	687.65
10-14	Deposit 352.00		✓	1,039.65
10-15	Check 1205		-335.22 ✓	704.43
10-21	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSBU PA 4187040000017288 10-20-09		-25.00 ✓	679.43
10-23	#POS Purchase MERCHANT PURCHASE TERMINAL 418616 BURGER KING 2415 DU BOIS PA 4187040000017288 10-21-09		-6.24 ✓	673.19
10-26	Deposit 100.00		✓	773.19
10-26	#POS Purchase MERCHANT PURCHASE TERMINAL 438898 22 VALLEY TIRES CO INC PHILIPSBU PA 4187040000017288 10-22-09		-20.09 ✓	753.10
10-26	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSBU PA		-45.00 ✓	708.10

Number	Date	Amount
1203	10-13	141.53
1204	10-13	135.00
1205	10-15	335.22
1206	10-08	490.20

CTYW-003-003818-001-002-091102 003818 S07



Statement of Accounts

0002437754

Jennifer L Kaiser

October 31, 2009

Page 3 of 4

<i>Date</i>	<i>Description</i>	<i>Additions</i>	<i>Subtractions</i>	<i>Balance</i>	<i>Number</i>	<i>Date</i>	<i>Amount</i>
	4187040000017288 10-24-09						
10-31	Ending totals	580.00	-1,236.28	\$708.10			

[illegible][illegible]

NEW YORK UNIVERSITY LIBRARY

NAME _____
ADDRESS _____
CITY _____
STATE _____
ZIP _____

DATE _____

CHECK ONE
☐ YES
☒ NO

\$ _____

LIBRARY USE ONLY
DATE RECEIVED _____
BY _____

ENCLOSURE

001 106 2781

Letter E Star

604-918-8888
P.O. Box 1000
St. Louis, MO 63103

1205
NOV 1979

Centre 2-09

to: *Citizens Automobile Insurance Co.* \$ *555.00*
Three hundred Fifty-five and 00/100 \$
ENCLOSURE

(2) 211 506 730
011 506 730 - 6 3775-L*

Quincy L. Jones
11205 08000135517

JAMES E. TAYLOR
 2197 1/2 S. 24TH ST. CHICAGO
 IL 60616
 Phone 773 334-6662

1206
 12/17/79

ORDER 30609

TIG

1490.20

Four hundred Ninety and no/100

CND
 CASH ON DELIVERY

Driving Service March 20

031101785 2-4175-6

6702

CTYN-003-003818-001-002-091102 003818 S07

Direct Inquiries to:
800 492-3221



MEMBER FDIC

CNB Bank
25 Irwin Dr
Philipsburg PA 16866
Return Service Requested

CTYN

November 30, 2009

5

Page 1 of 3

010431 0.6093 AV 0.335 TR00040

JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Statement of Accounts
2437754

Summary of Account Balances

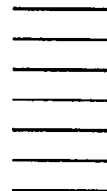
<i>Account</i>	<i>Number</i>	<i>Ending Balance</i>
Positively Free Small Business	0002437754	\$1,006.21

The Unlawful Internet Gambling Act of 2006 prohibits CNB Bank/ERIEBANK from processing restricted transactions through any business account. Restricted transactions include accepting credit, funds, instruments or other proceeds from another person in connection with unlawful Internet gambling. If you are a business account holder and would like more information, please visit our website <http://www.bankcnb.com/business/u'gea.php> or call us at 1-800-492-3221.

010431



CTYN-002-010431-001-001-091201 010431 S06
16866111008



Statement of Accounts

0002437754

Jennifer L Kaiser

November 30, 2009

Page 2 of 3

Positively Free Small Business 0002437754

Low balance \$906.21

Average balance \$1,049.26

Date	Description	Additions	Subtractions	Balance
10-31	Beginning balance			\$708.10
11-02	Deposit 666.00		✓	1,374.10
11-04	Deposit 100.00		✓	1,474.10
11-09	Check 1207		-335.22 ✓	1,138.88
11-09	Check 1208		-134.41 ✓	1,004.47
11-12	#POS Purchase		-45.00 ✓	959.47
	MERCHANT PURCHASE TERMINAL 416407			
	SHEETZ 0000 0645 PHILIPSBU PA			
	4187040000017283 11-11-09			
11-18	#POS Purchase		-53.26 ✓	906.21
	MERCHANT PURCHASE TERMINAL 416407			
	SHEETZ 0000 0638 DUBOIS PA			
	4187040000017283 11-17-09			
11-30	Deposit 100.00		✓	1,006.21
11-30	Ending totals	866.00	-567.89	\$1,006.21

5 Enclosures

Number	Date	Amount
1207	11-09	335.22
1208	11-09	134.41

1. NAME _____
 2. ADDRESS _____
 3. CITY _____
 4. STATE _____
 5. ZIP _____
 6. DATE _____
 7. TIME _____
 8. PHONE _____
 9. TELETYPE _____
 10. FAX _____
 11. EMAIL _____
 12. WEBSITE _____
 13. MOBILE _____
 14. HOME _____
 15. WORK _____
 16. CELL _____
 17. OTHER _____
 18. DATE _____
 19. TIME _____
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 21. TELETYPE _____
 22. FAX _____
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 26. HOME _____
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 28. CELL _____
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 219. WORK _____
 220. CELL _____
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 222. DATE _____
 223. TIME _____
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 225. TELETYPE _____
 226. FAX _____
 227. EMAIL _____
 228. WEBSITE _____
 229. MOBILE _____
 2

11/02/2009 \$666.00

NAME Kia See Transport CASH
ACCT NO. 215784 100.00
DATE 11/4/09
CNC BANK
5 100.00
⑆081306278⑆ 600

11/04/2009 \$100.00

[illegible]

11/30/2009 \$100.00

James E. Sawyer
Sawyer & Sawyer
25000 Fifth Avenue
and 11th St.
Washington, DC 20004

1207
ROOM 1

See Section 9

Virginia Indemnity Fund, Inc. 335-28
Three hundred thirty-five and 2/100ths & No.

CNS

2715-3251 *James E. Sawyer*
EO: 126178C 2-4-77-4 1601 10000115224

#1207 11/09/2009 \$335.22

[illegible]

#1208 11/09/2009 \$134.41

Direct Inquiries to:
800 492-3221



MEMBER FDIC

CNB Bank
25 Irwin Dr
Philipsburg PA 16866
Return Service Requested

CTYN

December 31, 2009

2

Page 1 of 3

004022 0.6093 AV 0.335 TR00019

JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Statement of Accounts
2437754

Summary of Account Balances

<i>Account</i>	<i>Number</i>	<i>Ending Balance</i>
Positively Free Small Business	0002437754	\$314.00

CTYN-002-004022-001-001-100104 004022 S05
16866111008

Statement of Accounts

0002437754

Jennifer L Kaiser

December 31, 2009

Page 2 of 3

Positively Free Small Business 0002437754

Low balance \$314.00

Average balance \$750.32

2 Enclosures

Date	Description	Additions	Subtractions	Balance
11-30	Beginning balance			\$1,006.21
12-15	Deposit 100.00			1,106.21
12-15	#Electronified Check VZ WIRELESS ARC ARC 091215 1210		-132.42	973.79
12-16	Check 1209		-335.22	638.57
12-21	#POS Purchase MERCHANT PURCHASE TERMINAL 434129 CRYSTAL CLEAN AUTO SPA PHILLIPSB PA 4187040000017283 12-20-09		-7.00	631.57
12-21	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSBU PA 4187040000017288 12-20-09		-17.00	614.57
12-21	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0638 DUBOIS PA 4187040000017288 12-18-09		-36.01	578.56
12-21	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSBU PA 4187040000017288 12-20-09		-39.00	539.56
12-22	#POS Purchase MERCHANT PURCHASE TERMINAL 471705 NAPA AUTO PARTS PHILIPSBPHILIPSBU PA 4187040000017288 12-21-09		-78.15	461.41
12-31	#Electronified Check VZ WIRELESS ARC ARC 091231 1212		-147.41	314.00
12-31	Ending totals	100.00	-792.21	\$314.00

Number	Date	Amount
1209	12-16	335.22
1210	12-15	132.42
1212 *	12-31	147.41

* Skip in check sequence

CTYN-002-004022-001-001-100104 004022 S05

J. J. J. J. J. 12/15/2009 12/15/2009 12/15/2009	12/15/2009 12/15/2009 12/15/2009	100.00 100.00 100.00
----------------------------------------------------------	----------------------------------------	----------------------------

12/15/2009 \$100.00

J. J. J. J. J. 12/16/2009 12/16/2009 12/16/2009	12/16/2009 12/16/2009 12/16/2009	335.22 335.22 335.22
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#1209 12/16/2009 \$335.22

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Direct Inquiries to:
800 492-3221



MEMBER FDIC

CNB Bank
25 Irwin Dr
Philipsburg PA 16866
Return Service Requested

CTYN

January 31, 2010

9

Page 1 of 3

003522 0.6093 AV 0.335 TR00016

JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Statement of Accounts
2437754

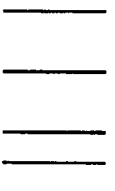
Summary of Account Balances

<i>Account</i>	<i>Number</i>	<i>Ending Balance</i>
Positively Free Small Business	0002437754	\$0.00

003522



CTYN-002-003522-001-001-100201 003522 S05
16866111008



Statement of Accounts

0002437754

Jennifer L Kaiser

January 31, 2010

Page 2 of 3

Positively Free Small Business 0002437754

Low balance \$-56.33

Average balance \$516.33

9 Enclosures

Date	Description	Additions	Subtractions	Balance
12-31	Beginning balance			\$314.00
01-04	Deposit 100.00			414.00
01-04	Check 1211		-44.52	369.48
01-04	Check 1213		-396.84	-27.36
01-05	#Overdraft Fee		-28.97	-56.33
FOR OVERDRAFT CHECK # 1213				
01-06	Deposit 1,586.00			1,529.67
01-12	Check 1214		-1,444.40	85.27
01-19	Deposit 336.00			421.27
01-21	Deposit 711.33			1,132.60
01-25	Check 1215		-229.60	903.00
01-25	Check 1216		-903.00	0.00
01-31	Ending totals	2,733.33	-3,047.33	\$0.00

Number	Date	Amount
1211	01-04	44.52
1213 *	01-04	396.84
1214	01-12	1,444.40
1215	01-25	229.60
1216	01-25	903.00

* Skip in check sequence

CTYN-002-003522-001-001-100201 003522 S05

100-0-100000-100000
 NAME _____
 ADDRESS _____
 CITY _____
 STATE _____
 ZIP _____
 PHONE _____
 FAX _____
 E-MAIL _____
 CREDIT CARD NO. _____
 EXPIRATION DATE _____
 CARDHOLDER NAME _____
 SIGNATURE _____
 DATE _____
 \$ _____
 100-0-100000-100000

01/04/2010 \$100.00

[illegible]

#1216 01/25/2010 \$903.00

[illegible]

01/06/2010 \$1,586.00

[illegible]

01/19/2010 \$336.00

[illegible]

01/21/2010 \$711.33

[illegible]

#1211	01/04/2010	\$44.52
-------	------------	---------

Samuel L. Kupper
Driver's License Transactions
#1118 18
P.O. Box 1118
Pittsburg, KS 64570

1213
12/13/89

December 27, 2009

Chinese Automobile Finance, Inc. \$ 396.84

Three hundred ninety six and 8/100ths 00

ENCLOSURE

20090329

Quintin Kupper

CO 6130478AC 7-613775-6

1213 1000001968/

#1213 01/04/2010 \$396.84

[illegible]

#1214 01/12/2010 \$1,444.40

[illegible]

#1215 01/25/2010 \$229.60

Direct Inquiries to:
800 492-322



MEMBER FDIC

CNB Bank
25 Irwin Dr
Philipsburg, PA 16866
Return Service Requested

CTYN

February 28, 2010

010317 0.6093 AV 0.335 TR00039

Page 1 of 2

JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

Statement of Accounts
2437754

Summary of Account Balances

<i>Account</i>	<i>Number</i>	<i>Ending Balance</i>
Positively Free Small Business**	0002437754	\$0.00

** Closed Account - Final Statement

Effective Date: February 27, 2010 - Our general policy is to allow you to withdraw funds deposited in your checking account on the same business day we receive your deposit. In some cases, we may delay your ability to withdraw funds the same business day. Then the funds will generally be available by the second business day after the day of deposit.

CTYN-002-010317-001-001-100301 010317 S04
16866111008

TELEPHONE US AT: 1-800-492-3223 WRITE US AT: CNB BANK, E.F.T., P.O. BOX 42, CLEARFIELD, PA 16830

We must hear from you no later than 60 days after we sent the first statement on which the problem or error appeared.

1. Your name and account number.
2. Describe the error or the transfer you are unsure about and explain as clearly as you can why you believe it is an error or why you need more information.
3. The dollar amount of the suspected error.

PRIVACY DISCLOSURE

INFORMATION WE COLLECT ABOUT YOU

-information we receive from you on applications or other forms.

-information about your transactions with us, our affiliates, or others.

Information we receive from a consumer-reporting agency.

We do not disclose any nonpublic personal information about our customers or former customers to anyone, except as permitted by law. We may disclose all of the information we collect, as described above, to companies that perform marketing services on our behalf or to other financial institutions with whom we have joint marketing agreements.

We restrict access to nonpublic personal information about customers to those employees who need to know that information to provide products or services to customers. We maintain physical, electronic and procedural safeguards that comply with federal standards to guard your nonpublic personal information.

If you decide to close your account(s) or become an inactive customer, we will continue to adhere to the privacy policies and practices described in this notice.

CHECKS OUTSTANDING

ENTER BALANCE (this statement) 1.) _____

ADD RECENT DEPOSITS (not credited on this statement) 2.) _____

TOTAL 3.)

SUBTRACT CHECKS
OUTSTANDING

BALANCE	5.)
---------	-----

CTYN

Statement of Accounts

0002437754

Jennifer L Kaiser

February 28, 2010

Page 2 of 2

Positively Free Small Business 0002437754

<i>Date</i>	<i>Description</i>	<i>Additions</i>	<i>Subtractions</i>	<i>Balance</i>	<i>Number</i>	<i>Date</i>	<i>Amount</i>
01-31	Beginning balance			\$0.00			
02-28	Ending totals	.00	.00	\$0.00			

CTYN-002-010317-001-001-100301 010317 S04

193651

STATEMENT

DATE

February 2009

TERMS

—

TO

Birger A. Freeberg Funeral Home, Inc.

ADDRESS

200 David St

Houtzdale PA 16651 (814) 378-8661

IN ACCOUNT WITH

KAISER TRANSPORT (814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100 00

100 00

- Rollins Funeral Home

Fredrick, MD

- Pete Tatanish

(02 January 2009)

134

Total Loaded Mileage

2 00

268 00

- Total Mileage in 16th

1

TOTAL TOLLS

1 25

1 25

Check # 4979 on

Jan. 2, 2009

TOTAL

369 25

193652

STATEMENT

DATE

February 2009

TERMS

—

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philippsburg PA 16866

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N 11th St Philippsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100 00

100 00

- Clearfield Hospital
to JC Blair Memorial
- Teresa L. Spencer
(11 January 2009)

29

Total Loaded Mileage

2 00

58 00

- Total Mileage is 59

Check # 061610

TOTAL

158 00

DC5812

193653

STATEMENT

DATE

FEBRUARY 2009

TERMS

—

TO

Birger A Freeberg Funeral Home Inc.

ADDRESS

200 David St

Hortzdale PA 16651

(814) 378-8661

IN ACCOUNT WITH

Kaiser Transport

(814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mileage

Unit Price Total

1

Flat Fee (0-30 miles)

100 00

100 00

- Windy Hill Village

- William Rod Key

(14 January 2009)

Check #4928 on

Jan 14, 2009

TOTAL

100 00

STATEMENT

DATE _____

FEBRUARY 2009

TERMS

TO

TO Birger A Freeberg Funeral Home Inc.

ADDRESS

ADDRESS 200 David St

Houtzdale, PA 16651 (814) 378-8661

IN ACCOUNT WITH

IN ACCOUNT WITH
Kaiser Transport (814) 649-9532

408 N. 14th St, Philipsburg PA 16816

Mileage

Unit	Price	Total
1	100	100
2	100	200
3	100	300
4	100	400
5	100	500
6	100	600
7	100	700
8	100	800
9	100	900
10	100	1000

1	Flat Fee (0-30 miles)	100	00	100	00
	- Clearfield Hospital				
	- Frank Saupp				
	(19 January 2009)				

Check # 5007

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466
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100	00
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adams DC5812

2nd ed. DC5812

193657

STATEMENT

DATE

FEBRUARY 2009

TERMS

TO Strange + Weaver and Johnson's Funeral Service

ADDRESS

Deer Creek Road, Po Box 238

Morrisdale PA 16858

(814) 342-2221

IN ACCOUNT WITH

Kaiser Transport

(814) 649-9537

408 N 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100 00

100 00

- Clearfield Hospital

- Helen Willett

(30 January 2009)

Check # 22721

TOTAL

100 00

193658

STATEMENT

DATE

February 2009

TERMS

TO Strang+ Weaver and Johnson's Funeral Service

ADDRESS

Deer Creek Road, P.O. Box 238Morrisdale PA 16858 (814) 342-2221

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532408 N 14th St Philipsburg PA 16866Mileage Unit Price Total

1	Flat Fee (0-30 Miles)	100.00	100.00
---	-----------------------	--------	--------

	- Clearfield Hospital		
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	- James Hanslovian		
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	(05 FEBRUARY 2009)		
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		TOTAL	100.00
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FORM DC5812

193659

STATEMENT

DATE

FEBRUARY 2009

TERMS

TO

Birger A Freeberg Funeral Home, Inc

ADDRESS)

200 Duwid St

Holtzdale PA 16851

(814) 378-8661

IN ACCOUNT WITH

Kaiser Transport

(814) 649-9532

408 N 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 Miles)

100 00

100 00

- Mt. Laurel

- Irene Jones

(07 February 2009)

Check # 5023

TOTAL

100 00

193660

STATEMENT

DATE

FEBRUARY 2009

TERMS

TO

Strange + Weaver and Johnson's Funeral Service

ADDRESS

Deer Creek Road, Po Box 238

Marrisdale PA 16858

(814) 342-2221

IN ACCOUNT WITH

Kaiser Transport

(814) 649-9532

408 N 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 Miles)

100 00

100 00

- Mt. Laurel

- Lynetta Muirhead
(13 February 2009)

Check # 22721

TOTAL

100 00

193661

STATEMENT

DATE

FEBRUARY 2009

TERMS

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 Miles)

100 00

100 00

- DRMC West to

JC Blair Memorial

- Gary Gelnett

(16 February 2009)

49

TOTAL LOADED MILEAGE

200

98 00

- Total Mileage is 79

Check #061610

TOTAL

198 00

193662

STATEMENT

DATE

FEBRUARY 2009

TERMS

TO

Birger A Freeberg Funeral Home Inc

ADDRESS

200 David St

Houtzdale, PA 16851

(814) 378-8661

IN ACCOUNT WITH

Kaiser Transport

(814) 649-9532

408 N 11th St Philipsburg PA 16866

Mileage

Unit Price Total

1

Flat Fee (0-30 miles)

100 00

100 00

- Colonial Courtyard

- Jen Morgan

(16 FEBRUARY 2009)

Check # 5069

TOTAL

100 00

193663

STATEMENT

DATE

FEBRUARY 2009

TERMS

TO

Birger A Freeberg Funeral Home Inc.

ADDRESS

200 David St

Holtzdale PA 16851

(814) 378-8661

IN ACCOUNT WITH

Kaiser Transport

(814) 419-9532

408 N 11th St Philipshurg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 Miles)

100 00

100 00

- Altoona Hospital

- George Chincharick

(17 February 2009)

Check #5076

TOTAL

100 00

STATEMENT

DATE _____

FEBRUARY 2009

TERMS

11

TO Strange + Weaver and Johnson's Funeral Service

ADDRESS

ADDRESS)
Deer Creek Road, PO Box 238

Morrisdale, PA 16858 (814) 342-2221

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1	Flat Fee (0-30 Miles)	100.00	100.00
---	-----------------------	--------	--------

- Windy Hill Village

- Barbara Franěk

(19 February 2009)

[illegible]

Check # 22721

Total

100	00
-----	----

193665

STATEMENT

DATE

FEBRUARY 2009

TERMS

TO
 Biraer A Freeberg Funeral Home Inc.
 ADDRESS
 200 David St

Huntzdale PA 16851 (814) 378-8661

IN ACCOUNT WITH
 Kaiser Transport (814) 649-9532

408 N 11th St Philipsburg PA 16866

Mileage Unit Price Total

1 Flat Fee (0-30 Miles) 100 00 100 00

- Stittler Funeral Home,
 Montoursville, PA

- Dennis Eckberg
 (19 February 2009)

75 TOTAL LOADED MILEAGE 2 00 150 00

- Total Mileage is 105

Check # 5076

TOTAL 250 00

STATEMENT

DATE _____

04 MARCH 2009

TERMS

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

403 N. 11th St Philipsburg PA 16866

Mileage

	Unit Price	Total
--	------------	-------

1

Flat Fee (0-30 Miles)

100000

100 | 80

- Clearfield Hospital to Mt. Nittany Med. Center
- Ernest Caldwell (28 February 2009)

13

TOTAL LOADED MILEAGE	
----------------------	--

200

2600

- Total Mileage is 43

Check # 062052

TOTAL

126	00
-----	----

STATEMENT

DATE _____

04 MARCH 2009

TERMS

TO

TO Strange + Weaver and Johnson's Funeral Service.

ADDRESS

ADDRESS)
Deer Creek Road, P.O. Box 238

Morrisdale PA 16858 (814) 342-2221

IN ACCOUNT WITH

IN ACCOUNT WITH
Kaiser Transport (814) 649-9532

408 N. 11th St Philipsburg PA 16866

Milrose

Unit Price

Total

/

Flat Fee (0-30 Miles)

100	00
-----	----

00

100	00
-----	----

00

- Mt. Pittman Med Center

- Dixie McFay

(03 March 2009)

Check # 22859

Total

100	00
-----	----

193668

STATEMENT

DATE

March 2009

TERMS

TO

Birger A Freeberg Funeral Home Inc

ADDRESS

200 David St

Houtzdale, PA 16851 (814) 378-8661

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N 11th St Philipsburg PA 16866

Mileage

Unit Price Total

1 Flat Fee (0-30 miles) 100 00 100 00

- Windy Hill Village

- Julia Leno

(05 March 2009)

Check # 5106

Total

100 00

STATEMENT

DATE _____

MARCH 2009

TERMS

TO Strange + Weaver and Johnson's Funeral Service

ADDRESS

ADDRESS
Deer Creek Rd, Po Box 238

Morrisdale PA 16858 (814) 342-2221

IN ACCOUNT WITH

IN ACCOUNT WITH Kaiser Transport (814) 649-9532

408 N 11th St Philipsburg PA 16866

Mileage		Hait Price	Total
---------	--	------------	-------

1 st	Flat Fee (0-30 miles)	100	00	100	00
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- Mt. Laurel

- Paul Copanas

(06 March 2009)

Check # 22859

Total	100	00
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193670

STATEMENT

DATE

MARCH 2009

TERMS

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

Kaiser Transport

(814) 649-9532

408 N 11th St Philipsburg PA 16866

Mileage

Unit Price Total

1

Flat Fee (0-30 miles)

100.00

100.00

- Clearfield Hospital
to Mt Nittany Medical
Center- Kery Wooten
(07 March 2009)

14

TOTAL LOADED MILES

2.00

28.00

- Total Mileage is 44

Check # 062052

TOTAL

128.00

193671

STATEMENT

DATE

MARCH 2009

TERMS

TO

Strange, + Weaver and Johnson's Funeral Service

ADDRESS

Deer Creek Road, Po Box 238

Morrisdale, PA 16858 (814) 342-2221

IN ACCOUNT WITH

Kriser Transport (814) 649-9532

408 N 11th St Philipsburg PA 16866

Mileage

Unit Price Total

1	Flat Fee (0-30 miles)	100 00	100 00
---	-----------------------	--------	--------

- Mt. Nittany Med Center

- Scott Hillard

(08 March 2009)

Check # 22859

TOTAL		100 00
-------	--	--------

193672

STATEMENT

DATE _____

March 2009

TERMS

TO Strange + Weaver and Johnson's Funeral Service

ADDRESS

ADDRESS
Deer Creek Road P.O. Box 238

Morrisdale PA 16858 (814) 342-2221

IN ACCOUNT WITH

IN ACCOUNT WITH
Kaiser Transport (814) 649-9532

408 N 11th St Philipsburg PA 16866

Mileage

Unit Price Total

1	Flat Fee (0-30 Miles)	100	00	100	00
---	-----------------------	-----	----	-----	----

- Windy Hill Village

- Ann Sabal

(08 March 2009)

	(S)

Check # 22859

TOTAL

100	00
-----	----

193673

STATEMENT

DATE

March 2009

TERMS

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

Kaiser Transport

(814) 649-9532

408 N 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100 00

100 00

- Clearfield Hospital to
Mt. Nittany Med. Center- Gary Bloom
(08 March 2009)

14

TOTAL LOADED MILES

2 00

28 00

- Total Mileage is 44

Check # 062052

TOTAL

128 00

193674

STATEMENT

DATE

March 2009

TERMS

TO

KRIUSE FUNERAL HOME

ADDRESS

PO Box 587

Madera PA 16801 (814) 378-7161

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N 11th St Philipsburg PA 16866

Mileage

Unit Price Total

1

Flat Fee (0-30 miles)

100 00

100 00

- Mt. Nittany Med Center

- Gary Bloom

(08 March 2009)

10

TOTAL LOADED MILES

2 00

20 00

- Total Mileage is 40

Check # 8723

TOTAL

120 00

193675

STATEMENT

DATE

March 2009

TERMS

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 Miles)

100 00

100 00

- DRMC West, Du Bois

to JC Blair Memorial

- Cynthia Orange

(09 March 2009)

50

Total Loaded Miles

2 00

100 00

- Total Mileage is 80

Check # 062052

Total

200 00

193676

STATEMENT

DATE

MARCH 2009

TERMS

TO

Strange + Weaver and Johnson's Funeral Service

ADDRESS

Deer Creek Road, Po Box 238

Morrisdale, PA 16858

(814) 342-2221

IN ACCOUNT WITH

Kaiser Transport

(814) 649-9532

408 N. 11th St Philipshurg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100 00

100 00

- Clearfield Hospital

- Joseph Martin

(10 March 2009)

Check # 22859

TOTAL

100 00

193677

STATEMENT

DATE _____

MARCH 2009

TERMS

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philosophy PA 16866

IN ACCOUNT WITH

ACCOUNT WITH
Kaiser Transport

1814) 649-9532

408 N 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100

02

100

50

- DRMC West to

mt. Nittany Med Center

- Groß Kosten

(14 March 2009)

35

TOTAL LOADED MILEAGE	
----------------------	--

202

70	00
----	----

- Total Mileage is 65

Check # 062052

TOTAL

170 00

STATEMENT

DATE _____

22 MARCH 2009

TERMS

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

ACCOUNT WITH
Kaiser Transport

(814) 649-9532

408 N. 11th St. Philipsburg PA 16866

Milena

Unit Price

Total

1

Flat Fee (0-30 miles)

100	100
-----	-----

100	100
-----	-----

- Mt. Nittany Med. Center

to Souder Funeral Home

Reynoldsville, PA

- Gai Kasten

(15 March 2009)

44

TOTAL LOADED MILEAGE

200

381

Total mileage is 74

Cheek # 062052

TOTAL

188	00
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193680

STATEMENT

DATE

22 MARCH 2009

TERMS

TO

Birger A Freeberg Funeral Home Inc.

ADDRESS

200 David St

Houtzdale PA 16851 (814) 378-8661

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N. 11th St, Philipsburg PA 16866

Mileage

Unit Price

Total

1	Flat Fee (0-30 Miles)	100 00	100 00
---	-----------------------	--------	--------

- Home Residence

- Leonard Thompson

(16 March 2009)

~~Total Loaded Mileage 200~~

~~Total Mileage 10~~

Check # 5163

TOTAL

100 00

193681

STATEMENT

DATE

22 MARCH 2009

TERMS

TO

Strange + Weaver and Johnson's Funeral Service

ADDRESS

Deer Creek Road, PO Box 238

Morrisdale, PA 16858 (814) 342-2721

IN ACCOUNT WITH

KAISER TRANSPORT

(814) 649-9532

408 N. 11th St, Philipsburg PA 16816

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100 00

100 00

- Mt. Nittany Med Center

- Pauline Massaglia

(22 March 2009)

Check # 22859

TOTAL

100 00

STATEMENT

DATE _____

APRIL 2009

TERMS

TO

Strange + Weaver and Johnson's funeral service

ADDRESS

ADDRESS Deer Creek Rd, PO Box 238

Morrisdale, PA 16858 (814) 342-2221

IN ACCOUNT WITH

KAISER TRANSPORT (814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mileage

Unit Price	Total
------------	-------

1	0	FIAT FEE (0-30 miles)	100.00	100.00
---	---	-----------------------	--------	--------

		- Clearfield Hospital
--	--	-----------------------

- Kenneth Quick
(31 Mar 42)

		(21 MAR 69)

		Check # 23070
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800-447-7777

TOTAL	
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100	00
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STATEMENT

DATE _____

APRIL 2009

TERMS

TO

ADDRESS

TO Strange + Weaver and Johnson's Funeral Service.
ADDRESS

Deer Creek Road, Po Box 238

Morrisdale, PA 16858 (814) 342-2221

IN ACCOUNT WITH

HAUSER TRANSPORT

(814) 649-4532

408 N. 11th St Philipsburg PA 16866

M. Leach

Unit Price.

Total

1

FLAT FEE (0-30 miles)

100	00
-----	----

100/00

- Windy Hill

Patricia Martin

(April 8, 2009)

Check # 23070

TOTAL

100	00
-----	----

193609

STATEMENT

DATE

APRIL 2009

TERMS

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

KAISER TRANSPORT

(814) 649-4532

408 N. 14th St Philipsburg PA 16866

Mileage

Unit Price

TOTAL

1

Flat Fee (0-30 miles)

100.00

100.00

- DRMC went to
Mt. Nittany Med. Center
- James Frisbie,
(April 11, 2009)

34

TOTAL LOADED MILEAGE

2.00

68.00

- Total Mileage is 64

Check #63180

TOTAL

168.00

T93686

STATEMENT

DATE

APRIL 2009

TERMS

TO BIRGER A FREEBERG FUNERAL HOME INC.

ADDRESS

200 David StHoutzdale PA 16651(814) 378-8661

IN ACCOUNT WITH

KAISER TRANSPORT(814) 649-9532408 N. 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

FLAT FEE (0-30 miles)

100 00

100 00

- Clearfield Hospital

- Leroy Smeal

(April 15, 2009)

CHECK #5174

TOTAL

100 00

195600

STATEMENT

DATE

APRIL 2009

TERMS

TO

Clarksfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

KAISER TRANSPORT

(814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100 00

100 00

- J.C. Blair Memorial

to Strange + Weaver,

Morrisdale, PA

- Charles Cummings, Jr.

(April 16, 2009)

14

TOTAL LOADED MILEAGE

2 00

28 00

- Total Mileage is 44

Check #63180

TOTAL

128 00

STATEMENT

DATE _____

APR 12 2009

TERMS

TO

13. Strange + Weaver and Thason's Funeral Service
ADDRESS 124 N. 4th St.

ADDRESS

Deer Creek Road, PO Box 238

Morrisdale, PA 16858 (814) 342-7771

IN ACCOUNT WITH

KAISER TRANSPORT (814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mikasa

<u>Unit Price</u>	<u>Total</u>
1000	1000
900	900
800	800
700	700
600	600
500	500
400	400
300	300
200	200
100	100
0	0

	Unit Price	Total
1 Flat Fee (0-30 miles)	100.00	100.00

- Attoona General

- Thomas Neidrick

(April 23, 2009

10	TOTAL LOADED MILEAGE	200	20	00
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- Total mileage is 40

Check # 23070

TOTAL	120	80
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STATEMENT

DATE _____

MAY 2009

TERMS

TO

CLEARFIELD COUNTY CORONER

ADDRESS

906 EDWARD ST

PHILIPSBURG PA 16866

IN ACCOUNT WITH	
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ACCOUNT WITH
KAISER TRANSPORT

(814) 649-9532

408 N. 14th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

FLAT FEE (0-30 miles)

100	00
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00

100	00
-----	----

- DRMC WEST, Du Bois

to JC BLAIR MEMORIAL

- HOWARD HAUPT

(02 MAY 2009)

49

TOTAL LOADED MILEAGE	
----------------------	--

2	00
---	----

98	00
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- Total Mileage is 79

Check # 63180

TOTAL 4

198 | 00

STATEMENT

DATE _____

MAY 2009

TERMS

TO

10
ADDRESS Strange + Weaver and Johnson's Funeral Service

ADDRESS

Deer Creek Road, P.O. Box 238

Morrisdale PA 16858 (814) 347-2221

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mikeae

Unit	Price	Total
1	10	10
2	20	20
3	30	30
4	40	40
5	50	50
6	60	60
7	70	70
8	80	80
9	90	90
10	100	100
11	110	110
12	120	120
13	130	130
14	140	140
15	150	150
16	160	160
17	170	170
18	180	180
19	190	190
20	200	200
21	210	210
22	220	220
23	230	230
24	240	240
25	250	250
26	260	260
27	270	270
28	280	280
29	290	290
30	300	300
31	310	310
32	320	320
33	330	330
34	340	340
35	350	350
36	360	360
37	370	370
38	380	380
39	390	390
40	400	400
41	410	410
42	420	420
43	430	430
44	440	440
45	450	450
46	460	460
47	470	470
48	480	480
49	490	490
50	500	500
51	510	510
52	520	520
53	530	530
54	540	540
55	550	550
56	560	560
57	570	570
58	580	580
59	590	590
60	600	600
61	610	610
62	620	620
63	630	630
64	640	640
65	650	650
66	660	660
67	670	670
68	680	680
69	690	690
70	700	700
71	710	710
72	720	720
73	730	730
74	740	740
75	750	750
76	760	760
77	770	770
78	780	780
79	790	790
80	800	800
81	810	810
82	820	820
83	830	830
84	840	840
85	850	850
86	860	860
87	870	870
88	880	880
89	890	890
90	900	900
91	910	910
92	920	920
93	930	930
94	940	940
95	950	950
96	960	960
97	970	970
98	980	980
99	990	990
100	1000	1000

11

FLAT FEE (0-30 miles)

100

100

10

0.05

- ALTOONA GENERAL

- HARRY WILLIAMS

(13 MAY 2009)

13

TOTAL LOADED MILEAGE

202

26/05

-Total Mileage is 43

Check# 23123

TOTAL

126

100

193692

STATEMENT

DATE

MAY 2009

TERMS

TO

KRUUSE FUNERAL HOME

ADDRESS

PO Box 587

MADERA PA 16661 (814) 378-7161

IN ACCOUNT WITH

KAISER TRANSPORT (814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mileage Unit Price Total

1

Flat Fee (0-30 Miles)

100 00

100 00

- TRUDDEN-KANDT FUNERAL

Home, Lockport, NY

- ANNA MOSKEL

(15 MAY 2009)

173

TOTAL LOADED MILEAGE

2 00

346 00

- Total Mileage is 203

Check # 8895

TOTAL

446 00

STATEMENT

DATE _____

MAY 2009

TERMS

TO

GOOD'S FUNERAL HOME

ADDRESS

34 N. REAMSTOWN RD

STEVENS PA 17578

(717) 336-4909

IN ACCOUNT WITH 1

Kaiser Transport

(814) 644-9532

408 N 11th St Philipsburg PA 16866

Mileage

Unit	Price	Total
1	10	10
2	20	20
3	30	30
4	40	40
5	50	50
6	60	60
7	70	70
8	80	80
9	90	90
10	100	100
11	110	110
12	120	120
13	130	130
14	140	140
15	150	150
16	160	160
17	170	170
18	180	180
19	190	190
20	200	200
21	210	210
22	220	220
23	230	230
24	240	240
25	250	250
26	260	260
27	270	270
28	280	280
29	290	290
30	300	300
31	310	310
32	320	320
33	330	330
34	340	340
35	350	350
36	360	360
37	370	370
38	380	380
39	390	390
40	400	400
41	410	410
42	420	420
43	430	430
44	440	440
45	450	450
46	460	460
47	470	470
48	480	480
49	490	490
50	500	500
51	510	510
52	520	520
53	530	530
54	540	540
55	550	550
56	560	560
57	570	570
58	580	580
59	590	590
60	600	600
61	610	610
62	620	620
63	630	630
64	640	640
65	650	650
66	660	660
67	670	670
68	680	680
69	690	690
70	700	700
71	710	710
72	720	720
73	730	730
74	740	740
75	750	750
76	760	760
77	770	770
78	780	780
79	790	790
80	800	800
81	810	810
82	820	820
83	830	830
84	840	840
85	850	850
86	860	860
87	870	870
88	880	880
89	890	890
90	900	900
91	910	910
92	920	920
93	930	930
94	940	940
95	950	950
96	960	960
97	970	970
98	980	980
99	990	990
100	1000	1000

[illegible]

STATEMENT

DATE _____

JUNE 2009

TERMS

TO

Clearfield County Coroner

ADDRESS

906 EDWARD ST

Philipsburg PA 16866

IN ACCOUNT WITH

KAISER TRANSPORT

(814) 649-9532

403 N. 11th St Philipshurg PA 16866

Mileage

[illegible]

1

FLAT FEE (0-30 miles)

10000

100000

- Clearfield Hospital

to JC Blair Memorial

- Scott Kerstetter

(03 JUN 2009)

28

Total Loaded Mileage

200

56 | 00

(Total mileage is 58)

Check # 63760

TOTAL

156	00
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STATEMENT

DATE _____

JUNE 2009

TERMS

TO Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

IN ACCOUNT WITH
KAISER TRANSPORT (814) 649-9532

408 N. 14th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100	00
-----	----

100	00
-----	----

- Old Erie Pike West

Decatur (Home Residence)

to JC Blair Memorial

- Tina Sunderland

(09 JUN 2009)

17

Total Loaded Mileage

200

34	00
----	----

- Total mileage is 47

Check# 63760

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466
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134	00
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193697

STATEMENT

DATE

JUNE 2009

TERMS

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

KAISER TRANSPORT

(814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mileage

Unit Price Total

1

Unit Price (0-30 Miles)

100

00

100 00

- Clearfield Hospital

to JC Blair Memorial

- Justin Foreman

(12 Jun 2009)

28

Total Loaded Mileage

200

56 00

- Total Mileage is 58

Check # 63760

TOTAL

156 00

STATEMENT

DATE _____

JUNE 2009

TERMS

TO

ADDRESS Strange + Weaver and Johnson's Funeral Service

ADDRESS

Deer Creek Road Po Box 238

Morrisdale PA 15258 (814) 342-2721

IN ACCOUNT WITH

KAISER TRANSPORT (814) 649-9532

408 N. 11th St Philipsburg PA 16816

Mileage[illegible]

	FLAT FEE (0-.30 miles)	UNIT PRICE	TOTAL
1	100.00	100.00	100.00

- Clearfield Hospital

- Maxine Maines

(15 June 2009)

12-11-2000

Check# 23344

TOTAL		100	00
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STATEMENT

DATE _____

June 2009

TERMS

TO

TO Strange + Weaver and Johnson's Funeral Service
ADDRESS

ADDRESS

Deer Creek Road, Po Box 238

Morrisdale, PA 16858 (814) 342-2771

IN ACCOUNT WITH

KAISER TRANSPORT

(814) 649-9532

408 N 14th ST PHILIPSBURG PA 16866

Mileage

Unit Price

Total

1

FLAT FEE (0-30 miles)

100	00
-----	----

100	100
-----	-----

- Clearfield Hospital

- Elizabeth Tillott

(15 June 2009)

Check # 23344

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466
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100	00
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193700

STATEMENT

DATE

JUNE 2009

TERMS

TO

Strange + Weaver and Johnson's Funeral Service

ADDRESS

Deer Creek Road, Po Box 238

Morrisdale, PA 16858 (814) 342-2221

IN ACCOUNT WITH

KAISER TRANSPORT (814) 649-9532

408 N 11th St PHILLIPSBURG PA 168166

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100 00

100 00

- Altoona Hospital

- Jay Jeffries

(28 JUN 2009)

9

Total Loaded Mileage

2 00

18 00

- Total Mileage is 39

Check # 23344

TOTAL

118 -

STATEMENT

DATE

July 2009

TERMS

—

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg, PA 16806

IN ACCOUNT WITH

Kaiser Transport (84) 649-9532

408 N. 14th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100 00

100 00

- DRMC West, DuBois

to Mt. Nittany Med. Center

- Anthony Leone

(28 Jun 2009)

35

Total Loaded Mileage

2 00

70 00

- Total mileage is 65

Check # 64266

TOTAL

170 00

STATEMENT

DATE

July 2009

TERMS

—

TO

Clearfield County Coroner

ADDRESS

906 Edward St.

Philipsburg PA 16866

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N. 11th St. Philipsburg PA 16866

Mileage

Unit Price

TOTAL

1

Flat Fee (0-30 Miles)

100 00

100 00

- Mt. Nittany Med. Center
to DRMC West, DuBois

- Anthony Leone

(28 JUNE 2009)

35

Total Loaded Mileage

200

70 00

- Total Mileage is 65

Check # 64266

TOTAL

170 00

STATEMENT

DATE _____

July 2009

TERMS

TO

CARSON - BOYER FUNERAL HOME

ADDRESS

724 W. Main St.

Rural Valley, PA 16249 (724) 783-7331

IN ACCOUNT WITH

ACCOUNT WITH
Kaiser Transport

(814) 649-9532

408 N. 11th St. Philipsburg PA 16866

Milosa

Unit Price

TOTAL

1

FLAT FEE (0-30 miles)	
-----------------------	--

100	00
-----	----

100

10000

03

- DRMC West, Du Bois

- Anthony Leone

(28 June 200

26

TOTAL LOADED MILEAGE

70

5200



- Total Mileage is 56

PAID CHECK # 11867

TOTAL

15700

STATEMENT

DATE _____

July 2009

TERMS

TC

TO Birger A Freeberg Funeral Home Inc.
ADDRESS

ADDRESS

ADDRESS
200 David St

Houtzdale PA 16651

(874) 378-8661

IN ACCOUNT WITH

IN ACCOUNT WITH
Kaiser Transport

(814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mileage

[illegible]

10	FLAT FOX (0-30 miles)
----	-----------------------

100	00
-----	----

100	00
-----	----

- Clearfield Hospital

- Ruth Foster

(03 July 2009)

PAID CHECK # 5282

TOTAL

100 | 00

STATEMENT

DATE _____

July 2009

TERMS

Copyright © 2006 John Wiley & Sons, Ltd.

TO

TO Stranger + Weaver and Johnson's Funeral Service

ADDRESS

ADDRESS Deer Creek Road, P.O. Box 238

Morrisdale PA 16858

(814) 342-2221

IN ACCOUNT WITH

IN ACCOUNT WITH
Kaiser Transport

(814) 649-9532

408 N. 14th St. Philipsburg PA 16866

Milaga

Unit Price

Total

1

FLAT FEE (0-30 Miles)

100

00	
----	--

180	00
-----	----

- Clearfield Hospital

+ Lawrence Albert

(17 July 2009)

Check # 23344

[illegible]

100	00
-----	----

STATEMENT

DATE _____

July 2009

TERMS

TO

TO Clearfield County Coroner

ADDRESS.

ADDRESS 906 Edward St.

Philipsburg PA 16866

IN ACCOUNT WITH

IN ACCOUNT WITH
Kaiser Transport (814) 649-9532

408 N. 14th St Philipsburg PA 16866

Mileage

Unit Price

TOTAL

1	0	FLAT FEE (0-30 miles)
---	---	-----------------------

100	100
-----	-----

100 00

		+ Clearfield Hospital to
--	--	--------------------------

TC Blair Memorial

- Greg Bortner

(19 July 2009)

28	TOTAL LOADED MILEAGE
----	----------------------

200

5600

- Total Mileage is 58

Check # 64266

	TOTAL	
--	-------	--

156	00
-----	----

STATEMENT

DATE _____

TE August 2004

TERMS

TO:

TO: Frank + Weaver and Johnson's Funeral Service

ADDRESS

ADDRESS
Deer Creek Blvd, PO Box 238

Morrisdale, PA 16858

(814) 342-3231

IN ACCOUNT WITH

IN ACCOUNT WITH
Kaiser Transport

(64) 649-9532

408 N. 14th St Phillipsburg PA 16866

Mileage

Unit Price.

Tested D

1

Flat Fee (0-30 miles)

100

1000	1000
1000	1000

- Joseph Pallo

Clearfield Hospital

(30 July 2009)

Check# 23474

TOTAL

100	02
-----	----

STATEMENT

DATE

August 2009

TERMS

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N. 14th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100 00

100 00

- Lon Amilkawich

- Mt. Nittany Mkd Center

(01 August 2009)

35

Total Loaded Mileage

2 00

70 00

- Total Mileage is 65

Check # 64266

TOTAL

170 00

~~TOTAL~~~~150 00~~

STATEMENT

DATE

August 2009

TERMS

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16806

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 Miles)

100 00

100 00

- Lon Amikavich

- Mt. Nittany Med.

Center to Enonick

Funeral Home, DuBois

(01 August 2009)

35

Total Loaded Mileage

2 00

70 00

- Total Mileage is 65

Check # 64266

TOTAL

170 00

STATEMENT

DATE

August 2009

TERMS

TO

Birger A Freeberg Funeral Home Inc

ADDRESS

250 David St

Houtzdale PA 16805 (814) 378-8661

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mileage

Unit Price Total

1

Flat Fee (0-30 Miles)

100

00

100 00

- Eleanor Lenkevich

- Clearfield Hospital

(05 August 2009)

Check # 5333

TOTAL

100 00

STATEMENT

DATE

August 2009

TERMS

TO

Hartford County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

Kaiser Transport

(814) 644-4532

408 N. 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 Miles)

100 00

100 00

- Carmen Yasick

- Home Residence to

Jc. Blair Memorial

(16 Aug 2009)

29

Total Loaded Mileage

200

58 00

- Total Mileage is 59

Check # 64266

TOTAL

158 00

STATEMENT

DATE _____

August 2009

TERMS

TO

TO Birge & Freeberg Funeral Home Inc
ADDRESS

ADDRESS

260 David St

Holtzdale PA 16651 (814) 378-8661

IN 'ACCOUNT WITH

IN ACCOUNT WITH	Kaiser Transport	(814) 649-9532
-----------------	------------------	----------------

408 N. 11th St Philipsburg PA 16866

Mileage

[illegible]

1

Flat Fee (0-30 miles)

1070

10

100

150

+ John Martin

- Windy Hill Village

(18th Aug 2009)

Check # 5366

TOTAL

100

10

STATEMENT

DATE _____

Nearest Road

TERMS

TO

TO Wheatfield County, Indiana
ADDRESS

ADDRESS

ADDRESS 706 E. LAMAR ST

1	Kellogg	1886
---	---------	------

IN ACCOUNT WITH:

IN ACCOUNT WITH: Klein Transport (81) 641 1532

408 N. 11th St Philadelphia PA 19106

Michigan

Lat Rice	
----------	--

	Total
--	-------

Flat Fee 10.30 mile

100	00
-----	----

100	00
-----	----

- Wesley Liddett, Jr.

- Clearfield Hospital

to the Black community

(251-1-1752)

(25 August 2019)

28

TOTAL LOADED MILEAGE 10000

20	20
----	----

56	00
----	----

Total Mileage is 58)

(Total Marking is 50)

Check # 64682

[illegible]

156	00
-----	----

STATEMENT

DATE

August 2009

TERMS

—

TO

Strange + Weaver and Johnson's Funeral Service

ADDRESS

Deer Creek Rd, Po Box 238

Morrisdale PA 16858 (814) 342-2221

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N 11th St Philipshurg PA 16866

Mileage

Unit Price Total

1	Flat Fee (0-30 miles)	100.00	100.00
---	-----------------------	--------	--------

- Wesley Lidgett Jr.

- JC Blair Memorial

(25 August 2009)

14	TOTAL LOADED MILEAGE	2.00	28.00
----	----------------------	------	-------

(Total Mileage is 44)

Check # 23580

TOTAL			128.00
-------	--	--	--------

STATEMENT

DATE _____

August 2009

TERMS

TERMS

TC

TO Goble-Baronick Funeral Home

ADDRESS

ADDRESS 211 S. Main St

Du Bois, PA 15801 (814) 371-3040

IN ACCOUNT WITH

IN ACCOUNT WITH
Kaiser Transport (84) 649-9532

408 N 11th St Philipsburg PA 16866

Milena

Unit Price	Total
------------	-------

1	Flat Fee (0-30 miles)	100	05	100	05
	- Dr. Samuel Barkley				
	- DRMC West, Dr. Barkley				
	to 4170 City Ave,				
	Philadelphia, PA				
	(31 August 2009)				

247	TOTAL LOADED MILEAGE	200	494	00
	(Total Mileage is 277)			

2	TOLLS	5.00	10.00
---	-------	------	-------

		Check # 14229
--	--	---------------

			TOTAL	1004	00
--	--	--	-------	------	----

STATEMENT

DATE _____

October 2009

TERMS

Abstract

TC

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

KAISER TRANSPORT

(814) 649-9532

408 N 11th St Philipsburg PA 16866

Nilegar

Unit Price

Total

1

Flat Fee (0-30 miles)

100

100

100	00
-----	----

- DRmc West to

Mt. Nittany Medical Center

- Jordan Andruonis

(12 September 2009)

35

Total Loaded Mileage	
----------------------	--

200

70 | 00

- Total Mileage is 65

Check # 64879

TOTAL

170	00
-----	----

STATEMENT

DATE _____

OCTOBER 2009

TERMS

TO

Clearfield County Coroner

ADDRESS

Qub Edward SF

Philipsburg PA 16806

IN ACCOUNT WITH	
-----------------	--

ACCOUNT WITH
KUISEY TRANSPORT (314) 649-9532

408 N 11th St 'Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)
- Mt. Whitney Field Center to
Coble-Baronick, Dubois
- Jordan Andronis
(13 September 2009)

1000	000
------	-----

100	00
-----	----

35

Total Loaded Mileage
- Total Mileage is 67

200

74	00
----	----

Check \neq 64879

TOTAL	
-------	--

174	00
-----	----

STATEMENT

DATE _____

OCTOBER 2009

TERMS

TO Clearfield County Coroner

ADDRESS 906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH
Kaiser Transport (814) 619-9532

408 N 11th St Philsburg PA 16866

Mileage

Unit Price

Total

L

Flat Fee (0-30 miles)

100

160

10000

- Clearfield Hospital

to JC Blair Memorial

- Bruce Barrett

(18 September 2009)

28

TOTAL LOADED MILEAGE

200

56 | 00

- Total Mileage is 58

Check# 64879

TOTAL	100	100
-------	-----	-----

156	00
-----	----

STATEMENT

DATE

OCTOBER 2009

TERMS

TO

Clearfield County Coroner

ADDRESS

906 Edward St.

Philipsburg PA 16806

IN ACCOUNT WITH

Kaiser Transport

(814) 649-9532

408 N 11th St Philipsburg PA 16806

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100 00

100 00

- JC Blair Memorial

to Chidbey Funeral

Home, Curwensville

- Bruce Barrett

(18 September 2009)

33

TOTAL LOADED MILEAGE

2 00

66 00

- Total Mileage is 63

Check # 64879

TOTAL

166 00

STATEMENT

DATE _____

OCTOBER 2009

TERMS

TO Strange + Weaver and Johnson's Funeral Service

ADDRESS

Deer Creek Road, Po Box 238

Morrisdale, PA 16858 (814) 342-2221

IN ACCOUNT WITH

IN ACCOUNT WITH
Kaiser Transport (814) 649-9532

408 N 11th St Philipsburg PA 16866

Mileage

Unit Price

Testad

1	Flat Fee (0-30 miles)	100	00	100	00
---	-----------------------	-----	----	-----	----

		- Mt. Nittany Med. Center
--	--	---------------------------

		Kathryn Grieb
--	--	---------------

		(26 September 2009)
--	--	---------------------

Check # 23639

TOTAL

150	00
-----	----

STATEMENT

DATE _____

OCTOBER 2009

TERMS

TC

10
Goble-Barenick Funeral Home

ADDRESS

211 S. Main St.

DuBois, PA 15801

(314) 371-2040

IN ACCOUNT WITH

IN ACCOUNT WITH
Kaiser Transport

(814) 649-9532

408 N. 11th St, Philipsburg, PA 16866

Mileage

Unit Price

Total

1.

Flat Fee (0-30 miles)

100	100
-----	-----

100/00

- Dauphin County Coroners

Office, Harrisburg, PA

- Kristin Bowser

(05 October 2009)

126

TOTAL LOADED MILEAGE

2/22

252 | 00

- Total Mileage is 156

Check # 14312

TOTAL

352 | 00

STATEMENT

DATE

December 2009

TERMS

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipshurg PA 16866

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N. 11th St Philipshurg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100 00

100 00

- from Bennett & Hauser

to Mt. Nittany Med. Center

- Thomas Condon

(10 October 2009)

13

Total Loaded Mileage

2 00

26 00

- Total Mileage is 43

Check # 66161

TOTAL

126 00

STATEMENT

DATE

December 2009

TERMS

—

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mileage Unit Price Total

1

Flat Fee (0-30 miles)

100

00

100 00

- Clearfield Hospital

to Mt Nittany Mkd Center

- John Reish

(18 October 2009)

14

Total Loaded Mileage

2 00

28 00

- Total Mileage is 44

Check # 66161

TOTAL

128 00

STATEMENT

DATE _____

December 2009

TERMS

Keywords:

TC

TO Clearfield County Coroner

ADDRESS

ADDRESS 906 Edward St

Philipsburg PA 11866

IN ACCOUNT WITH	
-----------------	--

IN ACCOUNT WITH
Kaiser Transport (814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)	
-----------------------	--

100

00	
----	--

100	100
-----	-----

-DRMC West to

mt Pittany Med Center

- Michelb⁰ Krach

(20 October 2009)

34

Total Loaded mileage,	
-----------------------	--

200

68 | 00

Total mileage is 64

Check # 66161

TOTAL

168	(r)
-----	-----

STATEMENT

DATE _____

December 2009

TERMS

TC

TO Clearfield County Coroner

ADDRESS

ADDRESS
956 Edward St

Philipsburg PA 16866
IN ACCOUNT WITH

IN ACCOUNT WITH

IN ACCORD WITH
Kaiser Transit

(814) 644-9532

408 N. 11th St Philipsburg PA 16826

Mikael

Unit Price.

Total

1

Flat Fee (0-30 miles)

100

10

1000	25
------	----



- Mt. Nittany Med Center

to Cable Barzanic K.

Dubois, PA

- Michelle Krach

(21 October 2009)

35

Total Loaded Mileage	
----------------------	--

2

Q

7000

00

Total Mileage is 65

Check # 66161

TOTAL	100	100
-------	-----	-----

170	00
-----	----

00

STATEMENT

DATE _____

December 2009

TERMS

TO Clearfield County Coroner

ADDRESS 906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N. 14th St Philipsburg PA 16866

Mikadoe

Unit Price	Total
------------	-------

1	Flat Fee (0-30 miles)	100.00	100.00
---	-----------------------	--------	--------

- Strange + Weaver to

mt Nittany med Center

- Thomas J. Hubler

(24 October 2009)

Check # 66161

DATE	DESCRIPTION	AMOUNT	CHECK NO.	BANK	INITIALS
10/1/78	DEPOSIT	100.00		CHASE	
10/2/78	PAYROLL	50.00	101	CHASE	
10/3/78	RENT	25.00	102	CHASE	
10/4/78	UTILITIES	15.00	103	CHASE	
10/5/78	SALES	75.00	104	CHASE	
10/6/78	DEPOSIT	100.00		CHASE	
10/7/78	PAYROLL	50.00	105	CHASE	
10/8/78	RENT	25.00	106	CHASE	
10/9/78	UTILITIES	15.00	107	CHASE	
10/10/78	SALES	75.00	108	CHASE	
10/11/78	DEPOSIT	100.00		CHASE	
10/12/78	PAYROLL	50.00	109	CHASE	
10/13/78	RENT	25.00	110	CHASE	
10/14/78	UTILITIES	15.00	111	CHASE	
10/15/78	SALES	75.00	112	CHASE	
10/16/78	DEPOSIT	100.00		CHASE	
10/17/78	PAYROLL	50.00	113	CHASE	
10/18/78	RENT	25.00	114	CHASE	
10/19/78	UTILITIES	15.00	115	CHASE	
10/20/78	SALES	75.00	116	CHASE	
10/21/78	DEPOSIT	100.00		CHASE	
10/22/78	PAYROLL	50.00	117	CHASE	
10/23/78	RENT	25.00	118	CHASE	
10/24/78	UTILITIES	15.00	119	CHASE	
10/25/78	SALES	75.00	120	CHASE	
10/26/78	DEPOSIT	100.00		CHASE	
10/27/78	PAYROLL	50.00	121	CHASE	
10/28/78	RENT	25.00	122	CHASE	
10/29/78	UTILITIES	15.00	123	CHASE	
10/30/78	SALES	75.00	124	CHASE	
10/31/78	DEPOSIT	100.00		CHASE	
11/1/78	PAYROLL	50.00	125	CHASE	
11/2/78	RENT	25.00	126	CHASE	
11/3/78	UTILITIES	15.00	127	CHASE	
11/4/78	SALES	75.00	128	CHASE	
11/5/78	DEPOSIT	100.00		CHASE	
11/6/78	PAYROLL	50.00	129	CHASE	
11/7/78	RENT	25.00	130	CHASE	
11/8/78	UTILITIES	15.00	131	CHASE	
11/9/78	SALES	75.00	132	CHASE	
11/10/78	DEPOSIT	100.00		CHASE	
11/11/78	PAYROLL	50.00	133	CHASE	
11/12/78	RENT	25.00	134	CHASE	
11/13/78	UTILITIES	15.00	135	CHASE	
11/14/78	SALES	75.00	136	CHASE	
11/15/78	DEPOSIT	100.00		CHASE	
11/16/78	PAYROLL	50.00	137	CHASE	
11/17/78	RENT	25.00	138	CHASE	
11/18/78	UTILITIES	15.00	139	CHASE	
11/19/78	SALES	75.00	140	CHASE	
11/20/78	DEPOSIT	100.00		CHASE	
11/21/78	PAYROLL	50.00	141	CHASE	
11/22/78	RENT	25.00	142	CHASE	
11/23/78	UTILITIES	15.00	143	CHASE	
11/24/78	SALES	75.00	144	CHASE	
11/25/78	DEPOSIT	100.00		CHASE	
11/26/78	PAYROLL	50.00	145	CHASE	
11/27/78	RENT	25.00	146	CHASE	
11/28/78	UTILITIES	15.00	147	CHASE	
11/29/78	SALES	75.00	148	CHASE	
11/30/78	DEPOSIT	100.00		CHASE	
12/1/78	PAYROLL	50.00	149	CHASE	
12/2/78	RENT	25.00	150	CHASE	
12/3/78	UTILITIES	15.00	151	CHASE	
12/4/78	SALES	75.00	152	CHASE	
12/5/78	DEPOSIT	100.00		CHASE	
12/6/78	PAYROLL	50.00	153	CHASE	
1					

160 00

STATEMENT

DATE _____

December 2009

TERMS

TC

TO Clearfield County Coroner

ADDRESS

ADDRESS
906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

IN ACCOUNT WITH
Kaiser Transport (814) 649-9532

408 N. 11th St Philipsburg PA 16866.

Mileage

Unit Price

Total

1	Flat Fee (0-30 miles)	100	00	100	00
---	-----------------------	-----	----	-----	----

Flat Fee (0-30 miles)

MT Nittany Med Center

To Oakwood Cemetery,

State College, PA

- Thomas J. Hubler

(25 October 2009)

Check # 601601

TOTAL	100	100
-------	-----	-----

100	50
-----	----

STATEMENT

DATE

December 2009

TERMS

—

TO

Birger A Freeberg Funeral Home, Inc.

ADDRESS

200 David St

Hertzdale PA 16651

(814) 378-8661

IN ACCOUNT WITH

Kaiser Transport

(814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100.00

100.00

- mt. Laurel

- Marian Murawski

(31 October 2009)

Check #5463

TOTAL

100

00

STATEMENT

DATE

December 2009

TERMS

—

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

Kaiser Transport (814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

Flat Fee (0-30 miles)

100 00

100 00

- DRMC West to

JC Blair Memorial

- Richard J. Lidd

(11 November 2009)

49

Total Loaded Mileage

2 00

98 00

- Total Mileage is 79

Check # 60161

TOTAL

198 00

STATEMENT

DATE _____

December 2009

TERMS

TO

Clearfield County Prison

ADDRESS

Mr Edward St

16866 PA 16866

IN ACCOUNT WITH

Kaiser Transport

(814) 649-9532

408 N. 11th St Philipsburg PA 16816

mileage	
---------	--

Unit 3

Totals

1

Flat Fee (0-30 miles)	Per Mile (30-100 miles)	Per Mile (100-200 miles)	Per Mile (200-300 miles)	Per Mile (300-400 miles)	Per Mile (400-500 miles)	Per Mile (500-600 miles)	Per Mile (600-700 miles)	Per Mile (700-800 miles)	Per Mile (800-900 miles)	Per Mile (900-1000 miles)
100	1.50	1.25	1.00	0.75	0.50	0.25	0.00	0.00	0.00	0.00

100	00
-----	----

100	00
-----	----

- JC Blair Memorial

to Goble-Barnick

Du Bois, PA

- Richard Liedle

(12 November 2009)

50

TOTAL LOADED MILEAGE

200

100 | 00

Total Mileage is 80

Check #661161

TOTAL

700

STATEMENT

DATE _____

December 2009

TERMS

TO

TO Clearfield County Coroner

ADDRESS

ADDRESS 401 Edward St

Philosburg PA 16866

IN ACCOUNT WITH

IN ACCOUNT WITH
Kaiser Transport (814) 649-9532

408 N. 11th St Phillipsburg PA 16866

Mikael

Unit Price

Total

1.

FLAT FEE (0-30 miles)

10000

100 | 00

- DRMC West to

M+ Rittman Med Center

- Elma Prosser

(17 November 2009)

219

TOTAL #LOADED MILITARY	
------------------------	--

202

98 00

- Total Mileage is 79

Check # 66141

TOTAL

198	00
-----	----

STATEMENT

DATE

December 2009

TERMS

—

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

Kaiser Transport (814) 649-4532

408 N. 11th St Philipsburg PA 16866

Mileage

Unit Price

Total

1

FLAT FEE (0-30 miles)

100 00

100 00

- Mt Nittany Med Center
to Goble, D. Baronick,
DunBris, PA

- Elma Troyer,
(17 November 2009)

49

TOTAL LOADED MILEAGE

2 00

98 00

- Total Mileage is 79

Check # 66161

TOTAL

198 00

STATEMENT

DATE _____

December 2009

TERMS

TO

Kruise Funeral Home

ADDRESS

SS
Po Box 587

Madera PA 16661 (814) 378-7161

IN ACCOUNT WITH	
-----------------	--

ACCOUNT WITH
Kaiser Transport

(814) 649-9532

408 N. 11th St Philipshurg PA 16866

mileage

Wart Price

Total

1

FLAT FEE (0-30 m, 6)

100

02	
----	--

100

+ Bon Secours Hospital

- Linda Yabernetsky

(25 November 2009)

Check # 9291

TOTAL

100

07

STATEMENT

DATE _____

December 2009

TERMS

TO

TO Birger A. Freeberg Funeral Home Inc.

ADDRESS	DATE	TIME	REMARKS
100	10/10/19	10:00	100
101	10/10/19	10:00	101
102	10/10/19	10:00	102
103	10/10/19	10:00	103
104	10/10/19	10:00	104
105	10/10/19	10:00	105
106	10/10/19	10:00	106
107	10/10/19	10:00	107
108	10/10/19	10:00	108
109	10/10/19	10:00	109
110	10/10/19	10:00	110
111	10/10/19	10:00	111
112	10/10/19	10:00	112
113	10/10/19	10:00	113
114	10/10/19	10:00	114
115	10/10/19	10:00	115
116	10/10/19	10:00	116
117	10/10/19	10:00	117
118	10/10/19	10:00	118
119	10/10/19	10:00	119
120	10/10/19	10:00	120
121	10/10/19	10:00	121
122	10/10/19	10:00	122
123	10/10/19	10:00	123
124	10/10/19	10:00	124
125	10/10/19	10:00	125
126	10/10/19	10:00	126
127	10/10/19	10:00	127
128	10/10/19	10:00	128
129	10/10/19	10:00	129
130	10/10/19	10:00	130
131	10/10/19	10:00	131
132	10/10/19	10:00	132
133	10/10/19	10:00	133
134	10/10/19	10:00	134
135	10/10/19	10:00	135
136	10/10/19	10:00	136
137	10/10/19	10:00	137
138	10/10/19	10:00	138
139	10/10/19	10:00	139
140	10/10/19	10:00	140
141	10/10/19	10:00	141
142	10/10/19	10:00	142
143	10/10/19	10:00	143
144	10/10/19	10:00	144
145	10/10/19	10:00	145
146	10/10/19	10:00	146
147	10/10/19	10:00	147
148	10/10/19	10:00	148
149	10/10/19	10:00	149
150	10/10/19	10:00	150
151	10/10/19	10:00	151
152	10/10/19	10:00	152
153	10/10/19	10:00	153
154	10/10/19	10:00	154
155	10/10/19	10:00	155
156	10/10/19	10:00	156
157	10/10/19	10:00	157
158	10/10/19	10:00	158
159	10/10/19	10:00	159
160	10/10/19	10:00	160
161	10/10/19	10:00	161
162	10/10/19	10:00	162
163	10/10/19	10:00	163
164	10/10/19	10:00	164
165	10/10/19	10:00	165
166	10/10/19	10:00	166
167	10/10/19	10:00	167
168	10/10/19	10:00	168
169	10/10/19	10:00	169
170	10/10/19	10:00	170
171	10/10/19	10:00	171
172	10/10/19	10:00	172
173	10/10/19	10:00	173
174	10/10/19	10:00	174
175	10/10/19	10:00	175
176	10/10/19	10:00	176
177	10/10/19	10:00	177
178	10/10/19	10:00	178
179	10/10/19	10:00	179
180	10/10/19	10:00	180</

ADDRESS 200 Archol St

Houtzdale PA 16651 (814) 378-8661

IN ACCOUNT WITH	
-----------------	--

IN ACCOUNT WITH
Kaiser Transport (814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mikeage

[illegible]

1	Flat Fee (0-30 miles)	100.00	100.00
---	-----------------------	--------	--------

- Windy Hill Village

- Mary Stodart

(13 December 2009)

check # 5510

TOTAL

100	00
-----	----

STATEMENT

DATE

December 2009

TERMS

—

TO

Clearfield County Coroner

ADDRESS

906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

Kaiser Transport

(814) 144-4532

408 N. 14th St Philipsburg PA 16866

Mileage.

Unit Price

Total

1

Flat Fee (0-30 miles)

100 00

100 00

- Clearfield Hospital to

TeBlair Memorial

- Donna Stiffler

(15 December 2009)

29

Total Loaded Mileage

2 00

58 00

- Total Mileage is 59

TOTAL

158 00

STATEMENT

DATE _____

December 2009

TERMS

TO

TO Clearfield County Coroner
ADDRESS _____

ADDRESS

ADDRESS 906 Edward St

Philipsburg PA 16866

IN ACCOUNT WITH

IN ACCOUNT WITH
Kaiser Transport (814) 149-9532

408 N. 11th St Philipsburg PA 16866

Mileage

[illegible]

1	Flat Fee (0-30 miles)	100	00	100	00
---	-----------------------	-----	----	-----	----

- DRMC is best to

Met. Nitroxy Med. Co

1	John Doe	
---	----------	--

(18 December)

25

Total Loaded Mileage

200

70 | 00

- Total Mileage: 65

Category	Value
1	10
2	20
3	30
4	40
5	50
6	60
7	70
8	80
9	90
10	100
Total	500

170	00
-----	----

STATEMENT

DATE _____

December 2009

TERMS

TC

TO Clearfield County Coroner
ADDRESS

ADDRESS

906 Edward St

Philisburg PA 116806

IN ACCOUNT WITH

Kaiser Transport

(814) 649-9532

408 N. 11th St Philipshurg PA 16866

Mileage

Unit Price

Total V

1

Flat Fee (0-30 miles)	
-----------------------	--

100/60

100 00

- Robert Konz

- DRMC, Upst to

Met Pittsford Med Center
(18 December 2009)

25

Total Loaded Mileage

200

70 | 00

- Total Mileage is 65

	TOTAL
--	-------

170 GC

STATEMENT

DATE _____

December 2009

TERMS

TO

TO Goble Barovick Funeral Home
ADDRESS

ADDRESS

211 S. Main St

Du Bois PA 15861

(814) 371-2040

IN ACCOUNT WITH	
-----------------	--

Kaiser Transport

(814) 649-9532

408 N. 11th St Philipsburg PA 16866

mileage.

Unit + Price

Total

Abstract

Flat Fee (0-30 miles)

100	00
-----	----

100	050
-----	-----

- Geisinger, David

Mildred Reasinger

(20 December 2009)

118

TOTAL LOADED MILES

202

2300

-Total Mileage is 148

Check # 14597

TOTAL	100	100
-------	-----	-----

336	00
-----	----

STATEMENT

DATE _____

December 2021

TERMS

TC

ADDRESS Greenville County Courthouse

ADDRESS

986 Edward St

Phillipsburg PA 16804

IN ACCOUNT WITH

Kaiser Transport (84) 444-9531

408 N. 14th St Philipsburg PA 16870

Mileage

[illegible]

1

Flat Fee (1-30 miles)	Per Mile	Per Hour
10.00	1.00	1.00
15.00	1.00	1.00
20.00	1.00	1.00
25.00	1.00	1.00
30.00	1.00	1.00
35.00	1.00	1.00
40.00	1.00	1.00
45.00	1.00	1.00
50.00	1.00	1.00
55.00	1.00	1.00
60.00	1.00	1.00
65.00	1.00	1.00
70.00	1.00	1.00
75.00	1.00	1.00
80.00	1.00	1.00
85.00	1.00	1.00
90.00	1.00	1.00
95.00	1.00	1.00
100.00	1.00	1.00

150	50
-----	----

Total

150	50
-----	----

100-55-

- Mt. Pleasant Mod. Ctr.

to Cable Bakerick

Federal Home Office

+ Robert Koss

	Robert Konz
	(30.11.2020)

(20 December 2009)

49

TOTAL LOADED MUSEUM

2	10
---	----

98	10
----	----

Total Miles is 79

TOTAL	
-------	--

198	00
-----	----

STATEMENT

DATE _____

December 2009

TERMS

TC

TO December 2
ADDRESS Clearfield County Coroner

ADDRESS

ADDRESS 906 Edward St

Philipstburg PA 16866

IN ACCOUNT WITH

IN ACCOUNT WITH
Kaiser Transport (814) 649-9532

408 N. 11th St Phillipsburg PA 16866

Sl. No.	Particulars	Amount
1	Mileage	

Unit Price

Total D

1

Flat Fee (0-30 miles)

100	00
-----	----

100	50
-----	----

- Mt Pittman Med Center

to Bill For $\frac{1}{2}$ St

Crematory Altoona

- John Doe

21 December 2009

18

TOTAL LOADED MILEAGE

200

3600

- Total Mileage is 48

[illegible]

136.00

STATEMENT

DATE _____

December 2009

TERMS

TC

TO Birger A. Freeberg Funeral Home Inc.
ADDRESS

ADDRESS

200 David St

Holtzdale PA 16651 (814) 378-8661

IN ACCOUNT WITH

IN ACCOUNT WITH
Kaiser Transport (814) 649-9532

408 N. 11th St Philipsburg PA 16866

Mileage

Unit Price.	Total
100	100
200	200
300	300
400	400
500	500
600	600
700	700
800	800
900	900
1000	1000
1100	1100
1200	1200
1300	1300
1400	1400
1500	1500
1600	1600
1700	1700
1800	1800
1900	1900
2000	2000
2100	2100
2200	2200
2300	2300
2400	2400
2500	2500
2600	2600
2700	2700
2800	2800
2900	2900
3000	3000
3100	3100
3200	3200
3300	3300
3400	3400
3500	3500
3600	3600
3700	3700
3800	3800
3900	3900
4000	4000
4100	4100
4200	4200
4300	4300
4400	4400
4500	4500
4600	4600
4700	4700
4800	4800
4900	4900
5000	5000
5100	5100
5200	5200
5300	5300
5400	5400
5500	5500
5600	5600
5700	5700
5800	5800
5900	5900
6000	6000
6100	6100
6200	6200
6300	6300
6400	6400
6500	6500
6600	6600
6700	6700
6800	6800
6900	6900
7000	7000
7100	7100
7200	7200
7300	7300
7400	7400
7500	7500
7600	7600
7700	7700
7800	7800
7900	7900
8000	8000
8100	8100
8200	8200
8300	8300
8400	8400
8500	8500
8600	8600
8700	8700
8800	8800
8900	8900
9000	9000
9100	9100
9200	9200
9300	9300
9400	9400
9500	9500
9600	9600
9700	9700
9800	9800
9900	9900
10000	10000

[illegible]

gas.

1/2/09
c/cccc gas

1/19/09
gas

2/6/09

Sheetz
1/2/2009 9:00
AM
Sheetz #064
808 North Front Street
Philipsburg, PA 1686
(814) 342-6433
Store: 064
Appr:07583
Pump No: 06
Unleaded @ \$1.699/G
Volume: 7.649 Gal
Gas Total: \$13.00
Total \$13.00
Visa

Visa
XXXXXXXXXXXX7288
01/02/2009 08:58:34
Thanks for your
business.

Sheetz
2/2009 4:51
PM
Sheetz #187
509 East Plank Road
Altoona, PA 16602
(814) 944-2725
Store: 187
Appr:05471
Pump No: 01
Unleaded @ \$1.659/G
Volume: 15.672 Gal
Gas Total: \$26.00
Total \$26.00
Visa

Visa
XXXXXXXXXXXX7288
01/02/2009 16:47:10
Thanks for your
business.

Sheetz
1/19/2009 4:45
PM
Sheetz #064
808 North Front Street
Philipsburg, PA 1686
(814) 342-6433
Store: 064
Appr:05432
Pump No: 07
Unleaded @ \$1.859/G
Volume: 13.450 Gal
Gas Total: \$25.00
Total \$25.00
Visa

Visa
XXXXXXXXXXXX7288
01/19/2009 16:43:22
Thanks for your
business.

Sheetz
2/6/2009
PM
Sheetz #064
808 North Front Street
Philipsburg, PA 1686
(814) 342-6433
Store: 064
Appr:01335
Pump No: 9
Unleaded @ \$
Volume: 9
Gas Total:
Total
Visa

Visa
XXXXXXXXXXXX7288
02/06/2009 1:
Thanks for
business.

2.17.09

gas

2/17/2009 8:31 AM

Sheetz #064
808 North Front Street
Philipsburg, PA 16866
(814) 342-6433
Store: 064
Appr:07274

Pump No: 04
Unleaded @ \$2.059/G
Volume: 16.025 Gal

Gas Total: \$33.00
Total \$33.00

Visa

Visa

XXXXXXXXXXXX7288

02/17/2009 08:27:44

Thanks for your business.

2.28.09

gas

Sheetz
2/28/2009 8:00 PM

Sheetz #064
808 North Front Street
Philipsburg, PA 16866
(814) 342-6433
Store: 064
Appr:08582

Pump No: 08
Unleaded @ \$1.939/G
Volume: 15.987 Gal

Gas Total: \$31.00
Total \$31.00

Visa

Visa

XXXXXXXXXXXX7288

02/28/2009 19:58:25

Thanks for your business.

0

3/6/2009 5:56 PM

Sheetz #064
808 North Front Street
Philipsburg, PA 16866
(814) 342-6433
Store: 064
Appr:06540

Pump No: 04
Unleaded @ \$1.999/G
Volume: 12.009 Gal

Gas Total: \$24.01
Total \$24.01

Visa

Visa

XXXXXXXXXXXX7288

03/06/2009 17:53:58

Thanks for your business.

gas

3.15.09

3/15/2009

Sheetz #064
808 North Front Street
Philipsburg, PA 16866
(814) 342-6433
Store: 064
Appr:08465

Pump No: 04
Unleaded @ \$1.999/G
Volume: 15.009 Gal

Gas Total: \$24.01
Total \$24.01

Visa

Visa

XXXXXXXXXXXX7288

03/15/2009 17:53:58

Thanks for your business.

4.16.09
gas

4/16/2009 12:01 AM

Sheetz #064
808 North Front Street
Philipsburg, PA 1686
6
(814) 342-6433
Store: 064
Appr:02590

Pump No: 06
Unleaded @ \$2.079/G
Volume: 14.910 Gal

Gas Total: \$31.00
Total \$31.00

Visa

Visa
XXXXXXXXXXXX7288

04/15/2009 23:58:49

Thanks for your
business.

4.5.09
gas

4/5/2009 10:39 PM

Sheetz #064
808 North Front Street
Philipsburg, PA 1686
6
(814) 342-6433
Store: 064
Appr:01362

Pump No: 06
Unleaded @ \$2.099/G
Volume: 13.338 Gal

Gas Total: \$28.00
Total \$28.00

Visa

Visa
XXXXXXXXXXXX7288

04/05/2009 22:36:10

Thanks for your
business.

3.9.09 - gas ✓

Sheetz #064
808 North Front Street
Philipsburg, PA 16866
(814) 342-6433

3/9/2009 1:26:46 AM
Fuel Destination

Order Number: 513

Register:100
Pay at Pump Sale
Pump Number 6
Unleaded (87), Self Ser
Gallons 15.008
Price/Gal \$1.999 \$30.00

Sub. Total: \$30.00
Tax: \$0.00
Total: \$30.00

Discount Total: \$0.00

Visa: \$30.00
Change \$0.00

Visa
XXXXXXXXXXXX7288

03/09/2009 01:26:46

Thanks for your
business.

5/16/09

gas.

153237
Wawa Store #275
2126 Lincoln Hwy E.
Lancaster, PA 17572

Date 05/16/09
Time 16:32:41
Auth # 053001

VISA
7288

Pump Gallons Price
14 15.939 \$2.259
Product Amount
UNLEADED \$36.01
Total Sale \$36.01

THANK YOU FOR
FUELING AT WAWA!

gas 5.15.09
Sheetz

5/15/2009 11:06 PM

Sheetz #096
132 North Broad St.
Ridgway, PA 15853
(814) 776-0531
Store: 096
Appr:02043

Pump No: 03
Unleaded @ \$2.359/G
Volume: 16.109 Gal

Gas Total: \$38.00
Total \$38.00

Visa

Visa
XXXXXXXXXXXX7288

05/15/2009 23:04:40

Thanks for your
business.

4.23.09
gas

4/23/2009 9:02 PM

Sheetz #064
808 North Front Stre
et
Philipsburg, PA 1686
6
(814) 342-6433
Store: 064
Appr:00003

Pump No: 05
Unleaded @ \$2.39/G
Volume: 13.76 Gal

Gas Total: \$28.50
Total \$28.50

Visa

Visa
XXXXXXXXXXXX7288

04/23/2009 21:00:18

Thanks for your
business.

WILCOFF, PA 16800
53 NORTH
PHILIPS, PA 16800
342 1870

WILCOFF, PA 16800
53 NORTH
PHILIPS, PA 16800
342 1870

WILCOFF, PA 16800
53 NORTH
PHILIPS, PA 16800
342 1870

WILCOFF, PA 16800
53 NORTH
PHILIPS, PA 16800
342 1870

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342 1870

WILCOFF, PA 16800
53 NORTH
PHILIPS, PA 16800
342 1870

WILCOFF, PA 16800
53 NORTH
PHILIPS, PA 16800
342 1870

gas

5.13.09

6.9.09
fuel

gas.

6/28/2009 8:45 PM
Sheetz #064
808 North Front Street
Philipsburg, PA 16866
(814) 342-6433
Store: 064
Appr: 094331
Pump No: 06
Unleaded @ \$2.599/G
Volume: 13.466 Gal
Gas Total: \$35.00
Total: \$35.00
Visa

Visa
XXXXXXXXXXXX7288
06/28/2009 20:43:34

Thanks for your business.

SUPPLY 2
PT 050 100
TYRON, PA 16866
0750857
SUPPLY 2
PT 050 100
TYRONE
TRAN # 000058
DATE 06/28/09 15:23
TIME # 02
PRODUCT 140E
15.540
15.540
15.540
FULL BALL \$ 41.00
VISA
06/28/2009 15:23
Auth # 052100
Exp 05/77010
Acct Code: 0000
Attn: 0785101 003
SITE ID 0700007

42.00

Bring a 1% rebate with the BP Visa
Telo application and App a Today

THANK YOU
HAVE A NICE DAY

6.15.09
gas.

6/15/2009 9:09 AM
Sheetz #064
808 North Front Street
Philipsburg, PA 16866
(814) 342-6433
Store: 064
Appr: 080611
Pump No: 03
Unleaded @ \$2.659/G
Volume: 14.291 Gal
Gas Total: \$38.00
Total: \$38.60
Visa

Visa
XXXXXXXXXXXX7288
06/15/2009 09:06:12

Thanks for your business.

gas.

7/17/2009 3:52
Sheetz #064
808 North Front Street
Philipsburg, PA 16866
(814) 342-6433
Store: 064
Appr: 025022

Pump No: 06
Unleaded @ \$2.459/G
Volume: 14.639 Gal
Gas Total: \$36.00
Total: \$36.00
Visa

Visa
XXXXXXXXXXXX7288
07/17/2009 03:50:22

Thanks for your business.

8.1.09 gas

Sheetz
8/1/2009 8:42 PM
SHEETZ #063
701 East Dubois Avenue
Dubois, Pa 15801
(814) 371-0139
Store: 063
Appr: 094018

Pump No: 11
Unleaded @ \$2.559/G
Volume: 17.194 Gal

Gas Total: \$44.00
Total \$44.00

Visa

Visa
XXXXXXXXXXXX7288

08/01/2009 20:39:49

Thanks for your
business.

8.25.09
gas.

808 N Front St
Philipsburg
PA 16866
(814) 342-6433

Pump No: 06
Unleaded @ \$2.639/G
Volume: 11.747 Gal

Gas Total: \$31.00
Total \$31.00

014019

Visa

XXXXXXXXXXXX7288

08/25/2009 02:40:18

08/31/2009
gas.

Sheetz #063
701 E Dubois Ave
Dubois, PA 15801
(814) 371-0139

Pump No: 09
Unleaded @ \$2.639/G
Volume: 13.300 Gal

Gas Total: \$35.10
Total \$35.10

Approval: 064545

Visa

XXXXXXXXXXXX7288

08/31/2009 17:45:42

uct
aded
Gallons Price
20.589 2.579
Amount
\$53.10

is #324
linville, PA
1/09 00:45:00
et: 914046
oval: VISA
: VISA
*****7288

Mifflinville, PA

09/01/2009
Fuel

808 N Front St
Philipsburg
PA 16866
(814) 342-6433

Pump No: 07
Unleaded @ \$2.499/G
Volume: 15.208 Gal

Gas Total: \$38.00
Total \$38.00

072846
Visa
XXXXXXXXXXXX7288

10/05/2009 18:28:47

gas

9.13.09
gas
808 N Front St
Philipsburg
PA 16866
(814) 342-6433

Pump No: 08
Unleaded @ \$2.599/G
Volume: 14.234 Gal

Gas Total: \$37.00
Total \$37.00

37.00

808 N Front St
Philipsburg
PA 16866
(814) 342-6433

Pump No: 08
Unleaded @ \$2.559/G
Volume: 10.940 Gal

Gas Total: \$28.00
Total \$28.00

042455
Visa
XXXXXXXXXXXX7288

09/18/2009 15:24:55

gas

808 N Front St
Philipsburg
PA 16866
(814) 342-6433

Pump No: 05
Unleaded @ \$2.499/G
Volume: 10.404 Gal
Gas Total: \$26.00
Total \$26.00

065926
Visa
XXXXXXXXXXXX7288

09/26/2009 17:59:28

gas

808 N Front St
Philipsburg
PA 16866
(814) 342-6433

Pump No: 06
Unleaded @ \$2.699/G
Volume: 16.671 Gal

Gas Total: \$45.00
Total \$45.00

021856
Visa
XXXXXXXXXXXX7288
11/11/2009 13:19:00

gas

808 N Front St
Philipsburg
PA 16866
(814) 342-6433

Pump No: 03
Unleaded @ \$2.759/G
Volume: 16.310 Gal

Gas Total: \$45.00
Total \$45.00

010009
Visa
XXXXXXXXXXXX7288
10/24/2009 12:00:09

gas

808 N Front St
Philipsburg
PA 16866
(814) 342-6433

Pump No: 06
Unleaded @ \$2.699/G
Volume: 9.261 Gal

Gas Total: \$25.00
Total \$25.00

093337
Approval :
Visa
XXXXXXXXXXXX7288
10/20/2009 20:30:33

gas

Sheetz #063
701 E Dubois Ave
Dubois, PA 15801
(814) 371-0139

Pump No: 09
Unleaded @ \$2.599/G
Volume: 20.491 Gal
Gas Total: \$53.26
Total \$53.26

085627
Visa
XXXXXXXXXXXX7288
11/17/2009 19:56:23

gas

Sheetz #063
701 E Dubois Ave
Dubois, PA 15801
(814) 371-0139

Pump No: 10
Unleaded @ \$2.599/G
Volume: 13.854 Gal
Gas Total: \$36.01
Total \$36.01

074948
Visa
XXXXXXXXXXXX7288
12/18/2009 18:49:42

12.18.09 gas

Postage 05/19/09 2009
weis

THANKS FOR SHOPPING WEIS MARKETS #118
501 NORTH CENTRE ST
PHILLIPSBURG, PA 16866
TELEPHONE: 814-342-6451

YOUR CASHIER TODAY WAS COURTNEY

2 @ 8.80

FOREVER STAMP BK20	17.60
TAX	0.00
**** BALANCE	17.60
VF PERSONAL CHECK	17.60
CHANGE	0.00

TOTAL NUMBER OF ITEMS SOLD = 2
05/19/09 05:30pm 118 501 138 320

ASK US HOW OUR WEIS SHOPPERS CLUB
CAN SAVE YOU \$\$'S EVERYDAY

WEIS CLUB MEMBERS
HAVE THE POWER TO SAVE MORE

gas 12/20/09

808 N Front St
Phillipsburg
PA 16866
(814) 342-6433

Pump No: 05
Unleaded @ \$2.599/G
Volume: 6.541 Gal

Gas Total: \$17.00
Total \$17.00

093129

Visa
XXXXXXXXXXXX7288

12/20/2009 10:31:26

gas

808 N Front St
Phillipsburg
PA 16866
(814) 342-6433

Pump No: 06
Unleaded @ \$2.599/G
Volume: 15.004 Gal

Gas Total: \$39.00
Total \$39.00

070339

Visa
XXXXXXXXXXXX7288

12/20/2009 18:03:37

Postage November 2009
weis
(17.60)

THANKS FOR SHOPPING WEIS MARKETS #118
501 NORTH CENTRE ST
PHILLIPSBURG, PA. 16866
TELEPHONE: 814-342-6451

YOUR CASHIER TODAY WAS Jennifer

2 @ 8.80

MADONNA CHILD STMP	17.60
TAX	0.00
**** BALANCE	17.60

CREDIT PAYMENT
REF : 052845
ACCT: *****8888 EXP: XXX
SEQ: 195329882
TOTAL: \$17.60

CREDIT	17.60
CHANGE	0.00

TOTAL NUMBER OF ITEMS SOLD = 2
11/04/09 04:29pm 118 501 192 315

ASK US HOW OUR WEIS SHOPPERS CLUB
CAN SAVE YOU \$\$'S EVERYDAY
WEIS CLUB MEMBERS
HAVE THE POWER TO SAVE MORE

2/17/09

RECEIPT

Crystal Clean Auto Spa
924 N Front Street
Philipsburg PA 18866

TRANSPORT/KAISER
*****7288

2-17-2009 8:55:10 AM

Credit \$9.00

Total \$9.00

THANK YOU!
Please visit us again

1/4/09 C/CAAC

Crystal Clean Auto Spa
924 N. Front St.
Philipsburg Pa 18866

TRANSPORT/KAISER
*****7288

01/04/2009 01:57:53 PM

Credit \$ 7.00
Cash \$ 0.00
Code \$ 0.00

Total \$ 7.00

THANK YOU FOR VISITING
OUR FACILITY !!!!

RECEIPT

Crystal Clean Auto Spa
924 N Front Street
Philipsburg, PA 18866

*****7288

1-1-2009 12:23:20 PM

Credit \$9.00

Total \$9.00

THANK YOU!
Please visit us again

5.15.09

Crystal Clean Auto Spa
924 N. Front St.
Philipsburg Pa 18866

TRANSPORT/KAISER
*****7288

05/15/2009 12:18:40 PM

Credit \$ 9.00
Cash \$ 0.00
Code \$ 0.00

Total \$ 9.00

THANK YOU FOR VISITING
OUR FACILITY !!!!

Crystal Clean Auto Spa
924 N. Front St.
Philipsburg Pa 18866

TRANSPORT/KAISER
*****7288

03/06/2009 05:51:54 PM

Credit \$ 9.00
Cash \$ 0.00
Code \$ 0.00

Total \$ 9.00

THANK YOU FOR VISITING
OUR FACILITY !!!!

2/6/09

Crystal Clean Auto Spa
924 N. Front St.
Philipsburg Pa 18866

TRANSPORT/KAISER
*****7288

02/06/2009 01:55:07 PM

Credit \$ 9.00
Cash \$ 0.00
Code \$ 0.00

Total \$ 9.00

THANK YOU FOR VISITING
OUR FACILITY !!!!

Check # 1178 02/12/2009

Twice Book

Walmart
Save money. Live better.

S U P E R C E N T E R

WE SELL FOR LESS

MANAGER JOSH KUNKLE

(814) 765 8089

STL 2129 OP# 00032507 IE# 18 TR# 02429

STATEMENT BK 008795805312 3.44 X

SUBTOTAL 3.44

TAX 1 6.00 % 0.21

TOTAL 3.65

ECA CHECK TEND 3.65

CHANGE DUE 0.00

When you pay by check, you authorize us to use its information to process an Electronic Funds Transfer (EFT) or a draft drawn on your account, or to process the payment as a check. If payment is returned unpaid, you authorize collection of your payment and the Return Fee below by EFT(s) or draft(s) drawn on your account. Call 888-905-3388 with any questions. RETURN FEE AMOUNT \$0.00

ITEMS SOLD 1

TC# 2504 0395 0312 2738 4351



Get unique Valentine's Day ideas and more at walmart.com/sweetideas

02/12/09 14:36:37

8.16.09

Crystal Clean Auto Spa
924 N. Front St.
Philipsburg Pa 1866

08/11/2009 11:08:02 AM

Credit \$ 7.00
Cash \$ 0.00
Code \$ 0.00

Total \$ 7.00

THANK YOU FOR VISITING

6.25.09

Crystal Clean Auto Spa
924 N. Front St.
Philipsburg Pa 1866

06/26/2009 01:16:21 PM

Credit \$ 9.00
Cash \$ 0.00
Code \$ 0.00

Total \$ 9.00

THANK YOU FOR VISITING

Crystal Clean Auto Spa
924 N. Front St.
Philipsburg Pa 1866

06/11/2009 05:51:37 PM

Credit \$ 7.00
Cash \$ 0.00
Code \$ 0.00

Total \$ 7.00

THANK YOU FOR VISITING

1.2.09

food

FIVE GUYS
BUFFERS AND FRIES

STORE # MD-184

50 CARR - CREEK STE 110

FR: ERICK, M J1

(P) 301-662-7140

(F)

15.12

1/2/2009 1:38:09 PM

FIVE GUYS

72

Order Number:

4 93

CB

ONION

LETTUCE

-> SHROOM

TOMATO

CB

LETTUCE

TOMATO

-> SHROOM

ONION Lite

Fry

Soft Drink

2.59

1.69

Sub. Total:

Tax:

Total:

\$14.26

\$0.86

\$15.12

Visa:

Change

Register:2

Cashier:Jenny S.

\$15.12

\$0.00

6772

THANK YOU

HAVE A NICE DAY

FOR QUESTIONS OR COMMENTS

WWW.FIVEGUYS.COM

1-866-345-GUYS

* Show everyone you're a

* FIVE GUYS fanatic

* Get FIVE GUYS gear online.

* www.fiveguys.com

6.3.09

food

Apply online at
www.weis.com/food
to receive 10% off your purchase

PHILLIPS 66
PHILLIPSBURG, PA 16801

WEIS

PHILLIPS 66
PHILLIPSBURG, PA 16801

PHILLIPS 66
PHILLIPSBURG, PA 16801

PHILLIPS 66
PHILLIPSBURG, PA 16801

PHILLIPS 66
PHILLIPSBURG, PA 16801

PHILLIPS 66
PHILLIPSBURG, PA 16801

CHANGE 0.00

5.34

9.09

food

weis

THANKS FOR SHOPPING WEIS MARKETS #118
501 NORTH CENTRE ST
PHILLIPSBURG, PA. 16866
TELEPHONE: 814-342-6451

YOUR CASHIER TODAY WAS DIANA

A A HOAGIE PC 3.99 B
2 @ 1.27
LIP NDL SOUP 2 54 F
TAX 0.24
**** BALANCE 6.77

CREDIT PAYMENT

REF : 074700

ACCT: *****7288 EXP: XXX

SEQ: 180029389

TOTAL: \$6.77

CREDIT 6.77
CHANGE 0.00

TOTAL NUMBER OF ITEMS SOLD = 3
06/09/09 06:47pm 118 108 202 171

Sheetz #100
1661 East Pleasant Valley Blvd
Alltoona, PA 16602
(814) 944-3407

6/25/2009 2:52:00 PM
POS Terminal

Order Number: 330, 229

Register: 3

+ Order #229

1 Hot Dog

+ Chili Sauce

\$0.69

+ Master Tran:

1 44 oz Drink

\$1.49

Sub. Total:

\$2.47

Tax:

\$0.15

Total:

\$2.62

Discount Total:

\$0.00

Visa:

Change

\$2.62

\$0.00

Visa

Card Num : XXXXXXXXXX7288

Store : 0100

Call : 035201

Date : 2009/06/25 14:51:59

food 06/25/2009

Food 08/31/2009

Thanks for choosing our McDonalds!

ROUTE 255
DUBOIS, PA
15801

!!! THANK YOU !!!
TEL# 814-375-4150 Store# 12375

KS# 12 Aug.31'09 (Mon) 18:09

MFY SIDE 1 KVS Order 21

QTY ITEM	TOTAL
2 HNYMU SNACK WRAP-GRL	3.00
1 LRG FRENCH FRIES	1.90
1 LRG SWEET ICED TEA	1.00

Subtotal	5.90
Tax	0.35
Take-Out Total	6.25

Cashless	6.25
Change	0.00

MER# KB42486158001
CARD ISSUER ACCOUNT#
Visa SALE *****7288
AUTHORIZATION CODE - 070928 SEQ# 3428

Food 06/28/2009

TEXAS ROADHOUSE
1835 Waddle Road
State College, PA 16803
814-235-7427

Server: JASON DOB: 06/28/2009
05:48 PM 06/28/2009
Table 416/1 7/70025

VISA 3145774
Card #XXXXXXXXXXXX7606
Magnetic card present: HANSEL MICHAEL J
Approval: 064609

Amount: 17.15

+ Tip: 3.00

= Total: 20.15

X M. Michael Hansel

d

hfëä

GUEST COPY

#03 by 00334/DEBRA
THANK YOU, PLEASE COME AGAIN
PHONE (814)664-1106

Change = 0.00

Credit Card = 5.50
Card Name : TRANSPORT/KAISER
Account : VI/XXXXXXXXXXXX7288
Approval : 015119
Bank Seq : 0000
Ref : 47

WHOPPER

GRAND TOTAL = 5.50
Tax = 0.31
Adj Total = 5.19
Discount = -0.98
Sub = 6.17

QTY	ITEM	U/PRICE	SUBTOTAL
1	WHOPPER		2.99
1	SMALL FRY		1.59
1	SMALL DRINK		1.59

Store: 2551 - GDK DEVELOPMEN
Check: 0322 06/12/09 17:51PM
Server: 00334/DEBRA

RESTAURANT #2551
BURGERKING
IN

Your Order # 0322

6.12.09

MAIN CHINESE RESTAURANT
104 N. FRONT ST.
PHILIPSBURG, PA 16866
(814) 342-7285
MID #878929089278

Merchant ID: 088290099278

Sale

XXXXXXXXXXXX7283

VISA

Exp: 02/13

Entry Method: Swiped

Amount:

\$ 6.65

Tip:

Total:

09/26/09

18:25:05

Inv#: 000345

Appr Code: 072525

Apprvd: Online

batch#: 000241

Customer Copy
THANK YOU!
COME AGAIN!

Term ID: 001207
455163862595

Sa:

VISA

XXXXXXXXXXXX7283

10/21/09

18:01

Inv #: 000051

Amount:

\$ 6.65

Tax:

\$ 0.35

Total:

(6.24)

food 10/21/2009

Food 09/01/2009

THANK YOU FOR STOPPING AT LOVES

ARBY'S 524

PIFFERVILLE, PA

570-752-9019

Store # 524

Check # 24

To Go

Drawer # 5

Sale # 00540541

1 MED BEEF N CHDR	4.59
1 MAKE A CCMEQ	0.00
LG CURLEY FRY	1.50
LARGE DRINK	1.50

TAX STRUCTURE 0.46

Total Due 8.05

VISA 8.05

Change Due 0.00

VISA 8.05

XXXXXXXXXXXX7288

Auth #: 035516

swiped

Ref:

00000078

Customer Copy

THANKS FOR VISITING
WE APPRECIATE YOUR BUSINESS
CLEAN PLACES SMILING FACES

Tue Sep 01 2009 12:55AM



NAPA AUTO PARTS
318 NORTH THIRD ST.
CLEARFIELD, PA 16830
PHONE: (814) 765-7868
FAX: (814) 765-3821

NAPA AUTO PARTS
903 NORTH FRONT ST.
PHILIPSBURG, PA 16866
PHONE: (814) 342-5070
FAX: (814) 342-3825

NAPA AUTO PARTS
315 FILBERT ST.
CURWENSVILLE, PA 16833
PHONE: (814) 236-3680
FAX: (814) 236-3689

NAPA AUTO PARTS
R.D. #4 BOX 139
TYRONE, PA 16886
PHONE: (814) 686-0213
FAX: (814) 686-1781

CONTROL NO. 1906375

REF BY

ACCT. NO. SOLD TO

00000 CASH SALE - TAXABLE
THANK YOU - YOUR PATRONAGE
IS APPRECIATED, PA

(21) 01-#####7289/001232 11

QUANTITY PART NUMBER

2000 Oldsmobile Silhouette
1.00 49-719 RAY
1.00 49-719 RAY
1.00 49-719 RAY

WAKE HYDRAULICS

LINE DESCRIPTION

REMAN WIP 100.690
CORE DEPD
CORE DEPD

PRICE

73.72
27.78
27.78

NET

73.72
27.78
27.78

TOTAL

78.15

SUB TOTAL

73.72

0.00

6.000 % TAX

4.43

TOTAL

78.15

CASH

RECEIVED X

ALL GOODS RETURNED MUST BE ACCOMPANIED BY THIS INVOICE

DATE 12/21/09 INVOICE NO. 406072 STORE NO. 11 CM 1 SLS 0

TIME 11:10 PURCHASE ORDER NO. 072454396 ATTENTION

INVOICE TYPE VISA

DATE: 03-03-2009

TIME: 14:29:52

OF PHILIPSBURG

814-342-3223

PHILIPSBURG
113 WAGON ST
PHILIPSBURG, PA 16801
814-342-3223
194002 - 0087
SHIFT 1

71

Chevrolet



BUICK



PONTIAC

TYPE: VISA
ACCT: XXXXXXXX7228
NAME: TRANSPORT-KAISER

TRAN: 087 - 000
TRAIL TYPE: SALE
AUTH: 032943
RON: 86014

TOTAL: \$57.03

TRANSPORT-KAISER

I AGREE TO PAY ABOVE TOTAL AMOUNT
ACCORDING TO CARD ISSUER AGREEMENT

CUSTOMER COPY

ADVISOR BILL ELLIS	TAG NO 1007 814	INVOICE DATE 03/03/09	INVOICE NO CVCS88014
LABOR RATE	LICENSE NO DTL9082	MILEAGE 137,751	COLOR MAROON/
YEAR / MAKE / MODEL 01/OLDSMOBILE/SILOUHETTE		DELIVERY DATE	DELIVERY MILES
VEHICLE ID. NO. 1 G H D X 2 3 E 2 1 D 1 3 3 3 8 0		SELLING DEALER NO. RIDER	PRODUCTION DATE
F.T.E. NO.		P.O. NO.	R.O. DATE 03/03/09
COMMENTS			

MO: 137751

HOURS: 9:00 - 5:00 TECH(S): 1001
PREFERRED CUSTOMER ENGINE OIL AND
AND CHASSIS LUBRICATION.

CORRECTION: PERFORMED SERVICE.

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE	
	1	PK47	OIL CHANGE	20.65	20.65
	5	5W30	OIL/QT.	****	****
	1	12490147	FILTER 1.836	****	****
TOTAL - PARTS				20.65	

JOB# 1 TOTALS: LABOR 9.95
PARTS 20.65

JOB# 2 CHARGES: JOB# 1 JOURNAL PREFIX CVCS JOB# 1 TOTAL 30.60

LABOR: JOB# 2: 00CVZ07 VEHICLE CHECKOVER, HOURS: 0.40 TECH(S): 1001
SERVICE MANAGER STATES PERFORM CHECKOVER DURING SERVICE
USING MULTI-POINT INSPECTION REPORT.
PERFORMED CHECKOVER.

JOB# 2 TOTALS: LABOR 0.00

JOB# 3 CHARGES: JOB# 2 JOURNAL PREFIX CVCS JOB# 2 TOTAL 0.00

LABOR: JOB# 3: 10CVZ06 CHECK ENGINE LIGHT, HOURS: 0.40 TECH(S): 1001
CUSTOMER STATES: SERVICE ENGINE SOON MALFUNCTION INDICATOR
LAMP IS ILLUMINATED
CAUSE: DIAGNOSED PROBLEM TO BE LEAKING INTAKE MANIFOLD
GASKETS.
CORRECTION: NO REPAIR MADE TODAY.

JOB# 3 TOTALS: LABOR 23.20

JOB# 3 JOURNAL PREFIX CVCS JOB# 3 TOTAL 23.20

ESTIMATE
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
ORIGINAL ESTIMATE OF \$0.00 (+TAX)

COMMENTS:
PARTS AND LABOR TO REPLACE INTAKE GASKETS \$550.00
PARTS AND LABOR TO REPLACE A ARM BUSHINGS=\$70.52
PARTS AND LABOR FOR STABILIZER LINKS=\$77.77
PARTS AND LABOR FOR OUTER TIE ROD END=\$155.40 PLUS \$69.95 FOR ALIGN
PARTS AND LABOR TO REPLACE REAR AIR SHOCKS
\$343.47

THANK YOU FOR
BRINGING YOUR
CAR TO US FOR SERVICE.
OUR CONTINUED SUCCESS
DEPENDS ON YOUR
SATISFACTION.

IF OUR SERVICE
WAS SATISFACTORY
TELL YOUR FRIENDS.
IF NOT, PLEASE TELL
US IMMEDIATELY.

THANK YOU!

Any warranties on the item / items sold hereby are those made by the manufacturer. The seller hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose, and neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item / items.

DIEHL'S OF PHILIPSBURG

814-342-3223

General Motors, Inc.
Diehl's of Philipsburg
Walton Street + P.O. Box 171
PHILIPSBURG, PA 16866-0171



BUICK



PONTIAC

CUSTOMER NO.	910194		ADVISOR	BILL ELLIS		TAG NO.	830	INVOICE DATE	03/05/09	INVOICE NO.	CVCS88046
JENNIFER L. KAISER 408 N. 11TH STREET PHILIPSBURG, PA 16866			LABOR RATE	LICENSE NO.	DTL9082		MILEAGE	137,754	COLOR	MAROON/	STOCK NO.
			YEAR / MAKE / MODEL							DELIVERY DATE	DELIVERY MILES
			01/OLDSMOBILE/SILOUHETTE							SELLING DEALER NO.	PRODUCTION DATE
			VEHICLE I.D. NO.							RIDER	
			F.T.E. NO.		P.O. NO.		R.O. DATE		03/05/09		
RESIDENCE PHONE	290-3938		BUSINESS PHONE			COMMENTS					
											MO: 137754

ESTIMATE-----
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
ORIGINAL ESTIMATE OF \$0.00 (+TAX)
COMMENTS-----
PICKED UP AND DELIVERED

TOTALS-----

*****	TOTAL LABOR....	605.35
*	TOTAL PARTS....	656.51
* [] CASH [] CHECK CK NO. []	TOTAL SUBLET...	0.00
*	TOTAL G.O.G....	0.00
* [] VISA [] MASTERCARD [] DISCOVER	TOTAL MISC CHG.	0.00
*	TOTAL MISC DISC	0.00
* [] OTHER [] CHARGE	TOTAL TAX.....	75.71
*****	TOTAL INVOICE \$	1337.57

THANK YOU FOR YOUR BUSINESS!!

PARTS DESIGNATED WITH AN ASTERISK (*) INDICATE LIMITED
LIFETIME SERVICE GUARANTEE, APPLIES FOR CUSTOMER PAY REPAIRS

CUSTOMER SIGNATURE

*Paid \$600.00
Check # 1036
03/06/09
03/16/09
\$ 737.57*

THANK YOU FOR
BRINGING YOUR
CAR TO US FOR SERVICE.
OUR CONTINUED SUCCESS

DEPENDS ON YOUR
SATISFACTION.

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WAS SATISFACTORY
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**Keller Tire & Auto**

P.O. Box 77

Philipsburg, PA. 16866

Phone - 814-342-6118 Fax - 814-342-0820

OUR SUCCESS IS YOUR SATISFACTION



INVOICE

16914

INVOICE

Print Date : 05/21/2009

KAISER, JENNIFER

179 CHURCH ST

Morrisdale, PA 16858

Home 814-290-3938

Cust ID : 3327

Ref # :

2001 Oldsmobile - Silhouette GL

3.4L, V6, VIN (E)

Lic # : DTL9083

Odometer In : 140426

Unit # :

Odometer Out :

Vin # : 1GHDX23E21D133380

Hat # :

Part Description / Number	Qty	Sale	Extended	Labor Description	Hours	Extended
FRIGI-QUIET & DYE				CHARGE A/C SYSTEM & CHECK FOR	1.20	59.95
BG701	1.00	9.00	9.00	LEAKS		
FREON						
R134A OZ	24.00	0.65	15.60	LAMP OUT IN REAR	N/A	N/C
BULB						
3057	1.00	1.93	1.93			

*pd check
1189
5-21-09*

[Technicians : SHIMMEL, JOSIAH D]

Org. Estimate \$91.67

Revisions \$0.00

Current Estimate \$ 91.67

Additional Cost

Revised Estimate

Labor:	59.95
Parts:	26.53
Sublet:	0.00

Sub:	86.48
Tax:	5.19
Total:	91.67
Bal Due:	\$91.67

[Payments -]

THANK YOU FOR YOUR BUSINESS

I hereby authorize the above repair work to be done along with the necessary material and hereby grant you and/or your employees permission to operate the car or truck herein described on street for the purpose to testing and/or inspection. An express mechanic's lien is hereby acknowledged on above car or truck to secure the amount of repairs thereto. You are entitled by law to the return of all parts replaced, except those which are too heavy or large, and those required to be sent back to the manufacturer or distributor because of warranty.

SIGNATURE.....

Date.....

Time.....

0073
101 Nichols St
Allentown, PA 18103
610-261-4310

8.5.09
Maintenance.

8/5/2009 6:00:45 AM
POS Terminal

Order Number: 696

Register: 5

1 PEAK WINDSHIELD WASH Single \$3.49

Sub. Total: \$3.49

Tax: \$0.21

Total: \$3.70

Discount Total: \$0.00

Visa: \$3.70

Change \$0.00

Visa

Card Num : XXXXXXXXXX7288

Store : 0073

Approval : 050043

Time : 2009/08/05 06:00:44

Betron's Auto Repair
Route 53 and Hawk Run Turnoff
Philipsburg, PA 16866

Both technicians are ASE certified.

(814) 574-5360

[illegible]

DIEHL'S OF PHILIPSBURG

814-342-3223

ing Motors, Inc.
ed Diehl's of Philipsburg
Walton Street + P.O. Box 171
PHILPSBURG, PA 16866-0171



BUICK



PONTIAC

CELL: 290-3938

CUSTOMER NO. 910194		ADVISOR MIKE HOLLIS		TAG NO. 901097	INVOICE DATE 09/03/09	INVOICE NO. CVCS91158
JENNIFER L. KAISER 408 N. 11TH STREET PHILIPSBURG, PA 16865		LABOR RATE	LICENSE NO. DTL9082	MILEAGE 142,790	COLOR MAROON/	STOCK NO.
		YEAR / MAKE / MODEL 01/OLDSMOBILE/SILOUHETTE			DELIVERY DATE	DELIVERY MILES
		VEHICLE I.D. NO. 1 G H D X 2 3 E 2 1 D 1 3 3 3 8 0			SELLING DEALER NO. RIDER	PRODUCTION DATE
		F.T.E. NO.	P. O. NO.	R. O. DATE 09/03/09		
RESIDENCE PHONE 290-3938	BUSINESS PHONE	COMMENTS				

MO: 142790

JOB# 5 CHARGES-----
LABOR-----
JOB# 5 51CVZ05 HEADLIGHTS HOURS: 0.20 TECH(S): 7544 11.60
CUSTOMER STATES: AIM HEADLIGHTS.
CORRECTION: AIMED HEADLIGHTS.

JOB# 5 TOTALS-----
LABOR 11.60
JOB# 5 JOURNAL PREFIX CVCS JOB# 5 TOTAL 11.60

COMMENTS-----
CALL: 290-3938

TOTALS-----

* TOTAL LABOR.... 52.90
* TOTAL PARTS.... 21.79
* TOTAL SUBLET... 0.00
* TOTAL G.O.G.... 0.00
* TOTAL MISC CHG. 0.00
* TOTAL MISC DISC 0.00
* TOTAL TAX..... 4.48

TOTAL INVOICE \$ **79.17**

THANK YOU FOR YOUR BUSINESS!!

PARTS DESIGNATED WITH AN ASTERISK (*) INDICATE LIMITED
LIFETIME SERVICE GUARANTEE, APPLIES FOR CUSTOMER PAY REPAIRS

CUSTOMER SIGNATURE

THANK YOU FOR
BRINGING YOUR
CAR TO US FOR SERVICE.
OUR CONTINUED SUCCESS
DEPENDS ON YOUR
SATISFACTION.

IF OUR SERVICE
WAS SATISFACTORY
TELL YOUR FRIENDS.
IF NOT, PLEASE TELL
US IMMEDIATELY.

THANK YOU!

09/03/09
Credit
Card

Any warranties on the item/items sold hereby are those made by the manufacturer. The seller hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose, and neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/items.

VALLEY TIRE CO INC STR #22
1583 PHILLIPSBURG-BIGLER HWY
PHILLIPSBURG, PA 16866
814-343-9340

Sale

VALLEY TIRE CO. INC.

1583 Bigler Highway
Phillipsburg, PA 16866
Phone: 814-343-9340
Fax: 814-343-9366

BRIDGESTONE

Firestone

TO: 0827
Merchant: 703907808
0/22/09

10:00:25

TSA

XXXXXXXXXX7208

Ref Code: 000351

Invoice#: 4

total:

\$ 20.09

Customer Copy
THANK YOU

1/22

SAME

INVOICE# 045144



10.22.09 discharge cleared

TELEPHONE	ROUTE	SLM	SHIP VIA	ORDER #	PAGE	REMARKS
*FRD!GCL 14419 (814) 342-6391	0	03	N/A	067474	1	

INVOICE DATE	INVOICE NUMBER	PREVIOUS SHIPPED INVOICE NUMBER	TERMS	Opened by Operator #
10/22/2009	045144		CASH SALE	52 10/22/09 11:04:25 52

STOCK NUMBER	SIZE	DESCRIPTION	QUANTITY			UNIT PRICE	T	F.E.T.	EXTENSION
			ORDERS	SHIPPED	PREVSHIP				
PACKAGE:		OIL LUBE FILTER							24.95
		WE CARE ENVIRONMENTAL DISPOSAL							
		FREE BATTERY/ANTIFREEZE AND							
		WIPER BLADE CHECK....							
		rotate							
		tires							
		set							
		pressure							
9701		SERVICE DISCOUNT	1-	1-		6.00	06	.00	6.00-
METHOD OF PAYMENT:									
Mastercard/Visa									
CHANGE:									
		20.09							
		.00							

SIGN HERE

ALL WHEELS MUST BE RE-TORQUED WITHIN 50-100 MILES

PARTS	LABOR	TAX%	TAXABLE AMOUNT	TAX	F.E.T.	MISC. AMOUNT	INVOICE TOTAL
12.25	6.70	6.00%	18.95	1.14			20.09

SCOTT NEVELL

1.25

PA TURNPIKE FARE RECEIPT
PLAZA 020
TIME 21:57
CLASS 1
TP 00
CA
ENTRY 00
PAID \$5.00

ROADWAY AND WEATHER: 1-866-976-8747
CUSTOMER ASSISTANCE CENTER: 1-800-331-3414
E-ZPASS: 1-877-736-6727
WWW.PATURNPIKE.COM

1.2.09 cash/change

PA TURNPIKE FARE RECEIPT
PLAZA 020 MID-COUNTY

DATE	TIME	COLL	TRAN	ENTRY
08/31/09	21:57	3143	5508	00
LANE	CLASS	TP	00	PAID
15	1	CA		\$5.00

ROADWAY AND WEATHER: 1-866-976-8747
CUSTOMER ASSISTANCE CENTER: 1-800-331-3414
E-ZPASS: 1-877-736-6727
WWW.PATURNPIKE.COM

Postage

weis

THANKS FOR SHOPPING WEIS MARKETS #118
501 NORTH CENTRE ST
PHILLIPSBURG, PA. 16866
TELEPHONE: 814-342-6451

YOUR CASHIER TODAY WAS UDETTE

FOREVER STAMP BK20	8 80
TAX	0 00
**** BALANCE	8 80
CASH	9 00
CHANGE	0 20

TOTAL NUMBER OF ITEMS SOLD = 1
07/28/09 03:27pm 118 501 88 362

ASK US HOW OUR WEIS SHOPPERS CLUB
CAN SAVE YOU \$\$\$'S EVERYDAY

WEIS CLUB MEMBERS
HAVE THE POWER TO SAVE MORE

Transport - Postage

09/06/2009 12:49:54 PM

Item	Price	Final Price
FOREVER STAMP BK20	8.80	\$8.40

840 \$8.40

TAX	\$1.00
Change	-\$1.60

USPS only stop on all
USPS stamps. For more information
on shipping labels with postage,
visit us online at 1-800-ASK-USPS.

ASK US HOW OUR WEIS SHOPPERS CLUB
CAN SAVE YOU \$\$\$'S EVERYDAY

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ASK US HOW OUR WEIS SHOPPERS CLUB
CAN SAVE YOU \$\$\$'S EVERYDAY

ASK US HOW OUR WEIS SHOPPERS CLUB
CAN SAVE YOU \$\$\$'S EVERYDAY

Postage
CVS/pharmacy
for all the ways you care™

815 N FRONT STREET, PHILLIPSBURG, PA
PHARMACY: 342-2646 STORE: 342-2639

REF#04 TRAN#0205 CSHR#434046 STR#1919

1 FOREVER STAMP EACH 8.80N

TOTAL	8.80
CASH	9.00
CHANGE	.20



5191 9925 4020 5044
RETURNS WITH RECEIPT THRU 11/10/2009

SEPTEMBER 11, 2009 11:32 AM

GET YOUR CVS EXTRACARE CARD

THANK YOU. SHOP 24 HOURS AT CVS.COM

Invoice Book
Office Supplies

Walmart 
Save money. Live better.

SUPER CENTER
WE SELL FOR LESS
MANAGER JOSH KUNKLE
(814) 765-8089
STAMP 00000325 TR 12 TR 06437
STAMP BK 000795805812 3.44 X
SUBTOTAL 3.44
TAX 6.000 % 0.21
TOTAL 3.65
CASH TEND 20.00
CASH DUE 16.35

ITEMS SOLD 1

000 8523 2375 0704 4917 1130



100% recycled paper and earth-friendly
inks at walmart.com/green
05/13/09 13:39:35

5.2.09

POSTAGE

PHILIPSBURG MPO
PHILIPSBURG, Pennsylvania
168669998

4125460090 -0098
12/02/2008 (814)342-3201 10:42:38 AM

Product Description	Sale Qty	Unit Price	Final Price
\$8.40 Holiday Nutcrackers PSA Double-Sided Bklt/20	1	\$8.40	\$8.40

Total: \$8.40

Paid by:
Cash \$10.00
Change Due: -\$1.60

Order stamps at USPS.com/shop or call
1-800-Stamp24. Go to USPS.com/clicknship
to print shipping labels with postage.
For other information call 1-800-ASK-USPS.

Bill#: 1000200916780
Clerk: 08

All sales final on stamps and postage
Refunds for guaranteed services only
Thank you for your business

HELP US SERVE YOU BETTER

Go to: <http://gx.gallup.com/pos>

TELL US ABOUT YOUR RECENT
POSTAL EXPERIENCE

YOUR OPINION COUNTS

1.58

FRED DIEHL'S OF PHILIPSBURG

CUST NO.	TAX EXEMPT NUMBER	CUST. P. O. NO.	SHIP VIA	PAY	SOLD BY	INVOICE DATE	INVOICE NO.
500				CASH	1	02/19/09	20996

B I L L T O

S
H - T
I O
P

20996
CVR

CASH SALE

SHIP QTY	B. O. QTY	PART NUMBER / DESCRIPTION	BIN	LIST	NET	AMOUNT
2	0	10241518 RET HDLNG 14.640		0.98	0.73	1.46
				SUBTOTAL		1.46
				TAX		0.09
				PAY THIS AMOUNT		0.00
						1.55

Customer Signature X _____

ELECTRICAL, SPECIAL ORDERS, AND FACTORY ORDERED ITEMS ARE NOT RETURNABLE. NO REFUNDS AFTER 30 DAYS OR WITHOUT THIS INVOICE. RESTOCKING CHARGE ON ALL RETURNS.

PARTS INVOICE

8.1.09
20th cook
pinkhouse

TEXAS ROSS/USE
1865 Waddle Road
College, PA
414-235-7477

08/01/2009
4:00 PM
48

08/01/2009

LEE

3

Amount: 36.21

Tip: 5.00

= Total: 41.21

1/2 - 20.00
Reimburse

08/01/2009

QUEST COPY



- 1 Club Cold Sub 6 Inch
- Ham
- Turkey
- Provolone Cheese
- White Sauce
- Italian Romano
- Sliced Lettuce
- Sliced Tomatoes
- Diced Onion
- Mild Pepper Ring
- Green Peppers
- Barbecue Sauce

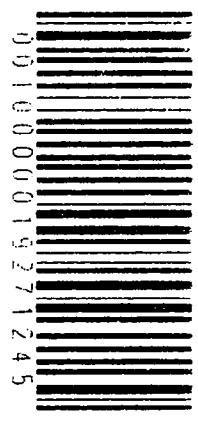
PAID

*****ORDER STORED*****

Order Number: 105
5/16/2009 12:49:03 PM
Philadelphia, PA 19106
342-6433

PLEASE PAY AT REGISTER
BEFORE PICKING UP ORDER
THANK YOU ***

5.16.09



5.16.09

*** PLEASE PAY AT REGISTER ***
BEFORE PICKING UP ORDER
*** THANK YOU ***

Sheet 1 of 3
400 North Front Street
Philadelphia, PA 19106
(414) 342-6433

5/16/2009 12:51:42 PM

Order Number: 124

*****ORDER STORED*****

- 1 Hot Dog \$0.69
- 1 Chili Sauce \$0.29
- 1 Diced Onion \$0.65
- 1 Hot Dog \$0.65
- 1 Hot Dog Special \$1.35
- 1 Bacon & Cheese \$1.35
- Mustard
- Ketchup
- Hot Dog Special
- Bacon & Cheese

PAID

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

▶ Attach to Form 1040, 1040NR, or 1041. ▶ See Instructions for Schedule C (Form 1040).

OMB No. 1545-0074

2006

Attachment
Sequence No. **09**

Name of proprietor JENNIFER KAISER		Social security number (SSN) 178-66-2711
A Principal business or profession, including product or service (see page C-2 of the instructions) SELF STORAGE : SERVICE		B Enter code from pages C-8, 9, & 10 999999
C Business name. If no separate business name, leave blank. KAISER STORZ IT		D Employer ID number (EIN), if any
E Business address (including suite or room no.) ▶ 179 CHURCH STREET City, town or post office, state, and ZIP code MORRISDALE, PA 16858		
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ▶		
G Did you "materially participate" in the operation of this business during 2006? If "No," see page C-3 for limit on losses		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
H If you started or acquired this business during 2006, 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 page C-3 and check here. ▶ <input type="checkbox"/>	1 3,480.
2 Returns and allowances	2
3 Subtract line 2 from line 1	3 3,480.
4 Cost of goods sold (from line 42 on page 2)	4
5 Gross profit. Subtract line 4 from line 3	5 3,480.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3)	6
7 Gross income. Add lines 5 and 6	7 3,480.

Part II Expenses. Enter expenses for business use of your home only on line 30.	
8 Advertising	8
9 Car and truck expenses (see page C-4)	9
10 Commissions and fees	10
11 Contract labor (see page C-4)	11
12 Depletion	12
13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-4)	13 654.
14 Employee benefit programs (other than on line 19)	14
15 Insurance (other than health)	15 499.
16 Interest:	
a Mortgage (paid to banks, etc.)	16a 1,991.
b Other	16b
17 Legal and professional services	17 75.
18 Office expense	18 40.
19 Pension and profit-sharing plans	19
20 Rent or lease (see page C-5):	
a Vehicles, machinery, and equipment	20a
b Other business property	20b
21 Repairs and maintenance	21 224.
22 Supplies (not included in Part III)	22 87.
23 Taxes and licenses ATTACHMENT	23 1,152.
24 Travel, meals, and entertainment:	
a Travel	24a
b Deductible meals and entertainment (see page C-6)	24b
25 Utilities	25 532.
26 Wages (less employment credits)	26
27 Other expenses (from line 48 on page 2)	27 1,416.

28 Total expenses before expenses for business use of home. Add lines 8 through 27 in columns	28 6,670.
29 Tentative profit (loss). Subtract line 28 from line 7.	29 (3,190.)
30 Expenses for business use of your home. Attach Form 8829	30
31 Net profit or (loss). Subtract line 30 from line 29.	31 (3,190.)
<ul style="list-style-type: none"> • If a profit, enter on Form 1040, line 12, and Schedule SE, line 2 or on Form 1040NR, line 13 (statutory employees, see page C-6). Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32. 	
32 If you have a loss, check the box that describes your investment in this activity (see page C-6).	
<ul style="list-style-type: none"> • If you checked 32a, enter the loss on both Form 1040, line 12, and Schedule SE, line 2 or on Form 1040NR, line 13 (statutory employees, see page C-6). Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited. 	
32a <input checked="" type="checkbox"/> All investment is at risk.	
32b <input type="checkbox"/> Some investment is not at risk.	

KBA For Paperwork Reduction Act Notice, see page C-8 of the instructions.

Schedule C (Form 1040) 2006

Part III Cost of Goods Sold (see page C-7)

33 Method(s) used to value closing inventory: a ☐ Cost b ☐ Lower of cost or market c ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? ☐ Yes ☐ No
If "Yes," attach explanation

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation

36 Purchases less cost of items withdrawn for personal use

37 Cost of labor. Do not include any amounts paid to yourself

38 Materials and supplies

39 Other costs

40 Add lines 35 through 39

41 Inventory at end of year

42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-4 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) ▶

44 Of the total number of miles you drove your vehicle during 2006, enter the number of miles you used your vehicle for:

a Business b Commuting (see inst) c Other

45 Do you (or your spouse) have another vehicle available for personal use? ☐ Yes ☐ No

46 Was your vehicle available for personal use during off-duty hours? ☐ Yes ☐ No

47a Do you have evidence to support your deduction? ☐ Yes ☐ No

b If "Yes," is the evidence written? ☐ Yes ☐ No

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

SERVICE BANK FEES	72.
CLEANING AND MAINT	49.
BUSINESS CELL PHONE	1,214.
BUS PORTION PHONE	81.
48 Total other expenses. Enter here and on page 1, line 27	1,416.

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

► Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.
► Attach to Form 1040, 1040NR, or 1041. ► See Instructions for Schedule C (Form 1040).

OMB No. 1545-0074

2006

Attachment
Sequence No. **09**

Name of proprietor JENNIFER KAISER		Social security number (SSN) 178-66-2711
A Principal business or profession, including product or service (see page C-2 of the instructions) TRANSPORT : SERVICE		B Enter code from pages C-8, 9, & 10 ► 812990
C Business name. If no separate business name, leave blank. KAISER TRANSPORT		D Employer ID number (EIN), if any
E Business address (including suite or room no.) ► 179 CHURCH STREET City, town or post office, state, and ZIP code MORRISDALE, PA 16858		
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ►		
G Did you "materially participate" in the operation of this business during 2006? If "No," see page C-3 for limit on losses		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
H If you started or acquired this business during 2006, 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 page C-3 and check here	1 22,151.
2 Returns and allowances	2
3 Subtract line 2 from line 1	3 22,151.
4 Cost of goods sold (from line 42 on page 2)	4
5 Gross profit. Subtract line 4 from line 3	5 22,151.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3)	6
7 Gross income. Add lines 5 and 6	7 22,151.

Part II Expenses. Enter expenses for business use of your home only on line 30.	
8 Advertising	8 23.
9 Car and truck expenses (see page C-4)	9 14,686.
10 Commissions and fees	10
11 Contract labor (see page C-4)	11
12 Depletion	12
13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-4)	13 2,111.
14 Employee benefit programs (other than on line 19)	14
15 Insurance (other than health)	15
16 Interest:	
a Mortgage (paid to banks, etc.)	16a
b Other	16b
17 Legal and professional services	17 65.
18 Office expense	18 127.
19 Pension and profit-sharing plans	19
20 Rent or lease (see page C-5):	
a Vehicles, machinery, and equipment	20a
b Other business property	20b
21 Repairs and maintenance	21
22 Supplies (not included in Part III)	22
23 Taxes and licenses	23
24 Travel, meals, and entertainment	
a Travel	24a 81.
b Deductible meals and entertainment (see page C-6)	24b 252.
25 Utilities	25 532.
26 Wages (less employment credits)	26
27 Other expenses (from line 48 on page 2)	27 2,142.

28 Total expenses before expenses for business use of home. Add lines 8 through 27 in columns	28 20,019.
29 Tentative profit (loss). Subtract line 28 from line 7	29 2,132.
30 Expenses for business use of your home. Attach Form 8829	30
31 Net profit or (loss). Subtract line 30 from line 29.	31 2,132.
<p>• If a profit, enter on Form 1040, line 12, and Schedule SE, line 2 or on Form 1040NR, line 13 (statutory employees, see page C-6). Estates and trusts, enter on Form 1041, line 3.</p> <p>• If a loss, you must go to line 32.</p>	
<p>32 If you have a loss, check the box that describes your investment in this activity (see page C-6).</p> <p>• If you checked 32a, enter the loss on both Form 1040, line 12, and Schedule SE, line 2 or on Form 1040NR, line 13 (statutory employees, see page C-6). Estates and trusts, enter on Form 1041, line 3.</p> <p>• If you checked 32b, you must attach Form 6198. Your loss may be limited.</p>	
32a <input type="checkbox"/> All investment is at risk.	
32b <input type="checkbox"/> Some investment is not at risk.	

KBA For Paperwork Reduction Act Notice, see page C-8 of the instructions.

Schedule C (Form 1040) 2006

Part III Cost of Goods Sold (see page C-7)

33 Method(s) used to value closing inventory: a ☐ Cost b ☐ Lower of cost or market c ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? ☐ Yes ☐ No
If "Yes," attach explanation

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation

36 Purchases less cost of items withdrawn for personal use

37 Cost of labor. Do not include any amounts paid to yourself

38 Materials and supplies

39 Other costs

40 Add lines 35 through 39

41 Inventory at end of year

42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4

35	
36	
37	
38	
39	
40	
41	
42	

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-4 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) ▶

44 Of the total number of miles you drove your vehicle during 2006, enter the number of miles you used your vehicle for:

a Business b Commuting (see inst) c Other

45 Do you (or your spouse) have another vehicle available for personal use? ☐ Yes ☐ No

46 Was your vehicle available for personal use during off-duty hours? ☐ Yes ☐ No

47a Do you have evidence to support your deduction? ☐ Yes ☐ No

b If "Yes," is the evidence written? ☐ Yes ☐ No

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

BUSINESS CELL PHONE	1,214.
BUSINESS PHONE	81.
PAGER	178.
INTERNET SERV	75.
UNIFORMS	570.
TOLLS	24.
48 Total other expenses. Enter here and on page 1, line 27.	2,142.

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2006

Attachment
Sequence No. 67

Name(s) shown on return

JENNIFER KAISER

Business or activity to which this form relates

Sch C KAISER TRANSPORT TRANSPOR

Identifying number

178-66-2711

Part I Election To Expense Certain Property Under Section 179

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

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	\$108,000
2	Total cost of section 179 property placed in service (see instructions)	2	2,111
3	Threshold cost of section 179 property before reduction in limitation	3	\$430,000
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	108,000
(a) Description of property		(b) Cost (business use only)	(c) Elected cost
6	MSA AIRPACK	150	150
	STRYKER	1,961	1,961
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	2,111
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	2,111
10	Carryover of disallowed deduction from line 13 of your 2005 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	58,639
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	2,111
13	Carryover of disallowed deduction to 2007. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.)

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2006	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2006 Tax Year Using the General Depreciation System

(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
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (see instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	2,111
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

KBA For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2006)

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

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

24a Do you have evidence to support the business/investment use claimed?		24b If "Yes," is the evidence written?		24c If "Yes," is the evidence written?		24d If "Yes," is the evidence written?		24e If "Yes," is the evidence written?		24f If "Yes," is the evidence written?		24g If "Yes," is the evidence written?		24h If "Yes," is the evidence written?		24i If "Yes," is the evidence written?	
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)	(o)	(p)	(q)	(r)
Type of property (list vehicles first)	Date placed in service	Business/investment use percentage	Cost or other basis	Basis for depreciation (business/investment use only)	Recovery period	Method/Convention	Depreciation deduction	Elected section 179 cost									
25 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)							25										
26 Property used more than 50% in a qualified business use:																	
DODGE	01/01/06	83.67%															
OLDS VAN	07/05/05	96.84%															
27 Property used 50% or less in a qualified business use:																	
		%				S/L -											
		%				S/L -											
		%				S/L -											
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28										
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1																	29

Section B - Information on Use of Vehicles

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)	(b)	(c)	(d)	(e)	(f)
	Vehicle 1	Vehicle 2	Vehicle 3	Vehicle 4	Vehicle 5	Vehicle 6
30 Total business/investment miles driven during the year (do not include commuting miles)	10246	22757				
31 Total commuting miles driven during the year	0	0				
32 Total other personal (noncommuting) miles driven	2000	743				
33 Total miles driven during the year. Add lines 30 through 32	12246	23500				
34 Was the vehicle available for personal use during off-duty hours?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
35 Was the vehicle used primarily by a more than 5% owner or related person?	X	X				
36 Is another vehicle available for personal use?	X	X				

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 for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

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

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a)	(b)	(c)	(d)	(e)	(f)
Description of costs	Date amortization begins	Amortizable amount	Code section	Amortization period or percentage	Amortization for this year
42 Amortization of costs that begins during your 2006 tax year (see instructions):					
43 Amortization of costs that began before your 2006 tax year				43	
44 Total. Add amounts in column (f). See the instructions for where to report				44	

Supporting Schedules

2006

Name: SCOTT J & JENNIFER KAISER

SSN: 205-64-3252

SCHEDULE C - KAISER STORZ IT
LINE 23 - TAXES AND LICENSES
Description

Amount

REAL ESTATE

945

SALES AND USE TAX

207

TOTAL

1,152

DEPRECIATION WORKSHEET - ALL METHODS

Name(s) JENNIFER KAISER

SSN/EIN 178-66-2711

Business or Activity: Sch C KAISER TRANSPORT TRANSPORT

Subform: 45

• If the business-use percentage of an asset is expected to change from year to year, use a separate worksheet for that asset, recomputing the columns D through O each year.

• In states where depreciation is computed different than federal, use a separate worksheet for state depreciation.

• When more than eight assets are being depreciated, use as many worksheets as necessary.

2006

A ASSET	DEPRECIATION	T Y P E	N U C	Manner/ Date Acquired (Purchased, gift, inherited, etc.)	Date Placed in Service, if different	System (MACRS, ACRS, etc.) & Class/Life	A. Cost or Other Basis	B. Land/ Salvage or other adj.*	C. Qualified Basis (A-B)		D. Business Use %	E. Business Basis (C x D)
1	MSA AIRPACK	P	N	12/15/2006	12/15/2006	MACRS 10	150		150		100	150
2	STRYKER	P	N	08/15/2006	08/15/2006	MACRS 5	1961		1961		100	1961
3												
4												
5												
6												
7												
8												

* Enter basis adjustment for clean-fuel vehicle deduction or electric vehicle credit in column B.

• In the section below, use the top row for each asset to compute depreciation for regular tax purposes, and the shaded row below it to compute depreciation for AMT purposes.

• In column O, enter the tax year at the top and the asset's recovery year below (1st, 2nd, etc.). Find the percentage from the appropriate table.

• To continue depreciation after the third year, another row or use additional copies of this worksheet as overflow worksheets. Enter in Column M any depreciation claimed on prior years' worksheets.

F. Sec. 179 Deduction	G. (E-F)**	H. Special*** Depreciation Allowance, if any (col. G x 30% or 50%)	I. Depreciable Amount (G-H)	J. Recovery Period	K. Method and Convention	L. Prior Depreciation Claimed	M. Date of Disposition	N. Depreciation Computation					
								2006		Year:		Year:	
								Rec.	Depr.	Rec.	Depr.	Rec.	Depr.
1	150			10	S/HY			Year	(1x %)	Year	(1x %)	Year	(1x %)
AMT	150			10	S/HY			1	5.0	1	5.0		
2	1961			5	S/L HY			1	10.0	1	10.0		
AMT	1961			5	S/L HY			1	10.0	1	10.0		
3													
AMT													
4													
AMT													
5													
AMT													
6													
AMT													
7													
AMT													
8													
AMT													

** Reduce the result by any investment credit basis adjustment before entering the figure in column G.

*** For qualified assets placed in service after September 10, 2001, and before January 1, 2005.

Rev. 10/05

* System calculated prior depreciation

WS Deprec (2006)

FDWS39-1V1.2

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SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.
Attach to Form 1040, 1040NR, or 1041. See instructions for Schedule C (Form 1040).

OMB No. 1545-0074

2007

Attachment
Sequence No. 09

Name of proprietor JENNIFER KAISER		Social security number (SSN) 178-66-2711
A Principal business or profession, including product or service (see page C-2 of the instructions) SELF STORAGE		B Enter code from pages C-8, 9, & 10 812990
C Business name. If no separate business name, leave blank. KAISER STORZ IT		D Employer ID number (EIN), if any
E Business address (including suite or room no.) City, town or post office, state, and ZIP code 179 CHURCH STREET MORRISDALE 16858		
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify)		
G Did you "materially participate" in the operation of this business during 2007? If "No," see page C-3 for limit on losses <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
H If you started or acquired this business during 2007, 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 page C-3 and check here <input type="checkbox"/>	1	3,346
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	3,346
4 Cost of goods sold (from line 42 on page 2)	4	
5 Gross profit. Subtract line 4 from line 3	5	3,346
6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3)	6	
7 Gross income. Add lines 5 and 6	7	3,346

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

8 Advertising	8		18 Office expense	18	74
9 Car and truck expenses (see page C-4)	9		19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see page C-5):	20	
11 Contract labor (see page C-4)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-4)	13	654	21 Repairs and maintenance	21	223
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15	459	23 Taxes and licenses	23	1,120
16 Interest:			24 Travel, meals, and entertainment:	24	
a Mortgage (paid to banks, etc.)	16a	1,737	a Travel	24a	
b Other	16b		b Deductible meals and entertainment (see page C-6)	24b	
17 Legal and professional services	17	75	25 Utilities	25	450
			26 Wages (less employment credits)	26	
			27 Other expenses (from line 48 on page 2)	27	1,584
28 Total expenses before expenses for business use of home. Add lines 8 through 27 in columns	28	6,376			
29 Tentative profit (loss). Subtract line 28 from line 7	29	-3,030			
30 Expenses for business use of your home. Attach Form 8829	30				
31 Net profit or (loss). Subtract line 30 from line 29.	31	-3,030			
<ul style="list-style-type: none"> If a profit, enter on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (statutory employees, see page C-7). Estates and trusts, enter on Form 1041, line 3. If a loss, you must go to line 32. 			32a <input checked="" type="checkbox"/> All investment is at risk. 32b <input type="checkbox"/> Some investment is not at risk.		
32 If you have a loss, check the box that describes your investment in this activity (see page C-7). <ul style="list-style-type: none"> If you checked 32a, enter the loss on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (statutory employees, see page C-7). Estates and trusts, enter on Form 1041, line 3. If you checked 32b, you must attach Form 6198. Your loss may be limited. 					

Part III Cost of Goods Sold (see page C-7)

33 Method(s) used to value closing inventory: a ☐ Cost b ☐ Lower of cost or market c ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation. ☐ Yes ☐ No

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	
36 Purchases less cost of items withdrawn for personal use	36	
37 Cost of labor. Do not include any amounts paid to yourself	37	
38 Materials and supplies	38	
39 Other costs	39	
40 Add lines 35 through 39	40	0
41 Inventory at end of year	41	
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4	42	0

Part IV Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-4 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) _____

44 Of the total number of miles you drove your vehicle during 2007, enter the number of miles you used your vehicle for:

a Business _____ b Commuting (see instructions) _____ c Other _____

45 Do you (or your spouse) have another vehicle available for personal use? ☐ Yes ☐ No

46 Was your vehicle available for personal use during off-duty hours? ☐ Yes ☐ No

47 a Do you have evidence to support your deduction? ☐ Yes ☐ No

b If "Yes," is the evidence written? ☐ Yes ☐ No

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

SERVICE BANK FEES	2
BUSINESS CELL PHONE	1,501
BUS PORTION PHONE	81
48 Total other expenses. Enter here and on page 1, line 27	48 1,584

**SCHEDULE C
(Form 1040)**

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074

2007

Attachment
Sequence No. **09**

Department of the Treasury
Internal Revenue Service (99)

Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.
Attach to Form 1040, 1040NR, or 1041. See Instructions for Schedule C (Form 1040).

Name of proprietor JENNIFER KAISER		Social security number (SSN) 178-66-2711
A Principal business or profession, including product or service (see page C-2 of the instructions) TRANSPORT		B Enter code from pages C-8, 9, & 10 485990
C Business name. If no separate business name, leave blank. KAISER TRANSPORT		D Employer ID number (EIN), if any
E Business address (including suite or room no.) City, town or post office, state, and ZIP code 179 CHURCH STREET MORRISDALE PA 16858		
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify)		
G Did you "materially participate" in the operation of this business during 2007? If "No," see page C-3 for limit on losses <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
H If you started or acquired this business during 2007, check here <input type="checkbox"/>		

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 page C-3 and check here <input type="checkbox"/>	1	31,652
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	31,652
4 Cost of goods sold (from line 42 on page 2)	4	
5 Gross profit. Subtract line 4 from line 3	5	31,652
6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3)	6	
7 Gross income. Add lines 5 and 6	7	31,652

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

8 Advertising	8		18 Office expense	18	60
9 Car and truck expenses (see page C-4)	9	15,608	19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see page C-5):	20a	
11 Contract labor (see page C-4)	11		a Vehicles, machinery, and equipment	20b	
12 Depletion	12		b Other business property	21	
13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-4)	13		21 Repairs and maintenance	22	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	23	
15 Insurance (other than health)	15		23 Taxes and licenses	24	
16 Interest:	16a		24 Travel, meals, and entertainment:	24a	865
a Mortgage (paid to banks, etc.)	16b		a Travel	24b	
b Other	16b		b Deductible meals and entertainment (see page C-6)	25	450
17 Legal and professional services	17	65	25 Utilities	26	
			26 Wages (less employment credits)	27	2,397
			27 Other expenses (from line 48 on page 2)		
28 Total expenses before expenses for business use of home. Add lines 8 through 27 in columns	28	19,445			
29 Tentative profit (loss). Subtract line 28 from line 7	29	12,207			
30 Expenses for business use of your home. Attach Form 8829	30				
31 Net profit or (loss). Subtract line 30 from line 29.	31	12,207			
<ul style="list-style-type: none"> If a profit, enter on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (statutory employees, see page C-7). Estates and trusts, enter on Form 1041, line 3. If a loss, you must go to line 32. 			32a <input type="checkbox"/> All investment is at risk. 32b <input type="checkbox"/> Some investment is not at risk.		
32 If you have a loss, check the box that describes your investment in this activity (see page C-7). <ul style="list-style-type: none"> If you checked 32a, enter the loss on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (statutory employees, see page C-7). Estates and trusts, enter on Form 1041, line 3. If you checked 32b, you must attach Form 6198. Your loss may be limited. 					

SCHEDULE SE
(Form 1040)

Department of the Treasury
Internal Revenue Service

Self-Employment Tax

▶ **Attach to Form 1040.** ▶ **See Instructions for Schedule SE (Form 1040).**

OMB No. 1545-0074

2007

Attachment
Sequence No. **17**

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

JENNIFER KAISER

Social security number of person
with self-employment income ▶

178-66-2711

Who Must File Schedule SE

You must file Schedule SE if:

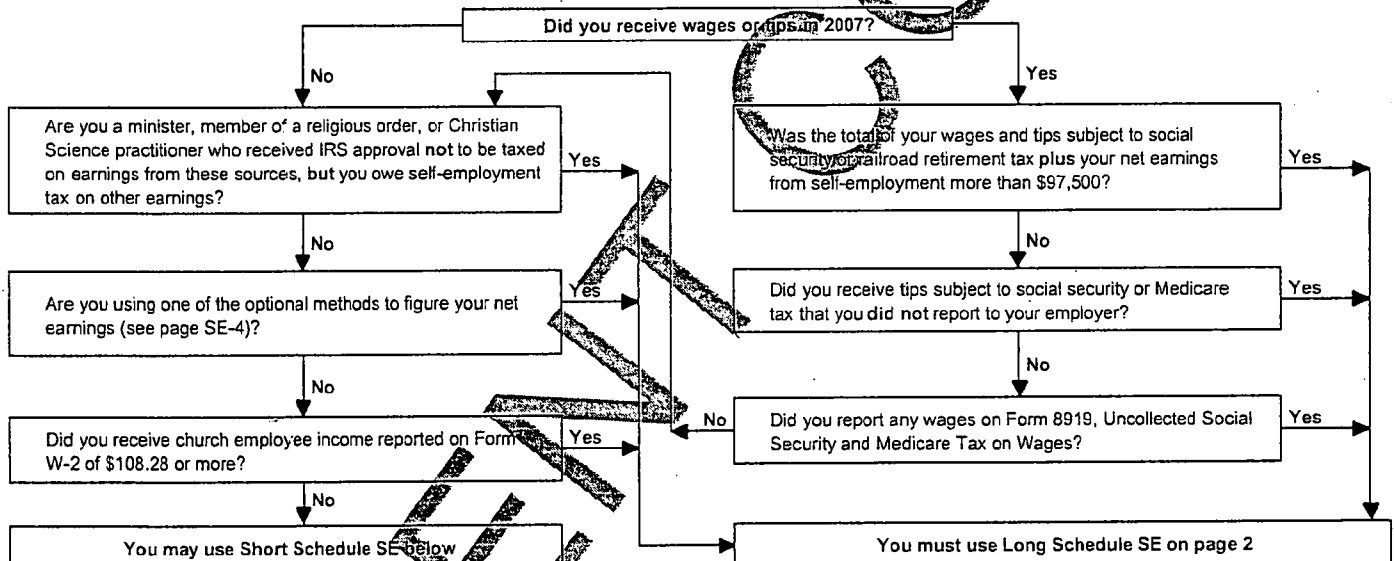
- You had net earnings from self-employment from **other than** church employee income (line 4 of Short Schedule SE or line 4c of Long Schedule SE) of \$400 or more, **or**
- You had church employee income of \$108.28 or more. Income from services you performed as a minister or a member of a religious order is **not** church employee income (see page SE-1).

Note. Even if you had 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 (see page SE-4).

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 58.

May I Use Short Schedule SE or Must I Use Long Schedule SE?

Note. Use this flowchart only if you must file Schedule SE. If unsure, see Who Must File Schedule SE, above.



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), box 14, code **A**
- 2 Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code **A** (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see page SE-1 for amounts to report on this line. See page SE-3 for other income to report
- 3 Combine lines 1 and 2
- 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 ▶
- 5 **Self-employment tax.** If the amount on line 4 is:
 - \$97,500 or less, multiply line 4 by 15.3% (.153). Enter the result here and on Form 1040, line 58.
 - More than \$97,500, multiply line 4 by 2.9% (.029). Then, add \$12,090 to the result. Enter the total here and on Form 1040, line 58
- 6 **Deduction for one-half of self-employment tax.** Multiply line 5 by 50% (.5). Enter the result here and on Form 1040, line 27

1.	
2	9,177
3	9,177
4	8,475
5	1,297
6	649

Part III Cost of Goods Sold (see page C-7)

33 Method(s) used to value closing inventory: a ☐ Cost b ☐ Lower of cost or market c ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation. ☐ Yes ☐ No

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	
36 Purchases less cost of items withdrawn for personal use	36	
37 Cost of labor. Do not include any amounts paid to yourself	37	
38 Materials and supplies	38	
39 Other costs	39	
40 Add lines 35 through 39	40	0
41 Inventory at end of year	41	
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4	42	0

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-4 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) _____

44 Of the total number of miles you drove your vehicle during 2007, enter the number of miles you used your vehicle for:

a Business See statement b Commuting (see instructions) _____ c Other _____

45 Do you (or your spouse) have another vehicle available for personal use? ☐ Yes ☐ No

46 Was your vehicle available for personal use during off-duty hours? ☐ Yes ☐ No

47 a Do you have evidence to support your deduction? ☐ Yes ☐ No

b If "Yes," is the evidence written? ☐ Yes ☐ No

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

BUSINESS CELL PHONE	1,501
BUSINESS PHONE	84
PAGER	236
INTERNET SERVICE	179
UNIFORMS	149
POSTAGE	74
VEHICLE WASHES	174
48 Total other expenses. Enter here and on page 1, line 27	48 2,397

DEPRECIATION WORKSHEET - ALL METHODS

Name(s) **JENNIFER KAISER**

SSN/EIN **178-66-2711**

Business or Activity: Sch C KAISER STORZ IT SELF STORAGE

Subform:

• If the business- use percentage of an asset is expected to change from year to year, use a separate worksheet for that asset, recomputing the columns D through O each year.

• In states where depreciation is computed different than federal, use a separate worksheet for state depreciation.

• When more than eight assets are being depreciated, use as many worksheets as necessary.

✓	DEPRECIATION	T	Y	N	Manner/ Date Acquired (Purchased, gift, inherited, etc.)	Date Placed in Service, if different etc. 1 & Class/Life	System (MACRS, ACRS, etc.)	A.	B.	C.	D.	E.
1	Asset Description/Location	P	U	C				Cost or Other Basis	Land/ Salvage or other adj.*	Qualified Basis (A-B)	Business Use %	Business Basis (C x D)
1	PLOW TRUCK	P	U	C	03/11/2004	03/11/2004	MACRS 5	2111		2111	100	2111
2	BLDG EQUIP SM TOOLS	P	N	O	05/19/2003	05/19/2003	MACRS 3	1031		1031	100	1031
3	STORAGE BUILDING	R	N	O	05/19/2003	05/19/2003	MACRS N	26000	500	25500	100	25500
4												
5												
6												
7												
8												

* Enter basis adjustment for clean-fuel vehicle deduction or electric vehicle credit in column B.

• In the section below, use the top row for each asset to compute depreciation for regular tax purposes, and the shaded row below it to compute depreciation for AMT purposes.

• In column O, enter the tax year at the top and the asset's recovery year below (1st, 2nd, etc.). Find the percentage from the appropriate table.

• To continue depreciation after the third year, another row or use additional copies of this worksheet as overflow worksheets. Enter in Column M any depreciation claimed on prior years' worksheets.

N. Depreciation Computation												
Year: 2006												
F.	G.	H.	I.	J.	K.	L.	M.	Year:				Depr. (I x %)
								Rec	Depr.	Rec	Year	
Sec. 179 Deduction	(E-F)**	Special*** Depreciation Allowance, if any (col. G x 30% or 50%)	Depreciable Amount (G-H)	Recovery Period	Method and Convention	Prior Depreciation Claimed	Date of Disposition	Year	Depr.	Year	Year	%
1	2111			5	S/HY			4	20.0			
AMT	2111			5	HXY			4	20.0			
2	1031			3	S/L HY			4	16.6			
AMT	1031			3	HY			4	16.6			
3	25500		25500	39		1717		4	2.5			
AMT	25500		25500	39	MM	1717		4	2.5			
4												
AMT												
5												
AMT												
6												
AMT												
7												
AMT												
8												
AMT												

** Reduce the result by any investment credit basis adjustment before entering the figure in column G.

*** For qualified assets placed in service after September 10, 2001, and before January 1, 2005.

Rev. 10/05

* System calculated prior depreciation

WS Deprec (2006)

FDWS39-1V1.2

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Depreciation and Amortization

(Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0172

2007

Attachment
Sequence No. 67

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return JENNIFER KAISER	Business or activity to which this form relates Sch C: 01 - SELF STORAGE	Identifying number 178-66-2711
--------------------------------------------	-----------------------------------------------------------------------------	-----------------------------------

Part I Election To Expense Certain Property Under Section 179

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

1 Maximum amount. See the instructions for a higher limit for certain businesses	1	125,000
2 Total cost of section 179 property placed in service (see instructions).	2	
3 Threshold cost of section 179 property before reduction in limitation	3	500,000
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	125,000

(a) Description of property	(b) Cost (business use only)	(c) Elected cost	
6			
7 Listed property. Enter the amount from line 29	7		
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	0	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	0	
10 Carryover of disallowed deduction from line 13 of your 2006 Form 4562.	10		
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11		
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	0	
13 Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12 ▶	13	0	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2007	17	654
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ <input type="checkbox"/>		

Section B - Assets Placed in Service During 2007 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 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 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C - Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System

20 a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (see instructions)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	654
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2007)

SCHEDULE C
(Form 1040)

Profit or Loss From Business
(Sole Proprietorship)

OMB No. 1545-0074

2008

Attachment
Sequence No. **09**

Department of the Treasury
Internal Revenue Service (99)

Partnerships, joint ventures, etc., generally must file Form 1065 or 1065-B.
Attach to Form 1040, 1040NR, or 1041. See Instructions for Schedule C (Form 1040).

Name of proprietor JENNIFER L. KAISER		Social security number (SSN) 178-66-2711
A Principal business or profession, including product or service (see instructions) SERVICES/LIVERY TRANSPORTATION		B Enter code from instructions ▶ 485990
C Business name. If no separate business name, leave blank. KAISER TRANSPORT		D Employer ID number (EIN), if any
E Business address (including suite or room no.) City, town or post office, state, and ZIP code		
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ▶		
G Did you 'materially participate' in the operation of this business during 2008? If 'No,' see instructions for limit on losses. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
H If you started or acquired this business during 2008, check here		

Part I Income

1 Gross receipts or sales. Caution. See the instructions and check the box if: • This income was reported to you on Form W-2 and the 'Statutory employee' box on that form was checked, or • You are a member of a qualified joint venture reporting only rental real estate income not subject to self-employment tax. Also see instructions for limit on losses. <input type="checkbox"/>	1	21,454.
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	21,454.
4 Cost of goods sold (from line 42 on page 2)	4	
5 Gross profit. Subtract line 4 from line 3	5	21,454.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7 Gross income. Add lines 5 and 6	7	21,454.

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

8 Advertising	8		18 Office expense	18	35.
9 Car and truck expenses (see instructions)	9	8,711.	19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11	6,883.	a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	872.
15 Insurance (other than health)	15	1,122.	23 Taxes and licenses	23	
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	
b Other	16b	990.	b Deductible meals and entertainment (see instructions)	24b	224.
17 Legal & professional services	17	172.	25 Utilities	25	1,406.
28 Total expenses before expenses for business use of home. Add lines 8 through 27	28		26 Wages (less employment credits)	26	
29 Tentative profit or (loss). Subtract line 28 from line 7	29		27 Other expenses (from line 48 on page 2)	27	414.
30 Expenses for business use of your home. Attach Form 8829	30				
31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12, and Schedule SE, line 2 or on Form 1040NR, line 13 (if you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32.	31	625.			
32 If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (if you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited.			32a <input type="checkbox"/> All investment is at risk.		
			32b <input type="checkbox"/> Some investment is not at risk.		

Part III Cost of Goods Sold (see instructions)33 Method(s) used to value closing inventory: a ☐ Cost b ☐ Lower of cost or market c ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory?

If 'Yes,' attach explanation. ☐ Yes ☐ No

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation

35

36 Purchases less cost of items withdrawn for personal use

36

37 Cost of labor. Do not include any amounts paid to yourself

37

38 Materials and supplies

38

39 Other costs

39

40 Add lines 35 through 39

40

41 Inventory at end of year

41

42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4

42

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.43 When did you place your vehicle in service for business purposes? (month, day, year) 11/01/06

44 Of the total number of miles you drove your vehicle during 2008, enter the number of miles you used your vehicle for:

a Business 15,960 b Commuting (see instructions) c Other45 Was your vehicle available for personal use during off-duty hours? ☐ Yes ☒ No46 Do you (or your spouse) have another vehicle available for personal use? ☒ Yes ☐ No47a Do you have evidence to support your deduction? ☒ Yes ☐ Nob If 'Yes,' is the evidence written? ☒ Yes ☐ No**Part V Other Expenses.** List below business expenses not included on lines 8-26 or line 30.

OUTSIDE SERVICES 236.

PARKING AND TOLLS 95.

POSTAGE 83.

48 Total other expenses. Enter here and on page 1, line 27 48 414.

(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc)

- ▶ Attach to Form 1040, 1040NR, or Form 1041.
- ▶ See Instructions for Schedule E (Form 1040).

OMB No. 1545-0074

2008

Attachment
Sequence No. 13

Name(s) shown on return

JENNIFER L. KAISER

Your social security number

178-66-2711

Part I	Income or Loss From Rental Real Estate and Royalties
---------------	-------------------------------------------------------------

Note. If you are in the business of renting personal property, use

Schedule C or C-EZ (see instructions). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

1 List the type and address of each rental real estate property:		2 For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of: • 14 days, or • 10% of the total days rented at fair rental value? (See instructions.)		Yes	No
A	STORAGE UNITS 179 CHURCH STREET, MORRISDALE, PA 16858	A			X
B		B			
C		C			

Income:

Income:		Properties			Totals	
		A	B	C	(Add columns A, B, and C.)	
3	Rents received	3	3,951.		3	3,951.
4	Royalties received	4			4	
Expenses:						
5	Advertising	5				
6	Auto and travel (see instructions)	6				
7	Cleaning and maintenance	7				
8	Commissions	8				
9	Insurance	9	489.			
10	Legal and other professional fees	10	172.			
11	Management fees	11				
12	Mortgage interest paid to banks, etc (see instructions)	12			12	
13	Other interest	13	1,685.			
14	Repairs	14	1,187.			
15	Supplies	15				
16	Taxes	16	1,345.			
17	Utilities	17				
18	Other (list) ▶					
	BANK FEES		81.			
	GARDENING		175.			
	MISCELLANEOUS		68.			
19	Add lines 5 through 18	19	5,202.		19	5,202.
20	Depreciation expense or depletion (see instructions)	20	671.		20	671.
21	Total expenses. Add lines 19 and 20	21	5,873.			
22	Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see instructions to find out if you must file Form 6198.	22	-1,922.			
23	Deductible rental real estate loss. Caution: Your rental real estate loss on line 22 may be limited. See instructions to find out if you must file Form 8582. Real estate professionals must complete line 43 on page 2.	23	-1,922.			
24	Income. Add positive amounts shown on line 22. Do not include any losses.	24			24	
25	Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here.	25			25	-1,922.
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 13. Otherwise, include this amount in the total on line 41 on page 2.	26			26	-1,922.

PA SCHEDULE E
Rents and Royalty
Income (Loss)
 PA-40 Schedule E (02-08) (I)

2008

OFFICIAL USE ONLY

If you need more space, you may photocopy.

Name of the taxpayer filing this schedule

Social Security Number (shown first)

JENNIFER L. KAISER

178-66-2711

See the instructions. Report the income and expenses for the use of your personal property by others. Also, report the income you received for the extraction of oil, gas, and other minerals from your property, and the use of your patents and copyrights. **Note:** If you are in the business of renting your property, extracting minerals from your property, or producing products from your patents and copyrights — use PA Schedule C.

Part A. Property Description:

Show the address and kind of each rental real estate property, and/or each source of royalty income.

	Kind of property	For Profit Property	Address
A	STORAGE UNITS	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	179 CHURCH STREET, MORRISDALE, PA 16858
B		YES <input type="checkbox"/> NO <input type="checkbox"/>	
C		YES <input type="checkbox"/> NO <input type="checkbox"/>	

Part B. Identify the property from Part A and indicate if the owner is the taxpayer (T = the name shown first on the PA-40) or the spouse (S) or if jointly owned (J)**Important:** Spouses may not offset income and losses.

		Property A			Property B			Property C		
		T	S	J	T	S	J	T	S	J
Income										
1	Rent received									
2	Royalties received									
Expenses										
3	Advertising									
4	Automobile and travel									
5	Cleaning and maintenance									
6	Commissions									
7	Insurance									
8	Legal and professional fees									
9	Management fees									
10	Mortgage interest									
11	Other interest									
12	Repairs									
13	Supplies									
14	Taxes — not based on net income									
15	Utilities									
16	Depreciation expense									
Important: PA law does not permit any federal bonus depreciation. PA law limits the IRC Section 179 expensing to \$25,000. See the instructions.										
17	Other expenses (itemize):									

STATEMENT 3										

18	Total Expenses — Add Lines 3 through 17									

Income or Loss

19	Income — Subtract Line 18 from Line 1 or 2	19				
20	Loss — Subtract Line 1 or 2 from Line 18 (check box if a net loss)	20	<input checked="" type="checkbox"/>	1,922		
Net Income or Loss						
Total Lines 19 and 20			(check the box if a net loss)	<input checked="" type="checkbox"/>	21	1,922
22 Rent or royalty income (loss) from PA S corporation(s), and partnerships from your PA Schedule(s) RK-1 or NRK-1			(check the box if a net loss)	<input type="checkbox"/>	22	
23 Net Rent and Royalty Income (Loss). Add Lines 21 and 22. If submitting more than one schedule, total all amounts, and include on Line 6 of your PA-40			(check the box if a net loss)	<input checked="" type="checkbox"/>	23	1,922

2008

PENNSYLVANIA STATEMENTS

PAGE 1

CLIENT 80811

JENNIFER L. KAISER

178-66-2711

STATEMENT 1
FORM PA-40, LINE 4
BUSINESS INCOME

FROM SCHEDULE C

KAISER TRANSPORT	401.
FROM SCHEDULE C TOTAL	401.
TOTAL BUSINESS INCOME - LINE 4	<u>\$ 401.</u>

STATEMENT 2
FORM PA-40, LINE 6
RENT, ROYALTY, PATENT OR COPYRIGHT INCOME

NET INCOME OR (LOSS) FROM SCHEDULE E	\$ -1,922.
TOTAL	<u>\$ -1,922.</u>

STATEMENT 3
SCHEDULE E, LINE 17 - STORAGE UNITS
OTHER RENTAL AND ROYALTY EXPENSES

GARDENING	\$ 175.
MISCELLANEOUS	68.
BANK FEES	81.
TOTAL	<u>\$ 324.</u>

PA SCHEDULE C-F

PA-40 Schedule C-F
(09-08)(1)

2008

OFFICIAL USE ONLY

If you need more space, you may photocopy.

Adjusting Taxable Income for Pennsylvania Income Tax Purposes

Name of business owner JENNIFER L. KAISER	Social Security Number (shown first) 178-66-2711
Business Name KAISER TRANSPORT	EIN, if applicable
Business Address 408 11TH STREET PHILIPSBURG PA 16866	PA Sales Tax License Number, if applicable
Telephone Number	

General Information: Pennsylvania Personal Income Tax law and the Internal Revenue Code contain many differences that affect the amount of your reportable income. You should complete and submit a PA Schedule C or PA Schedule F using the books and records you maintain for PA income tax purposes. However, you may use this schedule to make the adjustments to your federal schedule that PA law requires. See the Department's instructions.

1 Gross Income from Federal Schedule C or Federal Schedule F	1	21,454
2 Total Expenses from Federal Schedule C or Federal Schedule F	2	20,829
3 Net Profit/Loss from Federal Schedule C or Federal Schedule F (If a net loss, check the box).	LOSS <input type="checkbox"/>	3 625
Increase your PA taxable income for differences between PA income tax and federal income tax laws.		
4 Advance receipts for goods and services that you did not report for federal purposes	4	
5 Working capital interest and dividend income that you reported on another federal schedule	5	
6 Gains from sales of business assets that you reported on a federal schedule	6	
7 Gains from like-kind exchanges that you did not report for federal purposes	7	
8 Gains on involuntary conversions (IRC Section 1033)	8	
9 Gains from sales of business property where PA basis is different than federal basis	9	
10 Income taxes you paid that you deducted for federal purposes	10	
11 Bonus depreciation. PA law does not allow any federal bonus depreciation. See the instructions	11	
12 Other depreciation expenses deducted for federal purposes that PA does not allow	12	
13 Income from cancellation of debt that PA treats differently from federal rules	13	
14 Increases in income resulting from spread associated with IRC section 481(a) adjustments	14	
15 Income from obligations of other states and organizations that is exempt for federal purposes, but not exempt for PA purposes	15	
16 Payments for owner pension, profit-sharing or deferred income plans	16	
17 Percentage depletion	17	
18 Direct expensing of amortization for federal purposes	18	
19 Other increases for PA income tax purposes — itemize:		

20 Total Adjusted PA Income. Add Lines 3 through 19.	20	625
21 Decreases for PA income tax purposes — itemize:		
MEALS AND ENTERTAINMENT ADJUSTMENT		224

22 Net PA Taxable Income/Loss from the Operation of a Business, Profession, or Farm.		
Subtract Line 21 from Line 20. Include on Line 4 of your PA-40 (If a net loss, check the box).	LOSS <input type="checkbox"/>	22 401

Form **8879**Department of the Treasury
Internal Revenue Service**IRS e-file Signature Authorization**

- Do not send to the IRS. This is not a tax return.
► Keep this form for your records. See instructions.

OMB No. 1545-0074

2009

Declaration Control Number (DCN) ►

00-251755-50022-0

Taxpayer's name

JENNIFER L. KAISER

Social security number

178-66-2711

Spouse's name

Spouse's social security number

Part I Tax Return Information – Tax Year Ending December 31, 2009 (Whole Dollars Only)

1 Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	1	43,113.
2 Total tax (Form 1040, line 60; Form 1040A, line 37; Form 1040EZ, line 11)	2	2,356.
3 Federal income tax withheld (Form 1040, line 61; Form 1040A, line 38; Form 1040EZ, line 7)	3	8,332.
4 Refund (Form 1040, line 73a; Form 1040A, line 46a; Form 1040EZ, line 12a; Form 1040-SS, Part I, line 13a)	4	6,376.
5 Amount you owe (Form 1040, line 75; Form 1040A, line 48; Form 1040EZ, line 13)	5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2009, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my Federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. I further understand that this authorization may apply to future Federal tax payments that I direct to be debited through the Electronic Federal Tax Payment System (EFTPS). In order for me to initiate future payments, I request that the IRS send me a personal identification number (PIN) to access EFTPS. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

☒ I authorize WALTER HOPKINS & COMPANY, LLP to enter or generate my PIN 80811
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on my tax year 2009 electronically filed income tax return.

☐ I will enter my PIN as my signature on my tax year 2009 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ►

Date ► 2/08/2010

Spouse's PIN: check one box only

☐ I authorize _____ to enter or generate my PIN _____
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on my tax year 2009 electronically filed income tax return.

☐ I will enter my PIN as my signature on my tax year 2009 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►

Date ►

Practitioner PIN Method Returns Only – continue below**Part III Certification and Authentication – Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 25175512345
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2009 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Publication 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ► FRED C. LUCAS, JR., CPADate ► 2/08/2010

**ERO Must Retain This Form – See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

BAA For Paperwork Reduction Act Notice, see instructions.

Form 8879 (2009)

Form 1040

Department of the Treasury — Internal Revenue Service

U.S. Individual Income Tax Return 2009

(99) IRS Use Only — Do not write or staple in this space.

Label
(See instructions.)Use the
IRS label.
Otherwise,
please print
or type.Presidential
Election
Campaign

For the year Jan 1 - Dec 31, 2009, or other tax year beginning , 2009, ending , 20

OMB No. 1545-0074

Your first name MI Last name

JENNIFER L. KAISER

Your social security number

178-66-2711

If a joint return, spouse's first name MI Last name

Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions.

Apartment no.

420 11TH STREET

City, town or post office. If you have a foreign address, see instructions.

State ZIP code

PHILIPSBURG, PA 16866

You must enter your
social security
number(s) above.Checking a box below will not
change your tax or refund.Check here if you, or your spouse if filing jointly, want \$3 to go to this fund? (see instructions) ☐ You ☐ Spouse

Filing Status

- 1 ☐ Single
- 2 ☐ Married filing jointly (even if only one had income)
- 3 ☐ Married filing separately. Enter spouse's SSN above & full name here.
- 4 ☒ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here.
- 5 ☐ Qualifying widow(er) with dependent child (see instructions)

Check only
one box.

Exemptions

- 6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a.
- b ☐ Spouse
- c Dependents:
- | (1) First name | Last name | (2) Dependent's social security number | (3) Dependent's relationship to you | (4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see instrs) |
|----------------|-----------|----------------------------------------|-------------------------------------|-----------------------------------------------------------------------------------------------|
| CHANCE | KAISER | 185-84-1104 | SON | <input checked="" type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
- Boxes checked on 6a and 6b. 1
- No. of children on 6c who:
- ☒ lived with you. 1
 - ☐ did not live with you due to divorce or separation (see instrs).
- Dependents on 6c not entered above.
- Add numbers on lines above. 2
- d Total number of exemptions claimed. 2

If more
than four
dependents,
see instructions
and check here ☐

Income

- 7 Wages, salaries, tips, etc. Attach Form(s) W-2. 7 41,787.
- 8a Taxable interest. Attach Schedule B if required. 8a
- b Tax-exempt interest. Do not include on line 8a. 8b
- 9a Ordinary dividends. Attach Schedule B if required. 9a
- b Qualified dividends (see instrs). 9b
- 10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions). 10
- 11 Alimony received. 11
- 12 Business income or (loss). Attach Schedule C or C-EZ. 12 1,311.
- 13 Capital gain or (loss). Att Sch D If reqd. If not reqd, ck here ☐ 13
- 14 Other gains or (losses). Attach Form 4797. 14
- 15a IRA distributions. 15a b Taxable amount (see instrs). 15b
- 16a Pensions and annuities. 16a b Taxable amount (see instrs). 16b
- 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E. 17 108.
- 18 Farm income or (loss). Attach Schedule F. 18
- 19 Unemployment compensation in excess of \$2,400 per recipient (see instructions). 19
- 20a Social security benefits. 20a b Taxable amount (see instrs). 20b
- 21 Other income. 21
- 22 Add the amounts in the far right column for lines 7 through 21. This is your total income. 22 43,206.

Attach Form(s)
W-2 here. Also
attach Forms
W-2G and 1099-R
if tax was withheld.If you did not
get a W-2,
see instructions.Enclose, but do
not attach, any
payment. Also,
please use
Form 1040-V.Adjusted
Gross
Income

- 23 Educator expenses (see instructions). 23
- 24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ. 24
- 25 Health savings account deduction. Attach Form 8889. 25
- 26 Moving expenses. Attach Form 3903. 26
- 27 One-half of self-employment tax. Attach Schedule SE. 27 93.
- 28 Self-employed SEP, SIMPLE, and qualified plans. 28
- 29 Self-employed health insurance deduction (see instructions). 29
- 30 Penalty on early withdrawal of savings. 30
- 31a Alimony paid b Recipient's SSN. 31a
- 32 IRA deduction (see instructions). 32
- 33 Student loan interest deduction (see instructions). 33
- 34 Tuition and fees deduction. Attach Form 8917. 34
- 35 Domestic production activities deduction. Attach Form 8903. 35
- 36 Add lines 23 - 31a and 32 - 35. 36 93.
- 37 Subtract line 36 from line 22. This is your adjusted gross income. 37 43,113.

Tax and Credits**Standard Deduction for —**

• People who check any box on line 39a, 39b, or 40b or who can be claimed as a dependent, see instructions.

• All others:

Single or Married filing separately, \$5,700

Married filing jointly or Qualifying widow(er), \$11,400

Head of household, \$8,350

38	Amount from line 37 (adjusted gross income).....	38	43,113.
39a	Check <input type="checkbox"/> You were born before January 2, 1945, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a		
	if: <input type="checkbox"/> Spouse was born before January 2, 1945, <input type="checkbox"/> Blind. checked <input type="checkbox"/> 39b		
	b If your spouse itemizes on a separate return, or you were a dual-status alien, see instrs and ck here ▶ 39b		
40a	Itemized deductions (from Schedule A) or your standard deduction (see left margin).....	40a	8,350.
	b If you are increasing your standard deduction by certain real estate taxes, new motor vehicle taxes, or a net disaster loss, attach Schedule L and check here (see instructions). ▶ 40b <input type="checkbox"/>		
41	Subtract line 40a from line 38.....	41	34,763.
42	Exemptions. If line 38 is \$125,100 or less and you did not provide housing to a Midwestern displaced individual, multiply \$3,650 by the number on line 6d. Otherwise, see instructions.....	42	7,300.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0.....	43	27,463.
44	Tax (see instrs). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972.....	44	3,524.
45	Alternative minimum tax (see instructions). Attach Form 6251.....	45	0.
46	Add lines 44 and 45.....	46	3,524.
47	Foreign tax credit. Attach Form 1116 if required.....	47	
48	Credit for child and dependent care expenses. Attach Form 2441.....	48	353.
49	Educational credits from Form 8863, line 29.....	49	
50	Retirement savings contributions credit. Attach Form 8880.....	50	
51	Child tax credit (see instructions).....	51	1,000.
52	Credits from Form: a <input type="checkbox"/> 8396 b <input type="checkbox"/> 8839 c <input type="checkbox"/> 5695.....	52	
53	Other crs from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/> 53	53	
54	Add lines 47 through 53. These are your total credits.....	54	1,353.
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0.....	55	2,171.
56	Self-employment tax. Attach Schedule SE.....	56	185.
57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919.....	57	
58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required.....	58	
59	Additional taxes: a <input type="checkbox"/> AEIC payments b <input type="checkbox"/> Household employment taxes. Attach Schedule H.....	59	
60	Add lines 55-59. This is your total tax.....	60	2,356.

Other Taxes**Payments**

If you have a qualifying child, attach Schedule EIC.

61	Federal income tax withheld from Forms W-2 and 1099.....	61	8,332.
62	2009 estimated tax payments and amount applied from 2008 return.....	62	
63	Making work pay and government retiree credit. Attach Schedule M.....	63	400.
64a	Earned income credit (EIC).....	64a	
	b Nontaxable combat pay election ▶ 64b <input type="checkbox"/>		
65	Additional child tax credit. Attach Form 8812.....	65	
66	Refundable education credit from Form 8863, line 16.....	66	
67	First-time homebuyer credit. Attach Form 5405.....	67	
68	Amount paid with request for extension to file (see instructions).....	68	
69	Excess social security and tier 1 RRTA tax withheld (see instructions).....	69	
70	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 4136 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885.....	70	
71	Add lines 61-63, 64a, & 65-70. These are your total pmts.....	71	8,732.

Refund

Direct deposit? See instructions and fill in 73b, 73c, and 73d or Form 8888.

72	If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid.....	72	6,376.
73a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check here. ▶ <input type="checkbox"/>	73a	6,376.
	▶ b Routing number..... 231381116 ▶ c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	▶ d Account number..... 0452493802		
74	Amount of line 72 you want applied to your 2010 estimated tax.....	74	

Amount You Owe

75	Amount you owe. Subtract line 71 from line 60. For details on how to pay, see instructions.....	75	
76	Estimated tax penalty (see instructions).....	76	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☒ Yes. Complete the following. ☐ No

Designee's name ▶ FRED C. LUCAS, JR., CPA Phone no. ▶ 814-342-2155 Personal identification number (PIN) ▶ 12345

Sign Here

Joint return? See instructions.

Keep a copy for your records.

Your signature	Date	Your occupation	Daytime phone number
		CORRECTIONS OFFICE	814-290-3938
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	

Paid Preparer's Use Only

Preparer's signature ▶ FRED C. LUCAS, JR., CPA	Date ▶ 2/01/10	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN ▶ P00157061
Firm's name (or yours if self-employed) ▶ WALTER HOPKINS & COMPANY, LLP	EIN ▶ 25-1065143		
Address, and ZIP code ▶ P.O. BOX 684 PHILIPSBURG, PA 16866-0684	Phone no. ▶ 814-342-2155		

SCHEDULE C
(Form 1040)

Profit or Loss From Business
(Sole Proprietorship)

OMB No. 1545-0074

2009

Attachment
Sequence No. 09

Department of the Treasury
Internal Revenue Service (99)

Partnerships, joint ventures, etc., generally must file Form 1065 or 1065-B.
Attach to Form 1040, 1040NR, or 1041. See instructions for Schedule C (Form 1040).

Name of proprietor JENNIFER L. KAISER		Social security number (SSN) 178-66-2711
A Principal business or profession, including product or service (see instructions) SERVICES/LIVERY TRANSPORTATION		B Enter code from instructions 485990
C Business name. If no separate business name, leave blank. KAISER TRANSPORT		D Employer ID number (EIN), if any
E Business address (including suite or room no.) City, town or post office, state, and ZIP code		
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify)		
G Did you 'materially participate' in the operation of this business during 2009? If 'No,' see instructions for limit on losses. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
H If you started or acquired this business during 2009, check here.		

Part I Income

1 Gross receipts or sales. Caution. See the instructions and check the box if: • This income was reported to you on Form W-2 and the 'Statutory employee' box on that form was checked, or • You are a member of a qualified joint venture reporting only rental real estate income not subject to self-employment tax. Also see instructions for limit on losses. <input type="checkbox"/>	1	13,586.
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	13,586.
4 Cost of goods sold (from line 42 on page 2)	4	
5 Gross profit. Subtract line 4 from line 3	5	13,586.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7 Gross income. Add lines 5 and 6	7	13,586.

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

8 Advertising	8		18 Office expense	18	7.
9 Car and truck expenses (see instructions)	9	5,199.	19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11	3,697.	a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	155.
15 Insurance (other than health)	15		23 Taxes and licenses	23	
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	
b Other	16b	870.	b Deductible meals and entertainment (see instructions)	24b	78.
17 Legal & professional services	17	200.	25 Utilities	25	
			26 Wages (less employment credits)	26	
			27 Other expenses (from line 48 on page 2)	27	2,069.
28 Total expenses before expenses for business use of home. Add lines 8 through 27	28	12,275.			
29 Tentative profit or (loss). Subtract line 28 from line 7	29	1,311.			
30 Expenses for business use of your home. Attach Form 8829	30				
31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12, and Schedule SE, line 2 or on Form 1040NR, line 13 (if you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32.	31	1,311.			

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

• If you checked 32a, enter the loss on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (if you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3.

• If you checked 32b, you must attach Form 6198. Your loss may be limited.

32a ☐ All investment is at risk.

32b ☐ Some investment is not at risk.

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

Schedule C (Form 1040) 2009

Part III Cost of Goods Sold (see instructions)

33	Method(s) used to value closing inventory: a <input type="checkbox"/> Cost b <input type="checkbox"/> Lower of cost or market c <input type="checkbox"/> Other (attach explanation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If 'Yes,' attach explanation:.....	<input type="checkbox"/> Yes <input type="checkbox"/> No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35
36	Purchases less cost of items withdrawn for personal use	36
37	Cost of labor. Do not include any amounts paid to yourself	37
38	Materials and supplies	38
39	Other costs	39
40	Add lines 35 through 39	40
41	Inventory at end of year	41
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4	42

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) ▶ 11/01/06

44 Of the total number of miles you drove your vehicle during 2009, enter the number of miles you used your vehicle for:
a Business 9,452 b Commuting (see instructions) _____ c Other _____

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

46 Do you (or your spouse) have another vehicle available for personal use?..... ☒ Yes ☐ No

47a Do you have evidence to support your deduction?..... ☒ Yes ☐ No

b If 'Yes,' is the evidence written?..... ☒ Yes ☐ No

Part V Other Expenses. List below business expenses not included on lines 8-25 or line 30.

BANK CHARGES	29.
PAGER & TELEPHONE	1,954.
PARKING AND TOLLS	16.
POSTAGE	70.
.....	
.....	
.....	
.....	
.....	
48 Total other expenses. Enter here and on page 1, line 27	48 2,069.

SCHEDULE M
(Form 1040A or 1040)

**Making Work Pay and Government
Retiree Credits**

OMB No. 1545-0074

2009

Attachment
Sequence No. **166**

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040A, 1040, or 1040NR.

▶ See separate instructions.

Name(s) shown on return

JENNIFER L. KAISER

Your social security number

178-66-2711

1a Important: See the instructions if you can be claimed as someone else's dependent or are filing Form 1040NR. Check the 'No' box below and see the instructions if (a) you have a net loss from a business, (b) you received a taxable scholarship or fellowship grant not reported on a Form W-2, (c) your wages include pay for work performed while an inmate in a penal institution, (d) you received a pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan, or (e) you are filing Form 2555 or 2555-EZ.

Do you (and your spouse if filing jointly) have 2009 wages of more than \$6,451 (\$12,903 if married filing jointly)?

☒ **Yes.** Skip lines 1a through 3. Enter \$400 (\$800 if married filing jointly) on line 4 and go to line 5.

☐ **No.** Enter your earned income (see instructions) **1a**

b Nontaxable combat pay included on line 1a
(see instructions) **1b**

2 Multiply line 1a by 6.2% (.062) **2**

3 Enter \$400 (\$800) if married filing jointly) **3**

4 Enter the smaller of line 2 or line 3 (unless you checked 'Yes' on line 1a) **4** **400.**

5 Enter the amount from Form 1040, line 38*, or Form 1040A, line 22 **5** **43,113.**

6 Enter \$75,000 (\$150,000 if married filing jointly) **6** **75,000.**

7 Is the amount on line 5 more than the amount on line 6?

☒ **No.** Skip line 8. Enter the amount from line 4 on line 9 below.

☐ **Yes.** Subtract line 6 from line 5 **7**

8 Multiply line 7 by 2% (.02) **8**

9 Subtract line 8 from line 4. If zero or less, enter -0- **9** **400.**

10 Did you (or your spouse, if filing jointly) receive an economic recovery payment in 2009? You may have received this payment if you received social security benefits, supplemental security income, railroad retirement benefits, or veterans disability compensation or pension benefits (see instructions).

☒ **No.** Enter -0- on line 10 and go to line 11.

☐ **Yes.** Enter the total of the payments received by you (and your spouse, if filing jointly).
Do not enter more than \$250 (\$500 if married filing jointly) **10** **0.**

11 Did you (or your spouse, if filing jointly) receive a pension or annuity in 2009 for services performed as an employee of the U.S. Government or any U.S. state or local government from work not covered by social security? Do not include any pension or annuity reported on Form W-2.

☒ **No.** Enter -0- on line 11 and go to line 12.

☐ **Yes.** • If you checked 'No' on line 10, enter \$250 (\$500 if married filing jointly and the answer on line 11 is 'Yes' for both spouses)
• If you checked 'Yes' on line 10, enter -0- (exception: enter \$250 if filing jointly and the spouse who received the pension or annuity did not receive an economic recovery payment described on line 10) **11** **0.**

12 Add lines 10 and 11 **12**

13 Subtract line 12 from line 9. If zero or less, enter -0- **13** **400.**

14 Making work pay and government retiree credits. Add lines 11 and 13. Enter the result here and on Form 1040, line 63, Form 1040A, line 40; or Form 1040NR, line 60 **14** **400.**

*If you are filing Form 2555, 2555-EZ, or 4563 or you are excluding income from Puerto Rico, see instructions.

BAA For Paperwork Reduction Act Notice, see Form 1040A, 1040, or 1040NR instructions.

Schedule M (Form 1040A or 1040) 2009

SCHEDULE SE
(Form 1040)Department of the Treasury
Internal Revenue Service**Self-Employment Tax**► **Attach to Form 1040. ► See Instructions for Schedule SE (Form 1040).**

OMB No. 1545-0074

2009Attachment
Sequence No. 17

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

JENNIFER L. KAISER

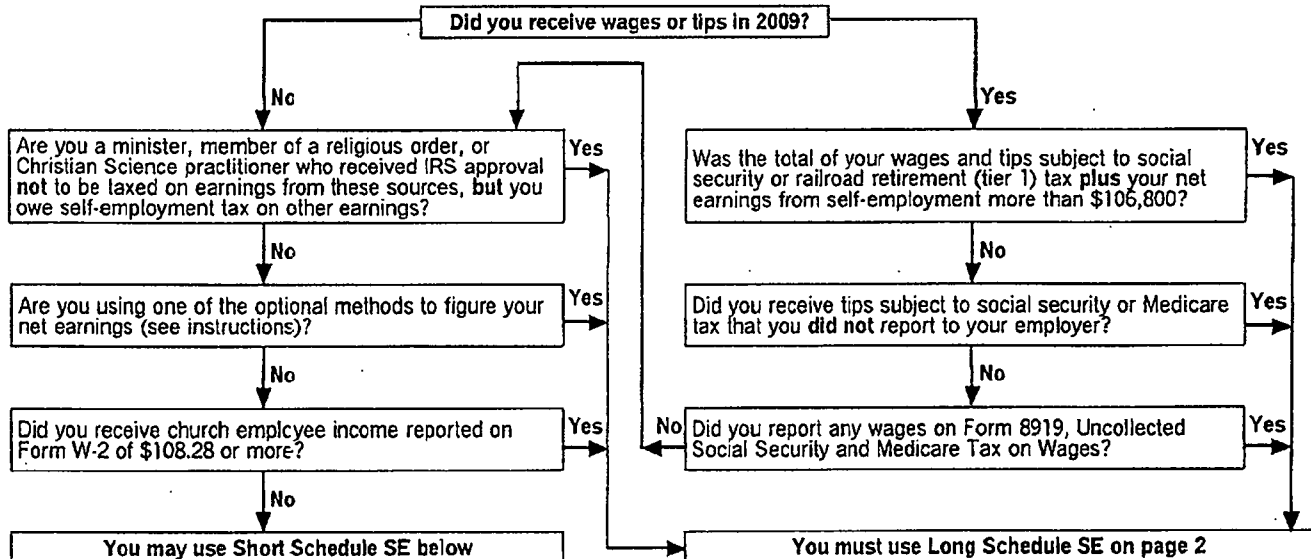
Social security number of person
with self-employment income ►

178-66-2711

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 (see instructions).

Note. Even if you had 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 (see instructions).**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 56.**May I Use Short Schedule SE or Must I Use Long Schedule SE?****Note.** Use this flowchart only if you must file Schedule SE. If unsure, see *Who Must File Schedule SE*, above.**Section A - Short Schedule SE. Caution.** Read above to see if you can use Short Schedule SE.

1 a Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1 a	
b If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 6b, or listed on Schedule K-1 (Form 1065), box 20, code Y	1 b	
2 Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instrs for types of income to report on this line. See instrs for other income to report	2	1,311.
3 Combine lns 1a, 1b & 2	3	1,311.
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	1,211.
5 Self-employment tax. If the amount on line 4 is: • \$106,800 or less, multiply line 4 by 15.3% (.153). Enter the result here and on Form 1040, line 56. • More than \$106,800, multiply line 4 by 2.9% (.029). Then, add \$13,243.20 to the result. Enter the total here and on Form 1040, line 56.	5	185.
6 Deduction for one-half of self-employment tax. Multiply line 5 by 50% (.5). Enter the result here and on Form 1040, line 27	6	93.

Child and Dependent Care Expenses

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040, Form 1040A, or Form 1040NR.

▶ See separate instructions.

2009Attachment
Sequence No. 21

Name(s) shown on return

JENNIFER L. KAISER

Your social security number

178-66-2711

Part I **Persons or Organizations Who Provided the Care** — You must complete this part.
(If you have more than two care providers, see the instructions.)

1	(a) Care provider's name	(b) Address (no., street, apt no., city, state, and ZIP code)	(c) Identifying no. (SSN or EIN)	(d) Amount paid (see instructions)
	GETHSEMANE UM DAY CARE	369 ALLPORT CUTOFF KYLERTOWN, PA 16847	25-1583078	1,764.

Did you receive
dependent care benefits?

No

Complete only Part II below.

Yes

Complete Part III on page 2 next.

Caution. If the care was provided in your home, you may owe employment taxes. If you do, you cannot file Form 1040A. For details, see the instructions for Form 1040, line 59, or Form 1040NR, line 56.**Part II** **Credit for Child and Dependent Care Expenses**

2 Information about your qualifying person(s). If you have more than two qualifying persons, see the instructions.

(a) Qualifying person's name		(b) Qualifying person's social security number	(c) Qualified expenses you incurred and paid in 2009 for the person listed in column (a)
First	Last		
CHANCE	KAISER	185-84-1104	1,764.

3 Add the amounts in column (c) of line 2. Do not enter more than \$3,000 for one qualifying person or \$6,000 for two or more persons. If you completed Part III, enter the amount from line 34	3	1,764.
4 Enter your earned income. See instructions	4	43,005.
5 If married filing jointly, enter your spouse's earned income (if your spouse was a student or was disabled, see the instructions); all others, enter the amount from line 4	5	43,005.
6 Enter the smallest of line 3, 4, or 5	6	1,764.
7 Enter the amount from Form 1040, line 38; Form 1040A, line 22; or Form 1040NR, line 36	7	43,113.

8 Enter on line 8 the decimal amount shown below that applies to the amount on line 7

If line 7 is:

Over	But not over	Decimal amount is
\$0—15,000		.35
15,000—17,000		.34
17,000—19,000		.33
19,000—21,000		.32
21,000—23,000		.31
23,000—25,000		.30
25,000—27,000		.29
27,000—29,000		.28

If line 7 is:

Over	But not over	Decimal amount is
\$29,000—31,000		.27
31,000—33,000		.26
33,000—35,000		.25
35,000—37,000		.24
37,000—39,000		.23
39,000—41,000		.22
41,000—43,000		.21
43,000—No limit		.20

9 Multiply line 6 by the decimal amount on line 8. If you paid 2008 expenses in 2009, see the instructions	9	353.
10 Enter the amount from Form 1040, line 46; Form 1040A, line 28; or Form 1040NR, line 43	10	3,524.
11 Enter the amount from Form 1040, line 47; or Form 1040NR, line 44. Form 1040A filers, enter -0-	11	
12 Subtract line 11 from line 10. If zero or less, stop. You cannot take the credit	12	3,524.
13 Credit for child and dependent care expenses. Enter the smaller of line 9 or line 12 here and on Form 1040, line 48; Form 1040A, line 29; or Form 1040NR, line 45	13	353.

BAA For Paperwork Reduction Act Notice, see separate instructions.

Form 2441 (2009)

Form **4562**Department of the Treasury
Internal Revenue Service (99)**Depreciation and Amortization**
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2009Attachment
Sequence No. **67**

Name(s) shown on return

JENNIFER L. KAISER

Identifying number

178-66-2711

Business or activity to which this form relates

SCHEDULE E (RENTAL) - STORAGE UNITS**Part I Election To Expense Certain Property Under Section 179**

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

1	Maximum amount. See the instructions for a higher limit for certain businesses.	1	\$250,000.
2	Total cost of section 179 property placed in service (see instructions).	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions).	3	\$800,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.	4	
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	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29.	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7.	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8.	9	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562.	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs).	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11.	12	
13	Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12.	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions).	14	
15	Property subject to section 168(f)(1) election.	15	
16	Other depreciation (including ACRS).	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2009.	17	671.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here. <input type="checkbox"/>		

Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

(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
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	

Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28.	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions.	22	671.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.	23	

2009

PENNSYLVANIA FILING INSTRUCTIONS

CLIENT 80811

JENNIFER L. KAISER

178-66-2711

ELECTRONICALLY FILED:

FORM PA-40 - 2009 PENNSYLVANIA INCOME TAX RETURN

THE ABOVE RETURN WILL BE ELECTRONICALLY FILED WITH THE STATE OF PENNSYLVANIA UPON RECEIPT OF A SIGNED FORM PA-8879.

FORM TO FILE:

FORM PA-V - 2009 PENNSYLVANIA PAYMENT VOUCHER

SIGNATURE:

NO SIGNATURE IS REQUIRED.

PAYMENT:

THERE IS A BALANCE DUE OF \$41. MAKE YOUR CHECK PAYABLE TO THE "PENNSYLVANIA DEPARTMENT OF REVENUE". WRITE THE LAST FOUR DIGITS OF YOUR SOCIAL SECURITY NUMBER AND "2009 PA TAX" ON THE CHECK. DO NOT ATTACH THE CHECK TO FORM PA-V. INSTEAD, PLACE IT LOOSE IN THE ENVELOPE AND ALSO ENCLOSE FORM PA-V.

WHEN TO FILE:

ON OR BEFORE APRIL 15, 2010.

WHERE TO FILE:

PA DEPARTMENT OF REVENUE
PAYMENT ENCLOSED
1 REVENUE PLACE
HARRISBURG, PA 17129-0001



Form PA-8879

Pennsylvania e-file Signature Authorization

2009

Declaration Control Number (DCN)

00-251755-50022-0

Taxpayer's Name

JENNIFER L. KAISER

Social Security Number

178-66-2711

Spouse's Name

Spouse's Social Security Number

PART I Tax Return Information – Tax Year Ending December 31, 2009 (Whole dollars only)

1	Adjusted PA Taxable Income (Form PA-40, line 11).....	1	47,322.
2	PA Tax Liability (Form PA-40, line 12).....	2	1,453.
3	Total PA Tax Withheld (Form PA-40, line 13).....	3	1,412.
4	Refund (Form PA-40, line 29).....	4	
5	Total Payment (Tax Due)(Form PA-40, line 27).....	5	41.

PART II Declaration and Signature Authorization of Taxpayer

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements of my 2009 PA Tax Return (Form PA-40), and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of my electronic income tax return. If applicable, I authorize the PA Department of Revenue and its designated financial agents to initiate an electronic funds withdrawal (Direct Debit) entry to my designated account for Pennsylvania taxes owed. I also authorize my financial institution to debit the entry to my account and the financial institutions involved in the processing of my electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to payment. I certify the funds for this withdrawal are originating from an account within the United States or one of its territories. I have selected a personal identification number as my signature for my electronic income tax return and, if applicable, my electronic funds withdrawal consent.

Taxpayer's Personal Identification Number (PIN): (check one box only)

☒ I authorize WALTER HOPKINS & COMPANY, LLP to enter my PIN 80811 as my signature on my tax year 2009 electronically filed income tax return.

☐ I will enter my PIN as my signature on my tax year 2009 electronically filed income tax return.

Your signature _____ Date 2/08/2010

Spouse's PIN: (check one box only)

☐ I authorize _____ to enter my PIN _____ as my signature on my tax year 2009 electronically filed income tax return.

☐ I will enter my PIN as my signature on my tax year 2009 electronically filed income tax return.

Spouse's signature _____ Date _____

Practitioner PIN Program Participants Only – Continue Below

PART III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN 25175512345

As a participant in the Practitioner PIN Program, I certify that the above numeric entry is my PIN, which is my signature on the tax year 2009 electronically filed income tax return for the taxpayer(s) indicated above. I confirm I am participating in the Practitioner PIN Program in accordance with the requirements established for this program.

ERO's signature _____ Date 2/08/2010

ERO must retain this form and the supporting documents for three years.

DO NOT SUBMIT THIS FORM TO THE PENNSYLVANIA DEPARTMENT OF REVENUE.

0900112178

PA-40 – 2009
Pennsylvania Income Tax Return
 ENTER ONE LETTER OR NUMBER IN EACH BOX.
 Do Not Use Your Preprinted Label

178662711

KAISER

JENNIFER

L Occupation CORRECTION

Occupation

420 11TH STREET

PHILIPSBURG

PA 16866

814-290-3938

17700

N Extension.

N Amended Return.

R Residency Status.
PA Resident/Nonresident/Part-Year Resident
from toS Single/Married, Filing Jointly/Married,
Filing Separately/Final Return/Deceased
Date of death

N Farmers.

School District Name PHILIPSBURG-0

1a Gross Compensation. Do not include exempt income, such as combat zone pay and qualifying retirement benefits. See the instructions.

1b Unreimbursed Employee Business Expenses.

1c Net Compensation. Subtract Line 1b from Line 1a.

2 Interest Income. Complete PA Schedule A if required.

3 Dividend and Capital Gains Distributions Income. Complete PA Schedule B if required.

4 Net Income or Loss from the Operation of a Business, Profession or Farm.
SEE STATEMENT 1

5 Net Gain or Loss from the Sale, Exchange or Disposition of Property.

6 Net Income or Loss from Rents, Royalties, Patents or Copyrights. SEE STM 2

7 Estate or Trust Income. Complete and submit PA Schedule J.

8 Gambling and Lottery Winnings. Complete and submit PA Schedule T.

9 Total PA Taxable Income. Add only the positive income amounts from Lines 1c, 2, 3, 4, 5, 6, 7 and 8. DO NOT ADD any losses reported on Lines 4, 5 or 6.

10 Other Deductions. Enter the appropriate code for the type of deduction.
See the instructions for additional information.

11 Adjusted PA Taxable Income. Subtract Line 10 from Line 9.

1a 45981

1b 0

1c 45981

2 0

3 0

4 1233

5 0

6 108

7 0

8 0

9 47322

10 0

11 47322

PAIA0412L 12/24/09

EC

Page 1 of 2

FC

0900112178

0900112178

0900212186

PA-40 - 2009
Social Security Number

178662711

Name(s) KAISER, JENNIFER L.

12 PA Tax Liability. Multiply Line 11 by 3.07 percent (0.0307).

13 Total PA Tax Withheld. See the instructions.

14 Credit from your 2008 PA Income Tax return.

15 2009 Estimated Installment Payments.

16 2009 Extension Payment.

17 Nonresident Tax Withheld from your PA Schedule(s) NRK-1. (Nonresidents only)

18 Total Estimated Payments and Credits. Add Lines 14, 15, 16 and 17.

Tax Forgiveness Credit. Submit PA Schedule SP.

19a Filing Status: 01 Unmarried or Separated 02 Married 03 Deceased

19b Dependents, Part B, Line 2, PA Schedule SP

20 Total Eligibility Income from Part C, Line 11, PA Schedule SP.

21 Tax Forgiveness Credit from Part D, Line 16, PA Schedule SP.

22 Resident Credit. Submit your PA Schedule(s) G-R with your
PA Schedule(s) G-S, G-L and/or RK-1.

23 Total Other Credits. Submit your PA Schedule OC.

24 TOTAL PAYMENTS and CREDITS. Add Lines 13, 18, 21, 22 and 23.

25 TAX DUE. If Line 12 is more than Line 24, enter the difference here.

26 Penalties and Interest. See the instructions. Enter code:

If including form REV-1630, mark the box. N

27 TOTAL PAYMENT DUE. See the instructions.

28 OVERPAYMENT. If Line 24 is more than the total of Line 12 and Line 26, enter
the difference here.

The total of Lines 29 through 35 must equal Line 28.

29 Refund - Amount of Line 28 you want as a check mailed to you. Refund

30 Credit - Amount of Line 28 you want as a credit to your 2010 estimated account.

31 Amount of Line 28 you want to donate to the Wild Resource Conservation Fund.

32 Amount of Line 28 you want to donate to the Military Family Relief Assistance Program.

33 Amount of Line 28 you want to donate to the Governor Robert P. Casey Memorial
Organ and Tissue Donation Awareness Trust Fund.34 Amount of Line 28 you want to donate to the Juvenile (Type 1) Diabetes Cure
Research Fund.35 Amount of Line 28 you want to donate to the PA Breast Cancer Coalition's Breast
and Cervical Cancer Research Fund.Signature(s). Under penalties of perjury, I (we) declare that I (we) have examined this return, including all
accompanying schedules and statements, and to the best of my (our) belief, they are true, correct, and complete.

Your Signature

Spouse's Signature, if filing jointly

Preparer's Name and Telephone Number

814-342-2155

Date

2/01/10

FRED C. LUCAS, JR., CPA

WALTER HOPKINS & COMPANY, LLP

P.O. BOX 684 PHILIPSBURG, PA 16866-0684

12	1453
13	1412

14	0
15	0
16	0
17	0
18	0

19a	00	
19b	00	
20		0
21		0

22	0
23	0
24	1412
25	41
26	0

27	41
28	0

29	0
30	0
31	0
32	0
33	0

34	0
35	0

Firm FEIN

Preparer's SSN/PTIN

251065143

P00157061

0900212186

0900212186

MAIL FORM PA-V PAYMENTS TO:

PA DEPARTMENT OF REVENUE
PAYMENT ENCLOSED
1 REVENUE PLACE
HARRISBURG, PA 17129-0001

CUT ALONG DOTTED LINE

2005 PA-V PA PAYMENT VOUCHER

178-66-2711 KA

0900919002

PAYMENT AMOUNT

KAISER
JENNIFER L

814-290-3938

\$ 41.00

420 11TH STREET
PHILIPSBURG
PA
16866

DEPARTMENT USE ONLY

Make check or money order
payable to the Pennsylvania
Department of Revenue

0901910026

PA SCHEDULE W-2S

Wage Statement Summary

PA-40 Schedule W-2S
(09-09) (i)**2009**

OFFICIAL USE ONLY

Summary of PA Taxable Employee, Non-employee, and Miscellaneous Compensation

Name shown first on the PA-40 (if filing jointly)

Social Security Number (shown first)

JENNIFER L. KAISER**178-66-2711**

Use this schedule to list and calculate your total PA taxable compensation and PA tax withheld from all sources.

Part A Instructions: List each Federal Form W-2 for you and your spouse, if married, received from your employer(s). In the first column enter T for the taxpayer's Social Security Number that appears first on the PA tax return and enter S for the second or spouse SSN. From the Forms W-2, enter each employer's federal identification number. Enter the amounts from the Forms W-2 in each column. **IMPORTANT:** You do not have to submit a copy of your Form W-2 if you earned all your income in Pennsylvania and your employer reported your PA wages correctly and withheld the correct amount of PA income tax. You **must** submit a copy of your Form W-2 in certain circumstances. See the PA Schedule W-2S instructions for a list of when a copy of a W-2 is required.

Part B Instructions: List each source of income received during the taxable year on a form or statement other than a Federal Form W-2. Enter each payer's name. List the payment type that most closely describes the source of your non-employee compensation. Enter the amount of other compensation that you earned. If the form or statement does not have separately stated amounts, enter the amount shown in both Federal and PA columns.

IMPORTANT: You must submit a copy of each form and statement that you list in Part B, whether or not the payer withheld any PA income tax and regardless of whether or not the income was taxable in PA. **CAUTION:** The federal and Pennsylvania (state) wages may be different in Part A and Part B.

If you need more space, you may photocopy this schedule or make your own schedules in this format.

Part A - Federal Forms W-2

T/S	Employer's identification number from Box b	Federal wages from Box 1	Medicare wages from Box 5	PA compensation from Box 16	PA income tax withheld from Box 17
T	23-2172299	41,787.	45,981.	45,981.	1,412.
Total Part A - Add the Pennsylvania columns				45,981.	1,412.

Part B - Miscellaneous and Non-employee Compensation from Federal Forms 1099-R, 1099-MISC and other statements

YOU MUST SUBMIT COPIES OF EACH FORM OR STATEMENT LISTED IN THIS PART

A T/S	B Type	C Payer name	D 1099R code	E Total federal amount	F Adjusted plan basis	G PA compensation	H PA tax withheld
Total Part B - Add the Pennsylvania columns						0.	0.

TOTAL - Add the totals from Parts A and B**45,981.****1,412.**

Enter the TOTALS on your PA tax return on:

Line 1a

Line 13

Payment type: A Executor fee B Jury duty pay C Director's fee D Expert witness fee
 E Honorarium F Covenant not to compete G Damages or settlement for lost wages, other than personal injury
 H Other nonemployee compensation. Describe: _____
 I Distribution from employer sponsored retirement, pension or qualified deferred compensation plan
 J Distribution from IRA (Traditional or Roth) K Distribution from Life Insurance, Annuity or Endowment Contracts
 L Distribution from Charitable Gift Annuities

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PAIA0601L 12/21/09

0901910026

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PA-40 Schedule C — 2009

(09-09) Profit or Loss From Business or Profession (Sole Proprietorship)

178662711 JENNIFER L KAISER

Method of Inventory: C=Cost, L=Lower
of cost or market, O=Other

SERVICESLIVERY TRANS OTHER TRANSIT GROUND

Accounting Method: A=Accrual, C=Cash, O=Other C

KAISER TRANSPORT

Home office
expenses deducted N

485990

Business out of existence N

420 11TH STREET

Any change in determining
qualities, costs or valuations

PHILIPSBURG

PA 16866

1a Gross receipts or sales	1A	13586	2 Cost of goods sold/operations	2	0
1b Returns and allowances	1B	0	3 Gross profit	3	13586
1c Balance	1C	13586	4 Other Income (submit statement)	4	0
			5 Total income	5	13586
6 Advertising	6	0	28 Supplies (not included on Schedule C-1)	28	155
7 Amortization	7	0	29 Taxes	29	0
8 Bad debts from sales or services	8	0	30 Telephone	30	0
9 Bank charges	9	29	31 Travel and entertainment	31	156
10 Car and truck expenses	10	5199	32 Utilities	32	0
11 Commissions	11	0	33 Wages	33	0
12 Cost depletion not % depletion	12	0			
			34 Other expenses (specify):		
13a Regular depreciation	13 A	0	A PAGER TELEPHONE	A	1954
13b Section 179 expense	13 B	0	B PARKINGTOLLS	B	16
14 Dues and publications	14	0	C	C	0
15 Other employee benefit programs	15	0	D	D	0
16 Freight (not on Schedule C-1)	16	0	E	E	0
17 Insurance	17	0	F	F	0
18 Interest on business indebtedness	18	870	G	G	0
			H	H	0
19 Laundry and cleaning	19	0	I	I	0
20 Legal and professional services	20	200	J	J	0
21 Management fees	21	0	K	K	0
22 Office supplies	22	7			
23 Pension and profit-sharing plans	23	0	34 Total other expenses	34	1970
24 Postage	24	70	35 Total expenses	35	12353
25 Rent on business property	25	0	36 Reduce expenses by total business credits	36	0
26 Repairs	26	0	37 Total adjusted expenses	37	12353
27 Subcontractor fees	27	3697	38 Net profit or loss	38	1233

PA120612L 02/08/10

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0903114718

PA-40 Schedule C - 2009

Social Security Number 178662711

Name of owner JENNIFER L KAISER

SCHEDULE C-1 - Cost of Goods Sold and/or Operations

1 Inventory at beginning of year (if different from last year's inventory, include explanation)	1	0
2a Purchases	2 A	0
2b Cost of items withdrawn for personal use	2 B	0
2c Balance (subtract Line 2b from Line 2a)	2 C	0
3 Cost of labor (do not include salary paid to yourself or subcontractor fees)	3	0
4 Materials and supplies	4	0
5 Other costs (include schedule)	5	0
6 Add Lines 1, 2c, 3, 4, and 5	6	0
7 Inventory at end of year	7	0
8 Cost of goods sold and/or operations (subtract Line 7 from Line 6). Enter here and on Part I, Line 2	8	0

SCHEDULE C-2 - Depreciation (See Instructions)

1 Total Section 179 depreciation (do not include in items below)	1	0
2 Less: Section 179 depreciation included in Schedule C-1	2	0
3 Balance (subtract Line 2 from Line 1). Enter here and on Part II, Line 13b	3	0

4 Other depreciation:

Description of property (a)	Date acquired (b)	Cost or other basis (c)	Depreciation allowed or allowable in prior years (d)	Method of computing depreciation (e)	Life or rate (f)	Depreciation for this year (g)
Buildings 4A		0	0			0
Furniture/fixtures 4B		0	0			0
Trans. equipment 4C		0	0			0
Machinery 4D		0	0			0
Other (specify)						
4E		0	0			0
4F		0	0			0
4G		0	0			0
4H		0	0			0
4I		0	0			0
4J		0	0			0
4K		0	0			0
4L		0	0			0
4M		0	0			0
4N		0	0			0
4O		0	0			0
4P		0	0			0
5 Totals		0			5	0
6 Depreciation included in Schedule C-1					6	0
7 Balance (subtract Line 6 from Line 5). Enter here and on Part II, Line 13a					7	0

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PA SCHEDULE E
Rents and Royalty
Income (Loss)
 PA-40 Schedule E (09-09) (i)

2009

OFFICIAL USE ONLY

If you have more than three properties, you may photocopy this schedule.

Name of the taxpayer filing this schedule

Social Security Number (shown first)

JENNIFER L. KAISER

178-66-2711

See the instructions. Report the income and expenses for the use of your personal property by others. Also, report the income you received for the extraction of oil, gas and other minerals from your property, and the use of your patents and copyrights. Note: If you are in the business of renting your property, extracting minerals from your property or producing products from your patents and copyrights — use PA Schedule C.

Part A. Property Description:

Show the address and kind of each rental real estate property, and/or each source of royalty income.

	Kind of property	For Profit Property	Address
A	STORAGE UNITS	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	179 CHURCH STREET, MORRISDALE, PA 16858
B		YES <input type="checkbox"/> NO <input type="checkbox"/>	
C		YES <input type="checkbox"/> NO <input type="checkbox"/>	

Part B. Identify the property from: Part A and indicate if the owner is the taxpayer (T = the name shown first on the PA-40) or the spouse (S) or if jointly owned (J)

Important: Spouses may not offset income and losses.

			Property A			Property B			Property C		
			T	S	J	T	S	J	T	S	J
Income											
1	Rent received	1	4,622								
2	Royalties received	2									
Expenses											
3	Advertising	3									
4	Automobile and travel	4									
5	Cleaning and maintenance	5									
6	Commissions	6									
7	Insurance	7	555								
8	Legal and professional fees	8									
9	Management fees	9									
10	Mortgage interest	10									
11	Other interest	11	1,530								
12	Repairs	12	165								
13	Supplies	13	3								
14	Taxes — not based on net income	14	1,423								
15	Utilities	15									
16	Depreciation expense	16	671								
Important: PA law does not permit any federal bonus depreciation. PA law limits the IRC Section 179 expensing to \$25,000. See the instructions.											
17	Other expenses (itemize):	17	167								

Income or Loss

19	Income — Subtract Line 18 from Line 1 or 2	19		108		
20	Loss — Subtract Line 1 or 2 from Line 18 (check box, if a net loss)	20				
21	Net Income or Loss					
	Total Lines 19 and 20 (check the box, if a net loss)		<input type="checkbox"/>	21	108	
22	Rent or royalty income (loss) from PA S corporation(s) and partnerships from your PA Schedule(s) RK-1 or NRK-1 (check the box, if a net loss)		<input type="checkbox"/>	22		
23	Net Rent and Royalty Income (Loss). Add Lines 21 and 22. If submitting more than one schedule, total all amounts, and include on Line 6 of your PA-40 (check the box, if a net loss)		<input type="checkbox"/>	23	108	

0901410027

PAI20801L 12/21/09

0901410027

2009

PENNSYLVANIA STATEMENTS

PAGE 1

CLIENT 80811

JENNIFER L. KAISER

178-66-2711

STATEMENT 1
FORM PA-40, LINE 4
BUSINESS INCOME

FROM SCHEDULE C

KAISER TRANSPORT

FROM SCHEDULE C TOTAL

1,233.

1,233.

TOTAL BUSINESS INCOME - LINE 4

\$ 1,233.

STATEMENT 2
FORM PA-40, LINE 6
RENT, ROYALTY, PATENT OR COPYRIGHT INCOME

NET INCOME OR (LOSS) FROM SCHEDULE E..... \$ 108.

TOTAL \$ 108.

STATEMENT 3
SCHEDULE E, LINE 17 - STORAGE UNITS
OTHER RENTAL AND ROYALTY EXPENSES

BANK FEES..... \$ 120.

POSTAGE..... 47.

TOTAL \$ 167.

2009

PENNSYLVANIA FILING INSTRUCTIONS

CLIENT 80811

JENNIFER L. KAISER

178-66-2711

FORM TO FILE:

PHILIPSBURG BORO - 2009 INDIVIDUAL EARNED INCOME TAX RETURN

SIGNATURE:

SIGN AND DATE THE FORM.

PAYMENT:

THERE IS A BALANCE DUE OF \$12. MAKE YOUR CHECK PAYABLE TO THE "HAB-EIT". WRITE YOUR SOCIAL SECURITY NUMBER ON THE CHECK. ATTACH THE CHECK TO YOUR RETURN AND ENCLOSE THE RETURN IN THE ENVELOPE.

WHEN TO FILE:

ON OR BEFORE APRIL 15, 2010.

WHERE TO FILE:

PHILIPSBURG BORO/PHILIPSBURG-OSCEOLA ASD
BERKHEIMER
P. O. BOX 905
BANGOR, PA 18013-0905

LOCAL INCOME TAX REPORT

LOCAL TAX
(See Instructions)
FINAL RETURN FOR EARNED INCOME TAX

2009

Name(s) as shown on PA-40

JENNIFER L. KAISER

Your Social Security Number

178-66-2711

Address

420 11TH STREET

Your Spouse's Social Security Number

City

State ZIP Code

PHILIPSBURG, PA 16866**TAXING AUTHORITY OF RESIDENCE**City, township or borough **PHILIPSBURG BORO**Local tax rate – Taxpayer..... **1.0000** %Number of months of residency..... **12**

Spouse..... %

School district number..... **17700**

Account number – Taxpayer.....

Spouse.....

LEGAL RESIDENCE FOR THIS TAX YEAR (if changed within the year)

Number of Months

Taxpayer

Spouse

	TAXPAYER		SPOUSE	
1 Earnings from wages, salaries, tips and bonuses.....	1	45,981.	1	
2 Less allowable employee business expenses.....	2		2	
3 SUB TOTAL (Line 1 less line 2) If less than zero, enter zero.....	3	45,981.	3	
4 Other taxable income Description.....	4		4	
5 Net profit from self-employment (Schedule C, F or K-1).....	5	1,233.	5	
6 Total earned income subject to this tax (Add lines 3, 4 and 5).....	6	47,214.	6	
7 TAX (Line 6 multiplied by listed local tax rate).....	7	472.	7	
8 Total local wage tax withheld by employer(s) (From W-2).....	8	460.	8	
9 Estimated March _____ June _____ payments..... September _____ December _____	9		9	
10 Credit for taxes paid to other jurisdictions.....	10		10	
11 Total Credits (Add lines 8, 9, and 10).....	11	460.	11	
12 TAX DUE (If line 7 is greater than line 11).....	12	12.	12	
13 REFUND (If line 11 is greater than line 7).....	13		13	
14 Overpayment applied to next year's tax.....	14		14	

I declare that this return, including accompanying schedules and statements, has been examined by me, and is to the best of my knowledge and belief a true, correct and complete return.

Your Signature

X

Date

Daytime Telephone Number

814-290-3938

Your Occupation

CORRECTIONS OFFICER

Spouse's Signature (If filing jointly)

Date

Daytime Telephone Number

Spouse's Occupation

Preparer/Company Name, other than taxpayer(s), based on all information of which preparer has any knowledge.

FRED C. LUCAS, JR., CPA
WALTER HOPKINS & COMPANY, LLP
P.O. BOX 684
PHILIPSBURG

25-1065143

Date

Preparer's Telephone Number

PA 16866-0684**2/01/10****814-342-2155**

Make Checks Payable to:

HAB-EIT

Mail to:

PHILIPSBURG BORO/PHILIPSBURG-OSCEOLA ASD
BERKHEIMER
P. O. BOX 905
BANGOR, PA 18013-0905

PA-40 Schedule C — 2009

(09-09) Profit or Loss From Business or Profession (Sole Proprietorship)

178662711 JENNIFER L KAISER

Method of Inventory: C=Cost, L=Lower
of cost or market, O=Other

SERVICESLIVERY TRANS OTHER TRANSIT GROUND

Accounting Method: A-Accrual, C=Cash, O=Other C

KAISER TRANSPORT

Home office
expenses deducted N

485990

Business out of existence N

420 11TH STREET

Any change in determining
qualities, costs or valuations

PHILIPSBURG

PA 16866

1a Gross receipts or sales	1A	13586	2 Cost of goods sold/operations	2	0
1b Returns and allowances	1B	0	3 Gross profit	3	13586
1c Balance	1C	13586	4 Other income (submit statement)	4	0
			5 Total income	5	13586
6 Advertising	6	0	28 Supplies (not included on Schedule C-1)	28	155
7 Amortization	7	0	29 Taxes	29	0
8 Bad debts from sales or services	8	0	30 Telephone	30	0
9 Bank charges	9	29	31 Travel and entertainment	31	156
10 Car and truck expenses	10	5199	32 Utilities	32	0
11 Commissions	11	0	33 Wages	33	0
12 Cost depletion not % depletion	12	0			
			34 Other expenses (specify):		
13a Regular depreciation	13 A	0	A PAGER TELEPHONE	A	1954
13b Section 179 expense	13 B	0	B PARKINGTOLLS	B	16
14 Dues and publications	14	0	C	C	0
15 Other employee benefit programs	15	0	D	D	0
16 Freight (not on Schedule C-1)	16	0	E	E	0
17 Insurance	17	0	F	F	0
18 Interest on business indebtedness	18	870	G	G	0
			H	H	0
19 Laundry and cleaning	19	0	I	I	0
20 Legal and professional services	20	200	J	J	0
21 Management fees	21	0	K	K	0
22 Office supplies	22	7			
23 Pension and profit-sharing plans	23	0	34 Total other expenses	34	1970
24 Postage	24	70	35 Total expenses	35	12353
25 Rent on business property	25	0	36 Reduce expenses by total business credits	36	0
26 Repairs	26	0	37 Total adjusted expenses	37	12353
27 Subcontractor fees	27	3697	38 Net profit or loss	38	1233

PA120612L 02/08/10

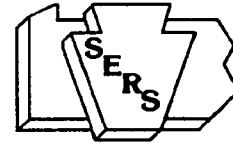
d Control number 00514260	1 Wages, tips, other compensation 41786.97	2 Federal income tax withheld 8332.00
OMB NO. 1545-0008	3 Social security wages 45981.26	4 Social security tax withheld 2850.84
	5 Medicare wages and tips 45981.26	6 Medicare tax withheld 666.73
c Employer's name, address and ZIP code Commonwealth of Pennsylvania Exec Off - Bur of Comm Pay Op Harrisburg PA 17105		
7 Social security tips	8 Allocated tips	9 Advance EIC payment
10 Dependent care benefits	11 Nonqualified plans	12a 12b 12c 12d
b Employer identification number (EIN) 23-2172299		a Employee's social security number 178-66-2711
13 Statutory employee	Retirement plan	14 Other
	Third-party sick pay	OPT-LST
	X	52.00
e Employee's name, address and ZIP code Jennifer L Kaiser 420 N. 11th St. Phillipsburg PA 16866		
2009	15 State Employer's state ID No. PA 13567078	16 State wages, tips, etc. 45981.26
W-2 Wage and Tax Statement Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return.	17 State income tax 1411.65	18 Local wages, tips, etc. 45981.26
	19 Local income tax 459.82	20 Locality name Phillipsburg Bo

Department of the Treasury—Internal Revenue Service



COMMONWEALTH OF PENNSYLVANIA
STATE EMPLOYEES' RETIREMENT SYSTEM
STATE COLLEGE REGIONAL COUNSELING CENTER

SUITE AA
2525 GREEN TECH DRIVE
STATE COLLEGE, PA 16803
TELEPHONE: (814) 863-6505
FAX: (814) 863-6530
TOLLFREE: 1-800-633-5461
www.sers.state.pa.us



October 14, 2008

JENNIFER L KAISER
408 N 11TH ST
PHILIPSBURG PA 16866

SSN# XXX-XX-2711

Dear Ms. KAISER:

The following information was used to calculate your retirement benefit estimate:

Proposed Date of Retirement: 12/25/2007

Total State Service : 10.7101
(all service periods)

Total School Service : 0.0000

Final Average Salary : \$33,734.55
SSI Credited Service :
Frozen Present Value : \$0.00
Frz Present Value Debt : \$0.00
Frozen Service Credits : 0.0000
Other Debts : \$21,113.84

Your Birth Date : 04/21/1972

Your Sex : F

Survivor's Birth Date :

Survivor's Sex :

Total Account Balance : \$11,602.61

Non-Taxable Contributions : \$0.00

Previously Taxed Contributions made after 12/31/86: \$14.90

Total Service Credits = 10.7101

(Breakdown listed Below)
(Total excludes SSI service - class S)

Service:	Class	Credits	Frozen Credits
	A	4.7500	0.0000
	AA	5.9601	0.0000

Special Comments :

The following pages will provide you with various estimate amounts and a brief description of each option. For a more detailed explanation of your retirement benefits and options, you should refer to your State Employees' Retirement System Member Handbook or talk with your retirement counselor.

Please remember that many factors affect the computation of a retirement benefit. Changes to your years of service, Final Average Salary, retirement date and debts applied to your account can change your benefit amount. This estimate is based on the information as it appears above. The actual computation of your retirement benefit will use the final information available after your employment with the Commonwealth has been terminated.



<p>MAXIMUM SINGLE LIFE ANNUITY</p> <p>This plan provides the maximum amount each month for life. If you die before receiving in payments an amount equal to your contributions as they were at the time of retirement, the balance will be paid to your beneficiary(ies). When a death benefit remains you may name one or more beneficiaries at any time.</p>	<p>WITHDRAWAL AMOUNT</p> <p>none</p> <p>\$0.00 (partial)</p> <p>\$11,602.61 (total)</p>	<p>MONTHLY BENEFIT</p> <p>\$166.51</p> <p>\$166.51</p> <p>\$119.53</p>
<p>OPTION 1 ANNUITY</p> <p>This plan provides a reduced retirement allowance. In addition to monthly payments for life, a value is placed on your retirement account called the PRESENT VALUE. All payments to you are subtracted from the Present Value. Any balance remaining at your death will be paid to your beneficiary(ies). You may name one or more beneficiaries and may change beneficiaries at any time.</p>	<p>WITHDRAWAL AMOUNT</p> <p>none</p> <p>\$0.00 (partial)</p> <p>\$11,602.61 (total)</p>	<p>MONTHLY BENEFIT</p> <p>\$164.85</p> <p>\$164.85</p> <p>\$118.34</p> <p>PRESENT VALUE TERM OF VALUE</p> <p>\$41,123.15 20.7882 yrs</p> <p>\$41,123.15 20.7882 yrs</p> <p>\$29,520.54 20.7879 yrs</p>
<p>OPTION 2 ANNUITY</p> <p>This plan provides a reduced retirement allowance for life. The amount of reduction is based on your age and the age and sex of the person named as your Designated Survivor Annuitant. Only one person may be named as your Designated Survivor Annuitant. At your death, that person will continue to receive for life the same monthly amount as was paid to you, in addition to any outstanding amounts payable to you.</p>	<p>WITHDRAWAL AMOUNT</p> <p>none</p> <p>\$0.00 (partial)</p> <p>\$11,602.61 (total)</p>	<p>MONTHLY BENEFIT</p> <p>\$0.00</p> <p>\$0.00</p> <p>\$0.00</p> <p>SURVIVOR BENEFIT</p> <p>\$0.00</p> <p>\$0.00</p> <p>\$0.00</p>
<p>OPTION 3 ANNUITY</p> <p>This plan provides a reduced retirement allowance for life. The amount of reduction is based on your age and the age and sex of the person named as your Designated Survivor Annuitant. Only one person may be named as your Designated Survivor Annuitant. At your death, that person will continue to receive for life one half of the same monthly amount as was paid to you, in addition to any outstanding amount payable to you.</p>	<p>WITHDRAWAL AMOUNT</p> <p>none</p> <p>\$0.00 (partial)</p> <p>\$11,602.61 (total)</p>	<p>MONTHLY BENEFIT</p> <p>\$0.00</p> <p>\$0.00</p> <p>\$0.00</p> <p>SURVIVOR BENEFIT</p> <p>\$0.00</p> <p>\$0.00</p> <p>\$0.00</p>



COMMONWEALTH OF PENNSYLVANIA DEFERRED COMPENSATION PROGRAM

JENNIFER L KAISER
179 CHURCH ST
MORRISDALE PA 16858

Statement Period: 10/01/2007 - 12/31/2007
Participant ID: 3814074
Plan: 98978-01

Account Summary

	<u>Total</u>
Balance as of September 30, 2007	\$2,284.06
Payroll Contributions	350.00
Change in Value	-42.27
Expenses	-1.07
Balance as of December 31, 2007	\$2,590.72

Investment Performance Information

Your Individual Rate of Return for this quarter is **-1.72%**

Personalized performance information is provided to participants as a general approximation of the overall recent performance of their account. It is calculated based on a formula which estimates the equivalent quarterly rate of return during the statement period, based on the opening balance, transaction activity and closing balance. Past performance is not a guarantee or prediction of future results.

Investment Selection for Future Contributions

All future contributions will be directed as follows:

100% Aggressive Portfolio Fund



Great-West
RETIREMENT SERVICES

"Securities, when offered, are offered through GWFS Equities, Inc., a wholly owned subsidiary of Great-West Life & Annuity Insurance Company."

Great-West Retirement Services
P.O. Box 173764, Denver, CO 80217-3764

COMMONWEALTH OF PENNSYLVANIA DEFERRED COMPENSATION PROGRAM

JENNIFER L KAISER
3814074

Account Summary by Investment Option

	<u>Beginning Balance</u>	<u>Deposits</u>	<u>Change in Value</u>	<u>Transfers</u>	<u>Withdrawals /Expenses</u>	<u>Ending Balance</u>	<u>Ending Units/ Shares</u>
Profile Series							
Aggressive Portfolio Fund	2,284.06	350.00	-42.27		-1.07	2,590.72	33.604
Totals	2,284.06	350.00	-42.27		-1.07	2,590.72	

Fund Information

<u>Investment Code</u>	<u>Investment Option</u>
281	Aggressive Portfolio Fund
280	Moderate Portfolio Fund
279	Conservative Portfolio Fund
1308	EAFE Equity Index Fund
3226	Extended Market Fund
4462	Stock Index Fund
337	60/40 Balanced Fund
6307	Aggregate Bond Index Fund
7325	Stable Value Fund
8064	Short Term Money Market Fund

Beneficiary Information

<u>Type</u>	<u>Name</u>	<u>Relationship</u>	<u>Percent</u>	<u>Address</u>
Primary	Scott J Kaiser	Spouse	100.00%	
Contingent	Mabel L Hansel	Mother	100.00%	

General Information

	<u>Total</u>
Year-To-Date Payroll Contributions:	1,300.00
2006 Year-End Balance:	1,201.61
Inception-To-Date Payroll Contributions:	2,350.00

Cornell Companies, Inc.
1700 West Loop South
Suite 1500
HOUSTON TX 77027-

PLAN RECORDKEEPING SERVICES
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Your Account Statement

Cornell Companies, Inc.
401(k) and Profit Sharing Plan

Scott Kaiser
179 Church Street
Morrisdale PA 16858-8325



Statement Period October 1, 2007 to December 31, 2007

Your Plan Sponsor Contact

Doris Weltzbarker
1700 West Loop South Suite 1500
HOUSTON, TX 77066

Your Plan Financial Advisor

Patricia Green
SWS Financial Services, Inc. 1-713-890-8866
patricia.green@guarantygroup.com

Important Message

• **Welcome to Your Participant Statement!** Welcome 2008! Have you begun setting your resolutions for 2008? One resolution you are sure to complete is to review your retirement goals. A small increase in your deferral today can add up to big savings at retirement. Review your investment performance and increase your deferral percentage today by visiting www.dailyaccess.com.

Personal Information

Dept./Division: Secure Division 0000
Participant ID: ***-**-3252
Date of Birth: 10/06/1969
Date of Hire: 01/30/2006

Your Current Account Value

\$7,162.80

Your Quarterly Rate of Return

1.0%

Rate of Return = Net Investment change for the period divided by $(50\% \times (\text{Beginning balance} + \text{Ending balance} - \text{Net Investment change}))$.

Activity Highlights

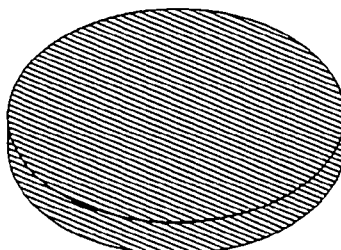
	This Period 10/01/2007-12/31/2007	Plan Year-to-Date 01/01/2007-12/31/2007
Beginning Balance	\$5,408.77	\$408.82
Additions		
+ Your Contributions	\$1,272.90	\$5,050.68
+ Employer Contributions	418.58	1,551.92
+ Dividends and Earnings	62.55	151.38
Total Additions	\$1,754.03	\$6,753.98

Total Account Value as of 12/31/2007	\$7,162.80
Total Vested Balance as of 12/31/2007	\$5,437.86

Allocation Summary

Fund Name	Fund Type	Number of Shares You Own as of 12/31/2007	Per Share Price as of 12/31/2007	Ending Balance as of 12/31/2007	Your Percent Assets by Fund as of 12/31/2007
AIM Cash Reserves Fund	MMkt	7,162.8000	\$1.00	\$7,162.80	100%
Total Investment				\$7,162.80	100%

Holdings of less than 1% are
not reflected in this chart.



100% Money Market

Contribution Summary

Source	Contributions This Period	Year-to-Date Contributions	Inception-to-Date Contributions
EE Pre-Tax	\$1,272.90	\$5,050.68	\$5,317.25
ER Match (Subject to Vest)	418.58	1,551.92	1,685.19
Totals	\$1,691.48	\$6,602.60	\$7,002.44

Vesting Summary

Percent Vested	Vested Value as of 12/31/2007
100%	\$5,437.86
0%	0.00
	\$5,437.86

Investment Activity Summary

Fund	Beginning Balance 10/01/2007	Contributions and Other Credits (+)	Withdrawals and Other Debits (-)	Dividends and Earnings (+)	Investment Gains (Losses) (+/-)	Ending Balance 12/31/2007
AIM Cash Reserves Fund	\$5,408.77	\$1,691.48	\$0.00	\$62.55	\$0.00	\$7,162.80
Totals	\$5,408.77	\$1,691.48	\$0.00	\$62.55	\$0.00	\$7,162.80

FILED

MAR 29 2010

William A. Shaw
Prothonotary/Clerk of Courts

William A. Shaw
Prothonotary/Clerk of Courts

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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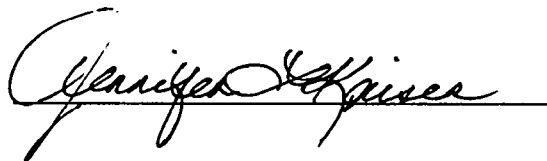
No. 2008-542-CD

INVENTORY AND APPRAISEMENT OF JENNIFER L. KAISER, PLAINTIFF

Jennifer L. Kaiser, Plaintiff files the following inventory and appraisal of all property owned or possessed by either party at the time this action was commenced and all property transferred within the preceding three years.

Jennifer L. Kaiser verifies that the statements made in this inventory and appraisal are true and correct.

Jennifer L. Kaiser understands that false statements herein are made subject to the penalties of 18 Pa.C.C. 4904 relating to unsworn falsification to authorities.

A handwritten signature in cursive script, reading "Jennifer L. Kaiser", written over a horizontal line.

ASSETS OF PARTIES

Jennifer L. Kaiser, Plaintiff marks on the list below those items applicable to the case at bar and itemizes the assets on the following pages. If an item has been appraised, a copy of the appraisal report is attached.

- | | |
|---------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| <u>X</u> | 1. Real property |
| <u>X</u> | 2. Motor vehicles |
| <u> </u> | 3. Stocks, bonds, securities and options |
| <u> </u> | 4. Certificates of deposit |
| <u> </u> | 5. Checking accounts, cash |
| <u> </u> | 6. Savings accounts, money market and savings certificates |
| <u> </u> | 7. Contents of safe deposit boxes |
| <u> </u> | 8. Trusts |
| <u> </u> | 9. Life insurance policies (indicate face value, cash surrender value and current beneficiaries |
| <u> </u> | 10. Annuities |
| <u> </u> | 11. Gifts |
| <u> </u> | 12. Inheritances |
| <u> </u> | 13. Patents, copyrights, inventions, royalties |
| <u> </u> | 14. Personal property outside the home |
| <u> </u> | 15. Businesses (list all owners, including percentage of ownership, and officer/director positions held by a party with company) |
| <u> </u> | 16. Employment termination benefits, severance pay, workers' compensation claim/award |
| <u>X</u> | 17. Profit sharing plans |
| <u>X</u> | 18. Pension plans (indicate employee contributions and date plan vests |
| <u>X</u> | 19. Retirement plans, individual retirement accounts |
| <u> </u> | 20. Disability payments |
| <u> </u> | 21. Litigation claims (matured/unmatured) |
| <u> </u> | 22. Military/VA benefits |
| <u> </u> | 23. Education benefits |
| <u>X</u> | 24. Debts due, including loans, mortgages held |
| <u>X</u> | 25. Household furnishings and personalty (include as a total category and attach itemized list if distribution of such assets is in dispute) |
| <u> </u> | 26. Other |

LIABILITIES OF PARTIES

Jennifer L. Kaiser, Plaintiff marks on the list below those items applicable to the case at bar and itemizes the liabilities on the following pages.

Secured:

- | | |
|-------|------------------------------|
| X | 1. Mortgages |
| _____ | 2. Judgments |
| _____ | 3. Liens |
| _____ | 4. Other secured liabilities |

Unsecured:

- | | |
|-------|--------------------------------|
| X | 5. Credit card balances |
| _____ | 6. Purchases |
| X | 7. Loan payments |
| _____ | 8. Notes payable |
| X | 9. Other unsecured liabilities |

Contingent or Deferred:

- | | |
|-------|----------------------------------------------|
| _____ | 10. Contracts or agreements |
| _____ | 11. Promissory Notes |
| _____ | 12. Lawsuits |
| _____ | 13. Options |
| _____ | 14. Taxes |
| _____ | 15. Other contingent or deferred liabilities |

PROPERTY - MARITAL

Jennifer L. Kaiser, Plaintiff lists all marital property in which either or both spouses have a legal or equitable interest individually or with any other person as of the date this action was commenced.

Husband - H

Wife - W
Joint - J

<u>Item Number</u>	<u>Description of Property</u>	<u>Name of All Owners</u>	<u>Value</u>
1.	Garage and Lot Morris Township, PA	J	\$25,000.00
2.	Storage Building 1.0675 acres Morris Township, PA	J	\$40,000.00
3.	House Trailer and .1383 acres Morris Township, PA	J	\$10,000.00
4.	2000 Dodge Caravan	J	\$ 463.00
5.	1967 Mercury Cougar	J	\$ 200.00
6.	2001 Oldsmobile Silhouette	W	\$ 800.00
7.	1993 Ford Tempo	J	\$ 50.00
8.	1983 Chevy Truck	H	\$ 1,000.00
9.	1999 Pace Box Trailer	H	\$ 4,000.00
10.	Stryker Cot	W	\$ 2,000.00
11.	Household Goods and Appliances	J	\$ 5,000.00
12.	Checking Account CBT	J	\$ 938.74
13.	Checking Account PSECU	W	\$ 243.89
14.	PSECU Savings Account	W	\$ 1,398.49
15.	CBT Savings Account	H	?
16.	Kaiser Storz It	J	\$ 0

17.	Kaiser Transport	W	\$ 0
18.	Commonwealth of PA Deferred Compensation	W	\$ 2,590.72

NON-MARITAL PROPERTY

Jennifer L. Kaiser, Plaintiff lists all property in which he has a legal or equitable interest which is claimed to be excluded from marital property:

<u>Item Number</u>	<u>Description of Property</u>	<u>Reason for Exclusion</u>
1.	2001 Honda 400EX	Purchased before marriage
2.	Northwest Savings Account	Had prior to marriage
3.	SERS Retirement Account	Marital component date of marriage till 12/25/2007

PROPERTY TRANSFERRED

LIABILITIES

<u>Description</u>	<u>Amount</u>
1. Chase Mastercard Account No. 10190190200000130064815 (NOW PSECU)	\$ 14,348.57
2. Bank of America Account No. 4888930228390388 (NOW PSECU)	\$ 8,452.88
3. PSECU	\$ 14,888.33
4. Clearfield Bank and Trust	
A. Consolidation Loan	\$ 8,787.08
B. Storage Business Loan	\$ 16,439.48
C. Garage Loan	\$ 13,792.65
D. Dodge Caravan Loan	\$ 3,194.72
E. 4-Wheeler Repairs Loan	\$ 4,984.89

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

No. 2008-542-CD

Type of Pleading:

**PLAINTIFF'S INCOME AND
EXPENSE STATEMENT**

Filed on behalf of:
Plaintiff

Counsel of Record for
this party:

James A. Naddeo, Esq.
Pa I.D. 06820

&

Trudy G. Lumadue, Esq.
Pa I.D. 202049

NADDEO & LEWIS, LLC.
207 E. Market Street
P.O. Box 552
Clearfield, PA 16830
(814) 765-1601

FILED ICC AM
0/12/05
MAR 29 2010
William A. Shattuck
Prothonotary/Clerk of Courts

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

JENNIFER L. KAISER,	*	
Plaintiff,	*	
	*	
v.	*	No. 2008-542-CD
	*	
SCOTT J. KAISER,	*	
Defendant.	*	

PLAINTIFF'S INCOME & EXPENSE STATEMENT

INCOME:

Name of Employer 1: Department of Corrections

Quehanna Boot Camp

Address: Karthaus, PA 16845

Type of Work: Corrections

Payroll Number: 511260

Term of Pay Period: Bi-Weekly

Gross Pay Per Pay Period: Month Approximately \$3,801.98

(Hourly \$23.30)

ITEMIZED PAYROLL DEDUCTIONS

Federal Withholding:	\$638.50
Social Security:	\$231.10
Local Wage:	\$ 37.28
State Income Tax:	\$114.43
Retirement:	\$237.63
Medicare Tax:	\$ 54.05
Local Wage Tax:	\$ 4.00
TXEE Unemployment Tax:	\$ 3.04
Health Insurance:	\$ 74.56
Other (Union Dues):	\$ 55.92
Deferred Compensation:	\$100.00
Net Pay Per Pay Period:	<u>\$1,595.51</u>

Name of Employer 2:

Address: _____
 Type of Work: _____
 Payroll Number: _____
 Term of Pay Period: _____
Gross Pay Per Pay Period: _____
ITEMIZED PAYROLL DEDUCTIONS
 Federal Withholding: _____
 Social Security: _____
 Local Wage: _____
 State Income Tax: _____
 Retirement: _____
 Savings Bond: _____
 Credit Union: _____
 Life Insurance: _____
 Health Insurance: _____
 Other (specify): _____
Net Pay Per Pay Period: \$ _____

TOTAL NET PAY FROM EMPLOYERS: \$1,595.51

OTHER INCOME:	<u>WEEKLY</u>	<u>MONTHLY</u>	<u>YEARLY</u>
Interest	_____	_____	_____
Dividends	_____	_____	_____
Pensions	_____	_____	_____
Social Security	_____	_____	_____
Rents	_____	_____	_____
Royalties	_____	_____	_____
Expense Account	_____	_____	_____
Gifts	_____	_____	_____
Unemployment Comp	_____	_____	_____
Workmen's Comp	_____	_____	_____
Other	_____	_____	_____

TOTAL INCOME

EXPENSES:

	<u>WEEKLY</u>	<u>MONTHLY</u>	<u>YEARLY</u>
Home:			
Mortgage/rent	<hr/>	\$500.00 <hr/>	<hr/>
Maintenance	<hr/>	<hr/>	<hr/>
Utilities:			
Electric	<hr/>	\$ 70.00 <hr/>	<hr/>
Gas	<hr/>	<hr/>	<hr/>
Oil (Heating)	<hr/>	\$109.00 <hr/>	<hr/>
Telephone, Cable, Internet		\$179.10 <hr/>	<hr/>
Water/Sewage	<hr/>	\$ 40.00 <hr/>	<hr/>
Employment:			
Public Transportation	<hr/>	<hr/>	<hr/>
Lunch	<hr/>	<hr/>	<hr/>
Taxes:			
Real Estate	<hr/>	<hr/>	<hr/>
Personal Property	<hr/>	<hr/>	<hr/>
Per Capita	<hr/>	<hr/>	<hr/>
Insurance:			
Homeowners	<hr/>	<hr/>	<hr/>
Automobile	<hr/>	\$ 35.91 <hr/>	<hr/>
Health	<hr/>	<hr/>	<hr/>
Life	<hr/>	<hr/>	<hr/>
Accident	<hr/>	<hr/>	<hr/>
Other (fire)	<hr/>	<hr/>	<hr/>
Automobile:			
Payments	<hr/>	<hr/>	<hr/>
Fuel	<hr/>	<hr/>	<hr/>
Repairs	<hr/>	<hr/>	<hr/>

Medical:

Doctor	_____	_____	_____
Dentist	_____	_____	_____
Orthodontist	_____	_____	_____
Hospital	_____	_____	_____
Medicine	_____	_____	_____
Special needs	_____	_____	_____
(glasses/contacts	_____	_____	_____
orthopedic/etc.)	_____	_____	_____

Education:

Private School	_____	_____	_____
Parochial School	_____	_____	_____
College	_____	_____	_____
Religious	_____	_____	_____

Personal:

Clothing	_____	_____	_____
Food	_____	_____	_____
Barber/Hairdresser	_____	_____	_____

Credit Payments:

			Balance
Credit Card(PSECU)	_____	\$308.00	<u>\$14,888.33</u>
Charge Account	_____	_____	_____
Memberships	_____	_____	_____

Loans: ALL CBT

			Balances
Consolidation	_____	\$356.97	<u>\$ 8,787.08</u>
Business (storage)	_____	\$235.89	<u>\$16,439.48</u>
Garage	_____	\$181.11	<u>\$13,792.65</u>

Miscellaneous:

Household help	_____	_____	_____
Child Care	<u>\$3.45/hr.</u>	_____	_____
Papers/books/ magazines	_____	_____	_____
Cable	_____	_____	_____

Vacation	_____	_____	_____
Gifts	_____	_____	_____
Legal fees	_____	_____	_____
Charitable	_____	_____	_____
Other			
Cell Phone	_____	<u>\$142.70</u>	_____
Garbage	_____	<u>\$ 27.00</u>	_____
ValueCity Furniture	_____	<u>\$100.00</u>	_____
Northwest Consumer Discount	_____	<u>\$161.40</u>	_____

TOTAL EXPENSES \$2,420.08 per month

PROPERTY OWNED:

<u>DESCRIPTION</u>	<u>VALUE</u>	<u>OWNERSHIP</u>		
		<u>H</u>	<u>W</u>	<u>J</u>
Checking Accounts				
<u>PSECU</u>	<u>\$ 247.44</u>	<u>—</u>	<u>X</u>	<u>—</u>
<u>CBT(Storage Business</u>	<u>\$ 290.43</u>	<u>—</u>	<u>—</u>	<u>X</u>
<u>CNB</u>	<u>\$ 667.20</u>	<u>—</u>	<u>X</u>	<u>—</u>
Savings Accounts				
<u>PSECU</u>	<u>\$5,672.89</u>	<u>—</u>	<u>X</u>	<u>—</u>
_____	_____	<u>—</u>	<u>—</u>	<u>—</u>
_____	_____	<u>—</u>	<u>—</u>	<u>—</u>
Credit Union				
_____	_____	<u>—</u>	<u>—</u>	<u>—</u>
_____	_____	<u>—</u>	<u>—</u>	<u>—</u>
Stocks/Bonds				
_____	_____	<u>—</u>	<u>—</u>	<u>—</u>
_____	_____	<u>—</u>	<u>—</u>	<u>—</u>
Real Estate				
_____	_____	<u>—</u>	<u>—</u>	<u>—</u>
_____	_____	<u>—</u>	<u>—</u>	<u>—</u>
Other				

_____	_____	==	—	—
_____	_____	==	—	—

TOTAL \$6,877.96

INSURANCE:

	<u>COVERAGE</u>	<u>POLICY #</u>	<u>COVERAGE</u>		
			H	W	C
Hospital	_____	_____	==	—	—
Select Blue	_____	_____	==	—	—
Other Med	_____	_____	==	—	—
	_____	_____	==	—	—
	_____	_____	==	—	—
	_____	_____	==	—	—
Other	_____	_____	==	—	—

Legend

H - Husband
W - Wife
J - Joint
C - Child

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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:
:

No. 08-542-CD

CERTIFICATE OF SERVICE

Filed on behalf of

Defendant

Counsel of Record for
this Party:

Kimberly M. Kubista
Attorney-At-Law
Pa. I.D. 52782

BELIN, KUBISTA & RYAN LLP
15 N. Front Street
P.O. Box 1
Clearfield, PA 16830
(814) 765-8972

FILED NO
07/10/09 CC
MAR 30 2010

William A. Shaw
Prothonotary/Clerk of Courts

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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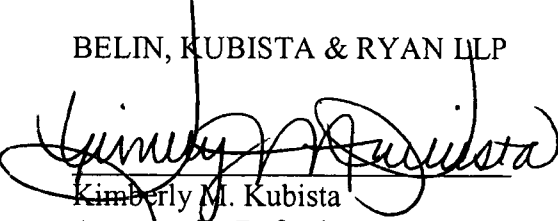
No. 08-542-CD

CERTIFICATE OF SERVICE

This is to certify that I have served a certified copy of Defendant's Inventory and Appraisement, Pre-Hearing Memorandum and Income and Expense Statement by first-class, postage prepaid mail on the 29th day of March, 2010 to the following:

James A. Naddeo, Esquire
P.O. Box 552
Clearfield, PA 16830

BELIN, KUBISTA & RYAN LLP


Kimberly M. Kubista
Attorney for Defendant

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

JENNIFER L. KAISER

No. 08-542-CD

V.

SCOTT J. KAISER

FILED

APR 27 2010

0/11-50/15

William A. Shaw

Prothonotary/Clerk of Courts

CONF TO K. KAISER

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NADOC

ORDER

NOW, this 26th day of April, 2010, following Pre-Trial Conference, it is the

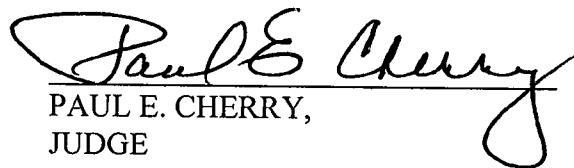
ORDER of this Court as follows:

1. That Master's Hearing before Donald T. Gibboney, Esquire, shall be held in the Clearfield County Courthouse, Clearfield, Pennsylvania on the 4th day of June, 2010, beginning at 9:00 o'clock A.M.
2. That Plaintiff and Defendant shall provide any and all outstanding Discovery within no more than thirty (30) days from this date.
3. That Plaintiff and Defendant shall provide all supplemental pre-trial documents within no more than fifteen (15) days prior to the hearing date.
4. All appraisals shall be completed by May 26, 2010. The Parties shall make available any asset which the other party desires to have appraised.
5. In order to defray the costs of the Master's hearing, each party shall have no more than twenty-five (25) days from this date in which to deposit the amount of Three Hundred (\$300.00) Dollars with the Prothonotary of Clearfield County. This amount shall be non-refundable.

6. It shall be the responsibility of the Plaintiff to obtain the services of an independent Court Reporter to be present for the Master's Hearing for the purpose of producing the appropriate record. Following the hearing any party which desires a transcript of the hearing shall be responsible for the costs of the same. No less than ten (10) days prior to the Master's Hearing, counsel for the Plaintiff shall, by letter, confirm to the Master, Donald T. Gibboney (230 East Market Street, Clearfield, Pennsylvania 16830) that the Plaintiff has obtained an independent Court Reporter for the Master's hearing. The Master in divorce shall be at liberty to assign costs related to the Court Reporter to either or both parties in such manner as the Master deems to be appropriate when issuing the Master's Report.

7. In the event that either or both parties should fail to comply with any of the provisions as set forth above, the Court will schedule a contempt hearing in order that the appropriate sanction(s) may be imposed.

BY THE COURT,


PAUL E. CHERRY,
JUDGE

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

:
:
:
:
:
:
:

No. 08-542-CD

SUPPLEMENTAL PREHEARING
MEMORANDUM

Filed on behalf of

Defendant

Counsel of Record for
this Party:

Kimberly M. Kubista
Attorney-At-Law
Pa. I.D. 52782

BELIN, KUBISTA & RYAN LLP
15 N. Front Street
Clearfield, PA 16830
(814) 765-8972

FILED

9/3/04
MAY 12 2010

3cc
Amy Kubista

William A. Shaw
Prothonotary/Clerk of Courts

(ell)

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

:
:
:
:
:
:
:

No. 08-542-CD

SUPPLEMENTAL PRE-HEARING MEMORANDUM

I. List of Assets (marital and non-marital).

See inventory and appraisalment.

II. Experts/Witnesses

1. All experts/witnesses set forth on Defendant's Pre-Hearing Memorandum filed on March 29, 2010.

2. Chad Kaiser as to non-marital property.

Defendant reserves the right to call such other experts as may be deemed necessary at the time of the Master's hearing.

III. Exhibits.

1. All exhibits set forth on Defendant's Pre-Hearing Memorandum filed on March 29, 2010.

2. Kelley Blue Book statement as to value of 1989 Ford Tempo which had been transferred during the course of separation.

Defendant reserves the right to use such other exhibits as are deemed necessary to support valuations set forth in the Inventory.

IV. Gross Income.

See income and expense statement.

V. Expenses.

See income and expense statement.

VI. Value of pension or retirement benefits.

See inventory.

VII. Counsel fees.

None.

VIII. Disputes.

Disputes will center around equitable distribution, alimony, counsel fees, costs and expenses.

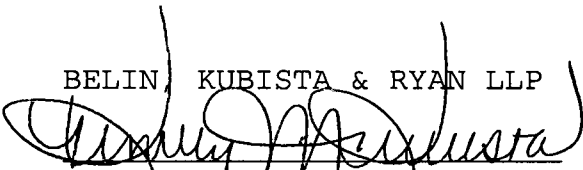
IX. Marital debts.

See inventory and appraisalment.

X. Proposed resolution.

50/50 split of all marital property with no award of alimony, counsel fees, costs or expenses.

BELIN, KUBISTA & RYAN LLP



Kimberly M. Kubista
Attorney for Defendant



Kelley Blue Book
THE TRUSTED RESOURCE

Home New Cars Certified Pre-Owned Used Cars Research Reviews & News Dealers & Inventory Cars For Sale Loans & Insurance

Search Used Cars for Sale | Free Dealer Price Quotes | Find a Dealer
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1989 Ford Tempo GL - \$990

Dealer: Wallys Auto Sales

Call: 888-747-9631 Live Chat:

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☐ Save Ad | View Saved (0)

Vehicle
Description

Kelley Blue
Book Values

Photos

Map &
Directions

Finance & Loan
Calculator



Seller photo - click to enlarge

About This Tempo

Mileage: 151,480

Body Style: Sedan

Exterior Color: Tan

Interior Color: tan

Stock #: 16883

VIN: 1FAPP36X4KK216883

Transmission: auto

Drivetrain: FWD

Doors: 4

[Get a CARFAX Record Check](#)

Features: Air Conditioning, Cruise Control, Power Locks, Rear Window Defroster, Tilt Wheel

Seller's Notes: Runs and drives excellent. Very clean & must see. Come test drive this vehicle today. This vehicle is priced to sell so what are you waiting for. Tell us you saw it on cars.com and we will include a 90 day warranty at no cost when you purchase this vehicle.

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Have a question about this car?

Email the Dealer

Wallys Auto Sales
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Enter Your Message Here:

First Name:

Last Name:

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☒ Day ☐ Evening

City:

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Do you have a
trade-in?

☐ Yes ☒ No

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* Required

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About the Dealer

Wallys Auto Sales
888-747-9631

Live Chat:
5360 N Broadway St Wichita KS (Map)

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Print this ad and bring it to the dealer.

Partner Marketplace

Financing

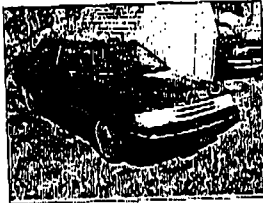
Good or average credit? Get low interest, zero down auto finance options. No credit, poor credit or bad credit. [Vehicle finance for any credit situation.](#)

More Categories: [Car Insurance](#) | [Credit](#) | [Finance](#) | [Motor Oil](#)



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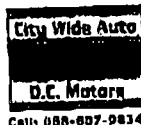
Search used Cars for Sale | From Dealer Price Quote | Find a Dealer



View all photos (10 total)

About the Dealer

D.C. Motors/ City Wide Auto Credit
800-887-9034
2251 Woodville Rd. Oregon OH



Printed on May 4, 2010

1989 Ford Tempo GL - \$1,400

Dealers: D.C. Motors/ City Wide Auto Credit
Call: 800-887-9034

Mileage: 119,090

Body Style: Sedan

Exterior Color: Red

Interior Color: Red

Stock #: CWR4725

VIN: 1FAPPJ6X5K241040

Engine: 2.3L I4

Transmission: AUTO

Drivetrain: FWD

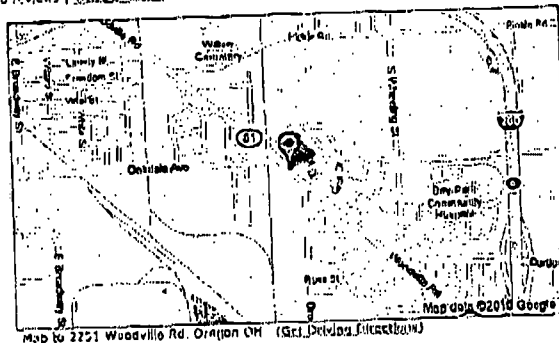
Doors: 4

Wheelbase: 100"

Get a CALL FAX Record Check

Features: Power Locks, Tilt Wheel, AM/FM, Cassette, Air Conditioning, Rear Defroster, Passenger Airbag, Driver Airbag, Power Steering

Seller's Notes: 1989 Ford Tempo GL Visit us @ www.citywideautocredit.net to See More Pictures and get additional information. You can Apply for Financing on our website get directions and much more! Please call us @ 1-819-698-5259 or 1-888-887-9034 with all questions or to schedule a Test Drive Today We offer Top Quality Vehicles at Wholesale Prices with a FREE Warranty! Ask About our 100% GUARANTEED CREDIT APPROVAL!
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Map to 2251 Woodville Rd. Oregon OH (Get Driving Directions)

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Date: 5/20/2010

Clearfield County Court of Common Pleas

NO. 1934864

Time: 02:55 PM

Receipt

Page 1 of 1

Received of: Kaiser, Jennifer L. (plaintiff) \$ 300.00

Three Hundred and 00/100 Dollars

Case: 2008-00542-CD	Plaintiff: Jennifer L. Kaiser vs. Scott J	Amount
Divorce Master Fee		300.00
Total:		300.00

FILED ⁽¹²⁾

MAY 20 2010

William A. Shaw
Prothonotary/Clerk of Courts

Next hearing: 06/04/2010 09:00 AM, Hearing on Outstanding Economic Issues
Check: 570

Payment Method: Check

Amount Tendered: 300.00

Change Returned: 0.00

Clerk: BILLSHAW

William A. Shaw, Prothonotary/Clerk of Cou

By: _____
Deputy Clerk

FILED
03/28/04
MAY 20 2010
William A. Shaw
Notary/Clerk of Courts
cc
Any
Naddeo
(6)

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

JENNIFER L. KAISER,	*	
Plaintiff,	*	
	*	
v.	*	No. 2008-542-CD
	*	
SCOTT J. KAISER,	*	
Defendant.	*	

SUPPLEMENTAL PRE-HEARING MEMORANDUM

I. List of Assets (marital and non-marital).

See inventory and appraisement.

II. Experts/Witnesses.

1. All experts/witnesses set forth on Plaintiff's Pre-Hearing Memorandum filed on March 29, 2010

2. Thomas P. Walsh, Real Estate Appraiser. Copies of appraisals to be supplied.

3. Mabel L. Hansel as to non marital property.

4. Ron Geyer as to the condition of 1989 Ford Tempo.

Plaintiff reserves the right to call such other experts as may be deemed necessary at the time of the Master's hearing.

III. Exhibits.

1. All exhibits set forth on Plaintiff's Pre-Hearing Memorandum filed on March 29, 2010.

1. Kelley Blue Book Statement as to the value of all vehicles identified as marital property.

Plaintiff reserves the right to use such other exhibits as are deemed necessary to support valuations set forth in the Inventory.

IV. Gross Income.

See income and expense statement.

V. Expenses.

See income and expense statement.

VI. Value of pension or retirement benefits.

See inventory.

VII. Counsel Fees.

N/A

VIII. Disputes.

Disputes will center around equitable distribution, alimony.

IX. Marital debts.

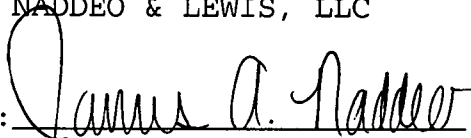
See inventory and appraisement.

X. Proposed resolution.

Equal distribution of the marital assets and debts.

NADDEO & LEWIS, LLC

BY:


James A. Naddeo, Esquire
Attorney for Plaintiff

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008-542-CD

CERTIFICATE OF SERVICE

I, James A. Naddeo, Esquire, do hereby certify that a certified copy of Supplemental Pre-Trial Memorandum filed in the above-captioned action was served on the following person and in the following manner on the 20th day of May, 2010:

First-Class Mail, Postage Prepaid

Kimberly M. Kubista, Esquire
Belin, Kubista & Ryan
15 North Front Street
PO Box 1
Clearfield, PA 16830

NADDEO & LEWIS, LLC

By: James A. Naddeo
James A. Naddeo, Esquire
Attorney for Plaintiff

CA

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

JENNIFER L. KAISER

NO. 08-542-CD

V.

SCOTT J. KAISER

FILED

MAY 27 2010

0/9:15/c (GO)
William A. Shaw

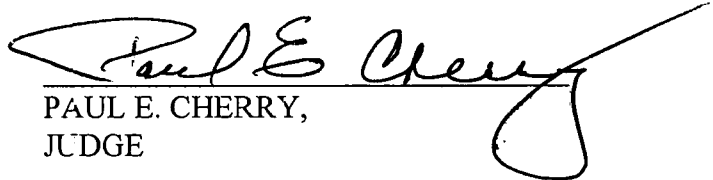
Prothonotary/Clerk of Courts

sent to Nance
Kaiser

ORDER

AND NOW, this 26th day of May, 2010, it is the ORDER of this Court that
Master's Hearing scheduled for June 4, 2010, shall be and is hereby CONTINUED until
further Order of Court.

BY THE COURT,


PAUL E. CHERRY,
JUDGE

FILED

MAY 27 2000

William A. Shaw
Prothonotary/Clerk of Court

DATE

☒ The undersigned is responsible for serving all appropriate parties.

☒ The undersigned's office has provided service to the following parties:

☒ Plaintiff(s)

☒ Defendant(s)

☒ Plaintiff(s) Attorney

☒ Defendant(s) Attorney

☐ Other

Special Instructions:

9

v.

No. 2008-542-CD

SCOTT J. KAISER,
Defendant.

Type of Pleading:

**MOTION TO SET
MASTER'S HEARING**

Filed on behalf of:
Plaintiff

Counsel of Record for
this party:

James A. Naddeo, Esq.
Pa I.D. 06820

&

Trudy G. Lumadue, Esq.
Pa I.D. 202049

NADDEO & LEWIS, LLC.
207 E. Market Street
P.O. Box 552
Clearfield, PA 16830
(814) 765-1601

FILED CS
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William A. Shaw
Prothonotary/Clerk of Courts

60

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008-542-CD

MOTION TO SET MASTER'S HEARING

Jennifer L. Kaiser, Plaintiff, in the above-captioned case, moves the court to set a Master's Hearing.

1. That a Master's Hearing was scheduled in the above-captioned case to be held on June 4, 2010.

2. That upon joint request of counsel for the respective parties said hearing was continued by Order of Court dated May 26, 2010.

3. That the continuance was requested for a variety of reasons including what counsel believed was the likelihood of a negotiated settlement.

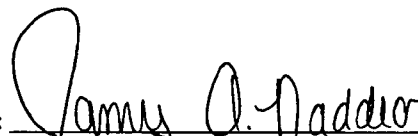
4. That the parties have been unable to negotiate a settlement.

5. That all discovery has been completed.

WHEREFORE, Plaintiff by her counsel moves the Court to set a date of a Master's Hearing.

NADDEO & LEWIS, LLC

BY:



James A. Naddeo, Esquire
Attorney for Plaintiff

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008-542-CD

CERTIFICATE OF SERVICE

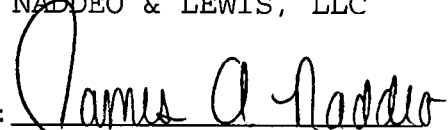
I, James A. Naddeo, Esquire, do hereby certify that a true and correct copy of Motion to Set a Master's Hearing filed in the above-captioned action was served on the following person and in the following manner on the 6th day of October, 2010:

First-Class Mail, Postage Prepaid

Kimberly M. Kubista, Esquire
Belin, Kubista & Ryan
15 North Front Street
PO Box 1
Clearfield, PA 16830

NADDEO & LEWIS, LLC

By:



James A. Naddeo, Esquire
Attorney for Plaintiff

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

JENNIFER L. KAISER

NO. 2008-542-CD

V.

SCOTT J. KAISER

ORDER

NOW, this 7th day of October, 2010, the Court being in receipt of the Praecept to the Court for Appointment of Master filed on behalf of the Plaintiff, it is the ORDER of this Court as follows:

1. That Donald T. Gibboney, Esquire, be and is hereby appointed as Master to preside at the hearing on all outstanding economic issues.
2. Pre-Trial Conference among counsel and the Court shall be held in the Clearfield County Courthouse Annex, Judge Cherry's Chambers, Clearfield, Pennsylvania on the 2nd day of November, 2010, at 10:30 o'clock A.M.
3. Plaintiff and Defendant shall file his or her Inventory and Appraisal, Budget Information and Pre-Trial Statement as required under Local Rule of Court 1920.2 within no more than twenty (20) days from this date.

BY THE COURT,

FILED

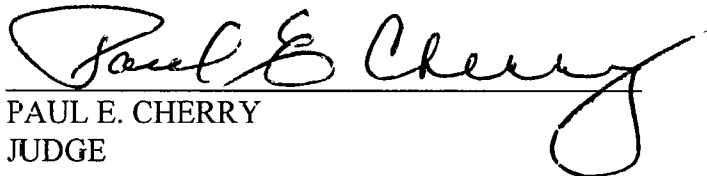
OCT 11 2010

William A. Shaw
Prothonotary/Clerk of Courts

100
Atty's:
Naddeo
K. Kubista

100 S. Gibboney
(without memo)

EW


PAUL E. CHERRY
JUDGE

FILED

OCT 11 2010

William A. Shaw
Prothonotary/Clerk of Courts

DATE: 10/11/10

☐ You are responsible for serving all appropriate parties.

☒ The Prothonotary's office has provided service to the following parties:

☐ Plaintiff(s) ☒ Plaintiff(s) Attorney ☐ Other

☐ Defendant(s) ☒ Defendant(s) Attorney

☐ Special Instructions:

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

JENNIFER L. KAISER

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No. 08-542-CD

V.

SCOTT J. KAISER

FILED

01/24/2011
NOV 03 2010

William A. Shaw
Prothonotary/Clerk of Courts

OCC. Atty's:
K. Habista
Naddep

ICC & Gibboney
(without memo)

ORDER

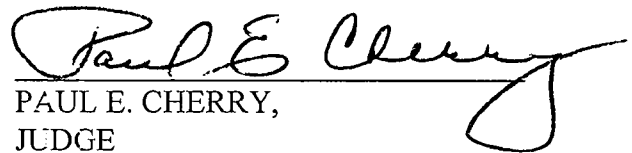
NOW, this 2nd day of November, 2010, following Pre-Trial Conference, it is
the ORDER of this Court as follows:

1. That Master's Hearing before Donald T. Gibboney, Esquire, shall be held in the Clearfield County Courthouse, Clearfield, Pennsylvania on the 18th day of March, 2011, beginning at 9:00 o'clock A.M.
2. That Plaintiff and Defendant shall provide any and all outstanding Discovery within no more than thirty (30) days from this date.
3. That Plaintiff and Defendant shall provide all supplemental pre-trial documents within no more than fifteen (15) days prior to the hearing date.
4. All appraisals shall be completed within no more than thirty (30) days prior to the hearing date. The Parties shall make available any asset which the other party desires to have appraised.
5. It shall be the responsibility of the Plaintiff to obtain the services of an independent Court Reporter to be present for the Master's Hearing for the purpose of producing the appropriate record. Following the hearing any party which desires a transcript of the hearing shall be responsible for the costs of the same. No less than ten

(10) days prior to the Master's Hearing, counsel for the Plaintiff shall, by letter, confirm to the Master, Donald T. Gibboney (230 East Market Street, Clearfield, Pennsylvania 16830) that the Plaintiff has obtained an independent Court Reporter for the Master's hearing. The Master in divorce shall be at liberty to assign costs related to the Court Reporter to either or both parties in such manner as the Master deems to be appropriate when issuing the Master's Report.

6. In the event that either or both parties should fail to comply with any of the provisions as set forth above, the Court will schedule a contempt hearing in order that the appropriate sanction(s) may be imposed.

BY THE COURT,


PAUL E. CHERRY,
JUDGE

FILED

NOV 03 2010

William A. Shew
Prothonotary/Clerk of Courts

DATE: 11/3/10

☐ You are responsible for serving all appropriate parties.
☒ The Prothonotary's office has provided service to the following parties:
☐ Plaintiff(s) ☒ Plaintiff(s) Attorney ☐ Other
☐ Defendant(s) ☒ Defendant(s) Attorney
☐ Special Instructions:

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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No. 08-542-CD

MOTION FOR TELEPHONE
TESTIMONY

File on behalf of

Defendant/Movant

Counsel of Record for
this Party:

Kimberly M. Kubista
Attorney-At-Law
Pa. I.D. 52782

KUBISTA & RYAN LLP
202 S. Front Street
P.O. Box 1
Clearfield, PA 16830
(814) 765-8972

FILED
9/10:45am
MAR - 2 2011

2cc Atty
Kubista
(Will)

William A. Shaw
Prothonotary/Clerk of Courts

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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No. 08-542-CD

MOTION FOR TELEPHONE TESTIMONY

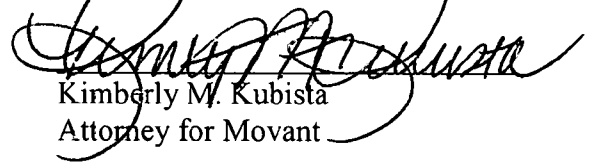
AND NOW, comes the Movant, SCOTT J. KAISER, by and through his attorney, Kimberly M. Kubista, and sets forth the following Motion for Telephone Testimony and in support thereof would aver as follows:

1. That a Master's hearing is scheduled for March 18, 2011 at 9:00 a.m.
2. That the Movant plans to call Kimberly Garrison from Pension Appraisers, Inc. to testify as to the value of Respondent's retirement.
3. That due to distance between Ms. Garrison's employment in Allentown and Clearfield County, it would present a hardship for her to travel to Clearfield to testify in Court.
4. That pursuant to Rule 1930.3 of the Pennsylvania Rules of Civil Procedure, telephone testimony is permissible in domestic relation cases upon good cause shown.

WHEREFORE, Movant requests Your Honorable Court to enter an Order

directing that the testimony of Kimberly Garrison be received via telephone at the time of the proceeding in this matter.

KUBISTA & RYAN LLP



Kimberly M. Kubista
Attorney for Movant

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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No. 08-542-CD

MOTION TO LEAVE RECORD OPEN

File on behalf of

Movant

Counsel of Record for
this Party:

Kimberly M. Kubista
Attorney-At-Law
Pa. I.D. 52782

KUBISTA & RYAN LLP
202 S. Front Street
P.O. Box 1
Clearfield, PA 16830
(814) 765-8972

FILED 3cc AHK
9/10:44am Kubista
MAR -2 2011 (60)

William A. Shaw
Prothonotary/Clerk of Courts

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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No. 08-542-CD

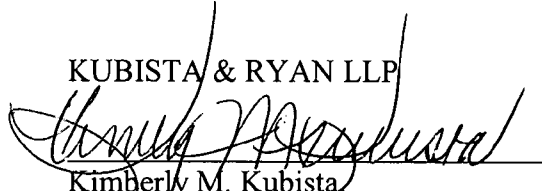
MOTION TO LEAVE RECORD OPEN

NOW COMES the Defendant, SCOTT J. KAISER, by and through his attorneys, Kubista & Ryan LLP, and sets forth the following Motion to Leave Record Open and in support thereof would aver as follows:

1. That a Master's hearing is scheduled for March 18, 2011.
2. That pursuant to Order of Court, the parties are to file all supplemental documentation no later than March 3, 2011.
3. That Movant's counsel forwarded a release and request for information to CompServices, Inc. on November 29, 2010 and to date, the same has not been received.
4. That it is imperative that Movant have the requested information from CompServices, Inc. in order to properly move forward with this matter.

WHEREFORE, Movant requests Your Honorable Court to enter an Order allowing the record to remain open pending receipt of the requested information as set forth above.

KUBISTA & RYAN LLP


Kimberly M. Kubista,
Attorney for Movant

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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No. 08-542-CD

SECOND SUPPLEMENTAL PRE-
HEARING MEMORANDUM

Filed on behalf of

Defendant

Counsel of Record for
this Party:

Kimberly M. Kubista
Attorney-At-Law
Pa. I.D. 52782

KUBISTA & RYAN LLP
202 South Front Street
Clearfield, PA 16830
(814) 765-8972

5
FILED 3cc AH
0/10:42am Kubista
MAR - 2 2011

William A. Shaw
Prothonotary/Clerk of Courts

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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No. 08-542-CD

SECOND SUPPLEMENTAL PRE-HEARING MEMORANDUM

I. List of Assets (marital and non-marital).

See inventory and appraisalment.

II. Experts/Witnesses

1. All experts/witnesses set forth on Defendant's Pre-Hearing Memorandum.

2. Kimberly Garrison from Pension Appraisers, Inc. as to marital value of Wife's retirement.

Defendant reserves the right to call such other experts as may be deemed necessary at the time of the Master's hearing.

III. Exhibits.

1. All documentation set forth on Defendant's Pre-Hearing Memorandum and Supplemental Pre-Hearing Memorandum.

2. Pension valuation as to value of Wife's PSERS retirement.

3. Documentation pertaining to the worker's compensation award received by Plaintiff.

Defendant reserves the right to use such other exhibits as are deemed necessary to support valuations set forth in the Inventory.

IV. Gross Income.

See income and expense statement.

V. Expenses.

See income and expense statement.

VI. Value of pension or retirement benefits.

See inventory.

VII. Counsel fees.

None.

VIII. Disputes.

Disputes will center around equitable distribution, alimony, counsel fees, costs and expenses.

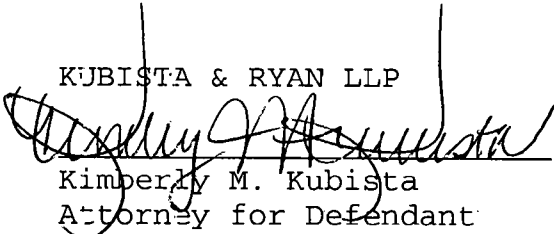
IX. Marital debts.

See inventory and appraisement.

X. Proposed resolution.

50/50 split of all marital property with no award of alimony, counsel fees, costs or expenses.

KUBISTA & RYAN LLP



Kimberly M. Kubista
Attorney for Defendant

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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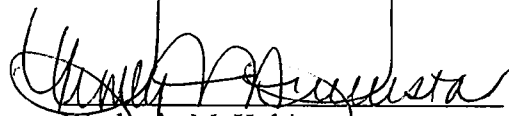
No. 08-542-CD

CERTIFICATE OF SERVICE

This is to certify that I have served a true and correct copy of Motion to Leave
Record Open by first-class, postage prepaid mail on the 2 day of March, 2011 to the
following:

James A. Naddeo, Esquire
P.O. Box 552
Clearfield, PA 16830

KUBISTA & RYAN LLP


Kimberly M. Kubista
Attorney for Defendant



PENSION APPRAISERS INC.[®]

P.O. Box 4396 • Allentown PA 18105-4396
1-800-447-0044 • Fax 610-770-9342

E-MAIL: penapp@pensionappraisers.com
WWW: <http://www.pensionappraisers.com>

July 29, 2010

Kimberly M Kubista, Esq.
15 N. Front Street, PO Box 1
Clearfield, Pennsylvania 16830

**RE: Present Value of a Defined Benefit Plan for Jennifer L. Kaiser
File No. 975978-10P-JUL10**

Dear Attorney Kubista:

We have determined the present value of the marital share of the defined pension benefit for Jennifer L. Kaiser by the GATT Method as of July 29, 2010 to be \$28,495.77. This valuation was developed and prepared in conformity with the requirements of the Actuarial Standards of Practice No. 34. These Standards were developed by the Pension Committee of the Actuarial Standards Board of the American Academy of Actuaries. The purpose is to set standards for Members and Other Persons Interested in Actuarial Practice Concerning Retirement Plan Benefits in Domestic Relations Actions. Pension Appraisers, Inc. relies on the requestor to provide the information necessary to value pensions. In some cases information not provided by the requestor may be obtained from plan summaries on file in Pension Appraisers, Inc.'s offices. All information received from the requestor is reviewed for practicability and reasonableness. Any information in question is verified with the requestor, when possible. Any deficiencies in data may materially affect the results of the appraisal. Pension Appraisers, Inc. utilizes the fractional rule allocation method in valuing all pensions for equitable distribution purposes unless otherwise stated.

BIRTH DATE: April 21, 1972

SEX: Female

MARRIAGE DATE: April 20, 2002

VALUATION DATE: July 29, 2010

PLAN NAME: PA State Employees Retirement System

DATE EMPLOYMENT STARTED: January 20, 2010 assumed
(Assumed date pensionholder began participating in the plan)

DATE BENEFITS STOPPED ACCRUING: July 28, 2010
(Assumed date pensionholder ended participation in the plan)

ASSUMED DATE MARRIAGE ENDED: December 25, 2007

AGE WHEN BENEFITS COMMENCE: 60 Years

GATT Actuarial and Mortality Tables Method

July 29, 2010

Jennifer L. Kaiser – File No. 97597E-10P-JLL10

Page 2

MORTALITY TABLES: 1994 Group Annuity Mortality Tables for Healthy Females with Projection Scale AA applied for year 2010.

INTEREST RATE ASSUMPTIONS: 3.89 %

30-Year U.S. Treasury Bond Constant Maturity Rate for the Month of the Date of Valuation. However, if the Valuation Date falls in any month after the date of the report, the current month's rate is the one used.

U.S. Treasury Bond Rate:	3.89%
Estimated Cost of Living Adjustment	<u>1.00%</u>
Adjusted Rate:	2.89%

(First Cola Adjustment is made One Year after Retirement and is Compounding)

ASSUMED MONTHLY BENEFIT: \$ 1,113.83

Monthly pension benefit the pensionholder would receive at retirement age with a fully vested pension based upon compensation and plan provisions as of July 28, 2010.

REDUCTION FOR NON-VESTING: 1.0000

Represents a reduction for the probability of service to 100 percent vesting as equal to the portion already completed.

REDUCTION FOR MARITAL COVERTURE FRACTION: 0.3400

Represents that portion of the value of the benefits attributable to the marriage. The numerator of the fraction represents the total benefit the pensionholder earned in the plan during the marriage and the denominator is the total benefit the pensionholder earned in the benefits program.

$$\frac{\$378.67}{\$1113.83} = 0.3400$$

PRESENT VALUE BEFORE REDUCTIONS:	\$102,636.92
Reduction for Non-Vesting:	1.0000
Reduction for Marital Coverture:	<u>0.3400</u>
PRESENT VALUE AFTER REDUCTIONS	\$ 34,896.55
POST-SEPARATION CONTRIBUTIONS AND INTEREST:	<u>\$ 6,400.78</u>
*VALUATION FOR EQUITABLE DISTRIBUTION:	\$ 28,495.77

* This valuation was completed in close compliance with our understanding of Act 175.

"Valuators of Defined Pension Benefits for Equitable Distribution"

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

No. 08-542-CD

5 FILED 3cc Abby
0/ 10:42am Kubista
MAR -2 2011

William A. Shaw
Prothonotary/Clerk of Courts

AMENDED INVENTORY AND
APPRAISEMENT

Filed on behalf of

Defendant

Counsel of Record for
this Party:

Kimberly M. Kubista
Attorney-at-Law
Pa. I.D. 52782

BELIN KUBISTA & RYAN LLP
15 North Front Street
P.O. Box 1
Clearfield, PA 16830

(814) 765-8972

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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:
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:
:
:
:

No. 08-542-CD

AMENDED INVENTORY AND APPRAISEMENT
OF DEFENDANT

Defendant files the following inventory and appraisal of all property owned or possessed by either party at the time this action was commenced and all property transferred within the preceding three years.

Defendant verifies that the statements made in this inventory and appraisal are true and correct. Defendant understands that false statements herein are made subject to penalties of 18 Pa.C.S. Section 4904 relating to unsworn falsification to authorities.



Scott J. Kaiser

ASSETS OF PARTIES

Defendant marks on the list below those items applicable to the case at bar and itemizes the assets on the following pages.

- (x) 1. Real Property
- (x) 2. Motor Vehicles
- () 3. Stocks, bonds, securities and options
- () 4. Certificates of deposit
- (x) 5. Checking accounts, cash
- (x) 6. Savings accounts, money market
and savings certificates
- () 7. Contents of safe deposit boxes
- () 8. Trusts
- () 9. Life insurance policies
- () 10. Annuities
- (x) 11. Gifts
- () 12. Inheritances
- (x) 13. Patents, copyrights, inventions, royalties
- (x) 14. Personal property outside the home
- (x) 15. Businesses
- (x) 16. Employment termination benefits--severance
pay, workmen's compensation claim/award
- () 17. Profit sharing plans

- (x)18. Pension plans
- (x)19. Retirement plans, Individual Retirement Accounts
- ()20. Disability payments
- ()21. Litigation claims
- (x)22. Military/V. A. benefits
- ()23. Education benefits
- (x)24. Debts due, including loans, mortgages held
- (x)25. Household furnishings and personalty
- ()26. Other

PROPERTY - MARITAL

Defendant lists all marital property in which either or both spouses have a legal or equitable interest individually or with any other person as of the date this action was commenced.

Husband - H

Wife - W

Joint - J

<u>Item Number</u>	<u>Description of Property</u>	<u>Names of Owners</u>	<u>Value as of Separation</u>
1.	Trailer/Land	J	\$6,000.00
2.	Garage/Land	J	\$15,000.00
3.	2000 Dodge Caravan	J	\$2,600.00
4.	2001 Oldsmobile Van	J	\$5,360.00
5.	1983 Chevrolet Pick-Up Truck w/plow	J	\$400.00
6.	1967 Mercury Cougar	J	\$2,000.00
7.	Kaiser Storz-It Account/CB&T #11007400	Kaiser Storz-It	\$789.62
8.	Kaiser Transport Account/CNB #2437754	W/Kaiser Transport	\$440.96
9.	CB&T Checking Account #12475769	J	\$938.74
10.	Proceeds from 1989 Ford Tempo	J	\$990.00
11.	Worker's Compensation Money	W	\$20,000+

12.	Kaiser Storz-It Building and Land	J	\$40,000.00
13.	Kaiser Transport Business	J	
	- Stryker Cot		\$3,000.00
	- PSA Air Pack		\$ 100.00
14.	Cornell Companies 401(k) and Profit Sharing Plan	H	\$12,256.07
15.	PSERS Retirement	W	\$28,495.77
16.	Tennis Bracelet	W	\$3,000.00
17.	Engagement Ring And wedding bands	J	\$12,000.00
18.	Diamond Necklace And Diamond Earrings	W	\$3,500.00
19.	Household Goods (See attached list)		
20.	17 Caliber Rifle	H	\$200.00
21.	PSERS Savings	W	\$1,398.49
22.	PSERS Checking	W	\$243.89

NON-MARITAL PROPERTY

Defendant lists all property in which he has a legal or equitable interest which is claimed to be excluded from marital property:

<u>Item Number</u>	<u>Description of Property</u>	<u>Reason for Exclusion</u>
1.	Remaining contents of residence	H's premarital
2.	Tools, equipment, power tools	H's premarital
3.	Box racing trailer w/pressure Washer	Belongs to Chad
4.	2000 400EX 4-wheeler	Belongs to Chad
5.	Quincey (dog) and kennel	H's premarital
6.	Racing equip., tools and supplies	Belongs to Chad
7.	Washer	H's premarital
8.	Queen size bed frame	H's premarital
9.	Stove	H's premarital
10.	Hunting clothes	H's premarital
11.	Honda Pressure Washer	Belongs to Chad
12.	2001 Honda 400EX 4-wheeler	Belongs to Chad

PROPERTY TRANSFERRED

<u>Item Number</u>	<u>Description of Property</u>	<u>Date of Transfer</u>	<u>Person to Whom Transferred</u>
1.	1989 Ford Tempo (Wife sold)	Unknown	Unknown
2.	Worker's Compensation Settlement	?	W's mother

LIABILITIES

<u>Item Number</u>	<u>Description of Property</u>	<u>Creditor</u>	<u>Debtor</u>	<u>Amount</u>
1.	Garage/land Trailer/land	CB&T	J	\$15,395.93
2.	2001 Oldsmobile Van	Citizens Bank	J	\$5,556.37
3.	2000 Dodge Van	CB&T	J	\$1,660.85
4.	Consolid. Loan	CB&T	J	\$12,786.09
5.	Storage Units	CB&T	J	\$18,395.99
6.	Credit Card	Chase	W	\$21,177.30
7.	Repairs (4-wheeler)	CB&T	J	\$3,785.66*
8.	Credit Card	Bank of Amer.	W	\$22,943.19

*Husband has paid this off since separation.

<u>Items:</u>	<u>Value:</u>	<u>Owner:</u>
Vacuum Cleaner	\$20.00	H
Hunting clothes	?	W
I-Pod	\$60.00	W
Folding Chairs	?	W
55' Television	\$500.00	H
Mattress/Box springs	\$50.00	H
Microwave	\$10.00	H
Refrigaretor	\$75.00	H
Rocker/glider	\$10.00	W
Rocking chair	\$10.00	W
Rocker/glider - outdoor swing	\$5.00	W

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

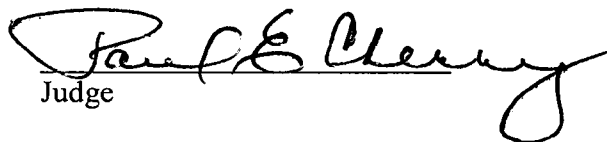
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No. 08-542-CD

ORDER

AND NOW, this 3rd day of March, 2011, upon consideration of Movant's Motion and for good cause having been shown, it is hereby **ORDERED** that the testimony of Kimberly Garrison shall be permitted via telephone in the above captioned matter for the proceeding scheduled on March 13, 2011 and any adjournments thereon.

BY THE COURT,


Judge

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ARCH
Att'y K. Kubista
Produced Pursuant to Court Order

1107 07 2019

William A. Shary
Prothonotary, Clerk of Courts

DATE: 3/7/11

X _____
_____ provided service to the following parties:

_____ Plaintiff's Attorney
_____ Defendant's Attorney
_____ Other

CH

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

JENNIFER L. KAISER,
Plaintiff

vs.

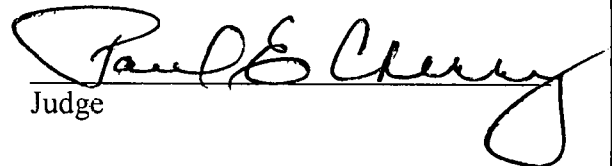
SCOTT J. KAISER,
Defendant

No. 08-542-CD

ORDER

NOW THIS 3rd day of March, 2011, upon consideration of Motion to Leave Record Open, it is hereby ORDERED and DECREED that said Motion is granted and the record shall remain open pending receipt by the Master of the documentation from CompServices, Inc. pertaining to the worker's compensation award received by Jennifer L. Kaiser.

BY THE COURT


Judge

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MAR 07 2011
William A. Shaw
Prothonotary/Clerk of Courts
30C
Atty
K. Kubista

FILED

MAR 07 2011

William A. Shaw
Prothonotary/Clerk of Courts

DATE: 3/7/11

☒ You are responsible for serving all appropriate parties.

☐ The Prothonotary's office has provided service to the following parties:

Plaintiff(s) _____ Plaintiff(s) Attorney _____ Out of

County _____ Defendant(s) Attorney _____

Special Instructions:

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008-542-CD

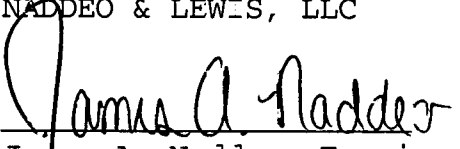
CERTIFICATE OF SERVICE

I, James A. Naddeo, Esquire, do hereby certify that a certified copy of Plaintiff's Supplemental Pre-Hearing Memorandum and Amended Inventory and Appraisement of Jennifer L. Kaiser, Plaintiff filed in the above-captioned action was served on the following person and in the following manner on the 15th day of March, 2011:

First-Class Mail, Postage Prepaid

Kimberly M. Kubista, Esquire
Kubista & Ryan
202 South Front Street
Clearfield, PA 16830

NADDEO & LEWIS, LLC

By: 
James A. Naddeo, Esquire
Attorney for Plaintiff

013255n1cc
Atty

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008-542-CD

SUPPLEMENTAL PRE-HEARING MEMORANDUM

I. List of Assets (marital and non-marital).

See inventory and appraisement.

II. Experts/Witnesses.

1. All experts/witnesses set forth on Plaintiff's Pre-Hearing Memorandum filed on March 29, 2010 and Supplemental Pre-Hearing Memorandum filed on May 20, 2010.

2. Ronald Zalno, Jeweler. Copy of Jewelry Appraisal attached.

Plaintiff reserves the right to call such other experts as may be deemed necessary at the time of the Master's hearing.

III. Exhibits.

1. All exhibits set forth on Plaintiff's Pre-Hearing Memorandum filed on March 29, 2010 and Supplemental Pre-Hearing Memorandum filed on May 20, 2010.

Plaintiff reserves the right to use such other exhibits as are deemed necessary to support valuations set forth in the Inventory.

IV. Gross Income.

See income and expense statement.

V. Expenses.

See income and expense statement.

VI. Value of pension or retirement benefits.

See inventory.

VII. Counsel Fees.

N/A

VIII. Disputes.

Disputes will center around equitable distribution, alimony.

IX. Marital debts.

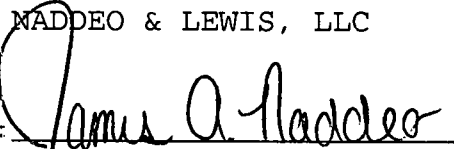
See inventory and appraisement.

X. Proposed resolution.

Equal distribution of the marital assets and debts.

NADDEO & LEWIS, LLC

BY:


James A. Naddeo, Esquire
Attorney for Plaintiff

DIAMONDS
WATCHES
JEWELRY

Appraisal

Zalno Jewelers

Clearfield, Pa

ESTATES
APPRAISED
—
REPAIRS

Date March 12, 2011

To whom it may concern:

This is to Certify THAT WE ARE ENGAGED IN THE JEWELRY BUSINESS: Appraising Diamonds, Watches, Jewelry and Precious Stones of all descriptions and have been so engaged in said business for many years. We herewith certify that we have this day carefully examined the following listed and described articles the property of—

M Jennifer Kaiser

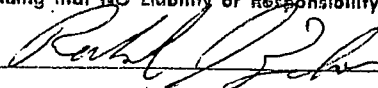
Address 420 N. 11th St. Philipsburg, PA 16866

We Estimate the value as listed for insurance or other purpose at the present current market value. The opinions of Appraisers concerning value vary up to 25%. This company does not promise to buy the article from you at the Appraised value or at any fraction of the Appraised value.

ARTICLE	DESCRIPTION	APPRIASED VALUE
Ring	Ladies 14k white/yellow gold ring. Containing major marquise cut diamond & 8 princess cut side diamonds. Major: Cut ----- Marquise Color ----- G Clarity --- SI2 Carat ----- 1.25 Approximate ** Diamond is graded in mounting all grades are approximate Ring value	\$ 8000.00
Ring	Ladies 14k white/yellow gold wedding band to match above diamond ring. Ring contains 6 princess cut diamonds with approximate .36 ct tw Ring value	\$ 1600.00
Earrings	14k white gold diamond earrings, princess cut with I1 clarity. Approximate diamond weight of .85ct Earrings value	\$ 1300.00
Bracelet	Ladies 14k yellow gold diamond bracelet containing 40 round cut diamonds with a I1 clarity approximat 4 ct tw value	\$ 4000.00

The foregoing Appraisal is made and accepted upon the express understanding that NO Liability or Responsibility is incurred by the Appraiser in giving same.

Signed



DIAMONDS
WATCHES
JEWELRY

Appraisal

Zalno Jewelers

Clearfield, Pa

ESTATES
APPRAISED
—
REPAIRS

Date March 12, 2011

To whom it may concern:

This is to Certify THAT WE ARE ENGAGED IN THE JEWELRY BUSINESS: Appraising Diamonds, Watches, Jewelry and Precious Stones of all descriptions and have been so engaged in said business for many years. We herewith certify that we have this day carefully examined the following listed and described articles the property of—
M Jennifer Kaiser

Address 420 N. 11th St. Philipsburg, PA 16866

We Estimate the value as listed for insurance or other purpose at the present current market value. The opinions of Appraisers concerning value vary up to 25%. This company does not promise to buy the article from you at the Appraised value or at any fraction of the Appraised value.

ARTICLE	DESCRIPTION	APPRIASED VALUE
Necklace	Ladies 14k yellow gold heart shape diamond necklace. Containing 52 round shape diamonds with a total of approximate 1/2 ct. Necklace value \$ 500.00	

The foregoing Appraisal is made and accepted upon the express understanding that NO Liability or Responsibility is incurred by the Appraiser in giving same.

Signed 

013258d1cc
10/13/2011
Atty

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

JENNIFER L. KAISER,
Plaintiff,

v.

SCOTT J. KAISER,
Defendant.

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No. 2008-542-CD

AMENDED INVENTORY AND APPRAISEMENT OF JENNIFER L. KAISER,
PLAINTIFF

Jennifer L. Kaiser, Plaintiff files the following amended inventory and appraisal of all property owned or possessed by either party at the time this action was commenced and all property transferred within the preceding three years.

Jennifer L. Kaiser verifies that the statements made in this amended inventory and appraisal are true and correct.

Jennifer L. Kaiser understands that false statements herein are made subject to the penalties of 18 Pa.C.C. 4904 relating to unsworn falsification to authorities.

_____

ASSETS OF PARTIES

Jennifer L. Kaiser, Plaintiff marks on the list below those items applicable to the case at bar and itemizes the assets on the following pages. If an item has been appraised, a copy of the appraisal report is attached.

- | | |
|---------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| <u>X</u> | 1. Real property |
| <u>X</u> | 2. Motor vehicles |
| <u> </u> | 3. Stocks, bonds, securities and options |
| <u> </u> | 4. Certificates of deposit |
| <u> </u> | 5. Checking accounts, cash |
| <u> </u> | 6. Savings accounts, money market and savings certificates |
| <u> </u> | 7. Contents of safe deposit boxes |
| <u> </u> | 8. Trusts |
| <u> </u> | 9. Life insurance policies (indicate face value, cash surrender value and current beneficiaries) |
| <u> </u> | 10. Annuities |
| <u> </u> | 11. Gifts |
| <u> </u> | 12. Inheritances |
| <u> </u> | 13. Patents, copyrights, inventions, royalties |
| <u> </u> | 14. Personal property outside the home |
| <u> </u> | 15. Businesses (list all owners, including percentage of ownership, and officer/director positions held by a party with company) |
| <u> </u> | 16. Employment termination benefits, severance pay, workers' compensation claim/award |
| <u>X</u> | 17. Profit sharing plans |
| <u>X</u> | 18. Pension plans (indicate employee contributions and date plan vests) |
| <u>X</u> | 19. Retirement plans, individual retirement accounts |
| <u> </u> | 20. Disability payments |
| <u> </u> | 21. Litigation claims (matured/unmatured) |
| <u> </u> | 22. Military/VA benefits |
| <u> </u> | 23. Education benefits |
| <u>X</u> | 24. Debts due, including loans, mortgages held |
| <u>X</u> | 25. Household furnishings and personalty (include as a total category and attach itemized list if distribution of such assets is in dispute) |
| <u> </u> | 26. Other |

LIABILITIES OF PARTIES

Jennifer L. Kaiser, Plaintiff marks on the list below those items applicable to the case at bar and itemizes the liabilities on the following pages.

Secured:

- X ☐ 1. Mortgages
- ☐ 2. Judgments
- ☐ 3. Liens
- ☐ 4. Other secured liabilities

Unsecured:

- X ☐ 5. Credit card balances
- ☐ 6. Purchases
- X ☐ 7. Loan payments
- ☐ 8. Notes payable
- X ☐ 9. Other unsecured liabilities

Contingent or Deferred:

- ☐ 10. Contracts or agreements
- ☐ 11. Promissory Notes
- ☐ 12. Lawsuits
- ☐ 13. Options
- ☐ 14. Taxes
- ☐ 15. Other contingent or deferred liabilities

PROPERTY - MARITAL

Jennifer L. Kaiser, Plaintiff lists all marital property in which either or both spouses have a legal or equitable interest individually or with any other person as of the date this action was commenced.

Husband - H

Wife - W
Joint - J

<u>Item Number</u>	<u>Description of Property</u>	<u>Name of All Owners</u>	<u>Value</u>
1.	Garage and Lot Morris Township, PA	J	\$15,000.00
2.	Storage Building 1.0675 acres Morris Township, PA	J	\$40,000.00
3.	House Trailer and .1383 acres Morris Township, PA	J	\$ 6,000.00
4.	2000 Dodge Caravan	J	\$ 3,922.94
5.	1967 Mercury Cougar	J	\$ 200.00
6.	2001 Oldsmobile Silhouette	W	\$ 1,525.00
7.	1989 Ford Tempo	J	\$ 50.00
8.	1983 Chevy Truck	H	\$ 1,000.00
9.	1999 Pace Box Trailer	H	\$ 4,000.00
10.	Stryker Cot	W	\$ 2,000.00
11.	Air Pack	W	\$ 100.00
12.	Household Goods and Appliances	J	\$ 5,000.00
13.	Checking Account CBT	J	\$ 938.74
14.	Checking Account PSECU	W	\$ 243.89
15.	PSECU Savings Account	W	\$ 1,398.49
16.	CBT Savings Account	H	?

17.	Kaiser Storz It	J	\$ 0
18.	Kaiser Transport	W	\$ 0
19.	Commonwealth of PA Deferred Compensation	W	\$ 2,590.72
20.	Workers Compensation Settlement	W	\$32,000.00
21.	Tennis Bracelet	W	\$ 4,000.00
22.	Engagement Ring	W	\$ 8,000.00
23.	Wife's Wedding Band	W	\$ 1,600.00
24.	Husband's Wedding Band	H	\$ 800.00
25.	Diamond Necklace	W	\$ 500.00
26.	Diamond Earrings	W	\$ 1,300.00
27.	17 Caliber Rifle	H	\$ 200.00
28.	Cornell Companies 401(k) and Profit Sharing Plan	H	\$12,256.07
29.	PSEERS Retirement	W	\$28,495.77

NON-MARITAL PROPERTY

Jennifer L. Kaiser, Plaintiff lists all property in which he has a legal or equitable interest which is claimed to be excluded from marital property:

<u>Item Number</u>	<u>Description of Property</u>	<u>Reason for Exclusion</u>
1.	2001 Honda 400EX	Purchased before marriage
2.	Northwest Savings Account	Had prior to marriage
3.	SERS Retirement Account	Marital component date of marriage till 12/25/2007

PROPERTY TRANSFERRED

LIABILITIES

<u>Description</u>	<u>Amount</u>
1. Chase Mastercard Account No. 10190190200000130054315 (NOW PSECU)	\$ 14,348.57
2. Bank of America Account No. 4888930228390388 (NOW PSECU)	\$ 8,452.88
3. PSECU	\$ 14,888.33
4. Clearfield Bank and Trust	
A. Consolidation Loan	\$ 8,787.08
B. Storage Business Loan	\$ 16,439.48
C. Garage Loan	\$ 13,792.65
D. Dodge Caravan Loan	\$ 3,194.72
E. 4-Wheeler Repairs Loan	\$ 4,984.89

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

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

No. 08-542-CD

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STIPULATION

NOW THIS 18th day of March, 2011, the day scheduled for the Master's hearing in the above referenced case, the parties having reached an agreement to settle their economic claims and hereby stipulate as follows:

ASSETS:

1. **Wife** shall receive the following assets and Husband hereby waives any right, title or interest to the following:

Proceeds from 2000 Dodge Caravan
2001 Oldsmobile Van
Clearfield Bank & Trust account no. 5769
PSECU savings account
PSECU checking account
Proceeds from 1989 Ford Tempo
SERS retirement
Commonwealth of Pennsylvania Deferred Compensation Plan
Kaiser Transport business, including proceeds in bank accounts as well as any and all assets necessary for the operation of Kaiser Transport as of the date of this Stipulation.
Stryker Cot
PSA Air pack
2001 Honda 400EX 4-wheeler
Jewelry

2. **Husband** shall receive the following assets and Wife hereby waives any right, title or interest to the following:

Trailer and land located at 179 Church Street, Morrisdale, Pennsylvania
Garage and land located at Church Street, Morrisdale, Pennsylvania
Kaiser Storz-It Building and land located at Route 53, Morrisdale, Pennsylvania
Cornell Companies 401(k) and Profit Sharing Plan
1983 Chevrolet Pick-Up Truck

Kaiser Storz-It business, including proceeds in bank accounts as well as any and all assets necessary for the operation of Kaiser Storz-It business as of the date of this Stipulation.

1999 Pace box trailer
17 caliber rifle

3. Both parties shall cooperate in placing the 1967 Mercury Cougar for sale within thirty (30) days of the date of this Order and shall share equally in any net proceeds received from the sale. Any offer received over \$200.00 shall be accepted by the parties.

LIABILITIES:

1. **Wife** shall be responsible and agrees to indemnify and hold Husband harmless from the following liabilities:

All PSECU credit card debt, including debts which were consolidated (Chase MasterCard, #64815, Bank of America, #90388) by Wife during the separation
Clearfield Bank & Trust 4-wheeler repair debt

2. **Husband** shall be responsible and agrees to indemnify and hold Wife harmless from the following liabilities:

Clearfield Bank & Trust consolidation loan
Clearfield Bank & Trust storage unit loan
Clearfield Bank & Trust garage loan

3. Husband and Wife shall be equally responsible for any business tax liability related to the filing of any prior tax returns should the same arise in the future related to the time period prior to the date of this Stipulation.

4. Husband and Wife shall refinance any debts, mortgage or home equity loans which is in joint names within ninety (90) days of the date of this Stipulation.

EQUITABLE DISTRIBUTION PAYMENT:

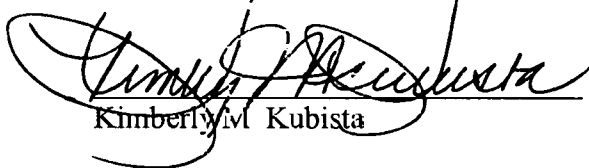
1. In order to effectuate a 50/50 split of the marital estate, Husband shall pay to Wife the sum of \$5,620.25 within ninety (90) days of the date of this Stipulation.

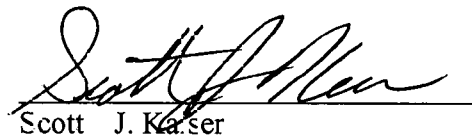
MISCELLANEOUS:

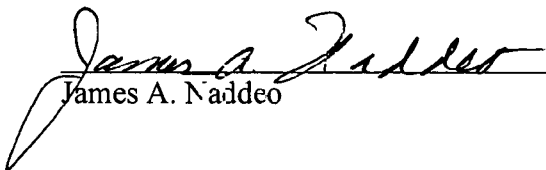
1. Husband and Wife shall cooperate in executing any and all documentation necessary to give effect to this agreement.

2. Both parties have fully and fairly disclosed all assets and debts which would comprise the marital estate.

3. Both parties agree that this Stipulation shall be incorporated into the Divorce Decree dated March 9, 2010.


Kimberly M. Kubista


Scott J. Kaiser


James A. Nadeo


Jennifer L. Kaiser

CA

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

JENNIFER L. KAISER,
Plaintiff,
v.

No. 2008-542-CD

SCOTT J. KAISER,
Defendant.

FILED[®]


4 MAR 18 2011
0/2:30 (w)
William A. Shaw
Prothonotary, Clerk of Courts
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ORDER

NOW, this 18th day of March 2011, upon the Court being notified that the Parties have reached a settlement in the above-referenced action and that documentation of said agreement was filed of record in this matter, it is the ORDER of this Court that the Master's Hearing scheduled for this date, March 18, 2011, shall be and is hereby CANCELLED.

BY THE COURT,


PAUL E. CHERRY
Judge

FILED

MAR 18 2011

William A. Shaw
Prothonotary/Clerk of Courts

DATE: _____

☒ You are responsible for serving all appropriate parties.

☒ The Prothonotary's office has provided service to the following parties:
Plaintiff(s) _____

Defendant(s) ☒ Plaintiff(s) Attorney _____ Other _____
Special Instructions: _____