

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. : No. 08 - 537 C.D.
105-L09-000-017.1 :

**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
013.10.08 Amy Ryan

William A. Shaw
Secretary/Clerk of Courts Amy pd. 95.00

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 :

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. Cummings

Judge

FILED
06/12/08
bcc
Atty Ryan
(M)
William A. Shaw
Prothonotary/Clerk of Courts

DATE: 3/26/08

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

APR 1 2008

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
11:24 AM
(LM)
William A. Shaw Atty pd.
Prothonotary/Clerk of Courts 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.



John R. Ryan

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 :
:

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. : No. 08 – 537 – C.D.
105-L09-000-017.1 :

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
0 10:59 a.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.

105-LC9-000-017.1

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: NO. 08-537-CD

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FILED *6cc Atty*
0/2:25 am Kesner
MAY 14 2008 *(will serve)*

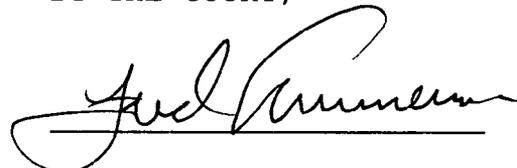
William A. Shaw *WAS*
Prothonotary/Clerk of Courts

ORDER

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

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

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.

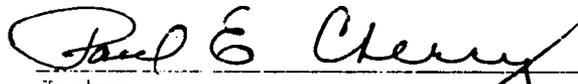
NOTICE

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,



Judge

FILED

03:54 P.M. EK 2cc Amy
MAR 31 2008
MAILED

William A. Shaw
Prothonotary/Clerk of Courts



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 PLEAS 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 15866.

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.

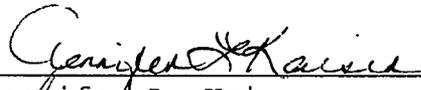
WHEREFORE, Plaintiff requests your Honorable Court to enter an award of temporary counsel fees, costs and expenses, until final hearing and thereupon award such additional counsel fees, costs and expenses as are deemed appropriate.

NADDEC & LEWIS, LLC

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

COMMONWEALTH OF PENNSYLVANIA)
) SS.
COUNTY OF CLEARFIELD)

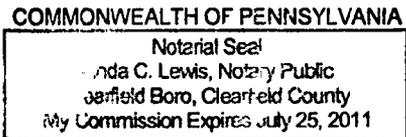
Before me, the undersigned officer, personally appeared JENNIFER L. KAISER, who being duly sworn according to law, depose and state that the facts set forth in the foregoing Complaint are true and correct to the best of her knowledge, information and belief.



Jennifer L. Kaiser

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

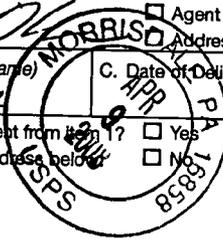
X *Scott Kaiser* Agent
Addressee

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 11

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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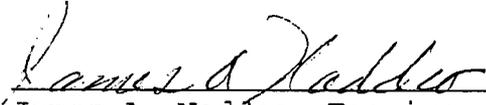
No. 2008-542-CD

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*
0/10:45/6/ Atty Kubista
APR 23 2008

William A. Shaw
Prothonotary/Clerk of Courts
Copy to CIA
610

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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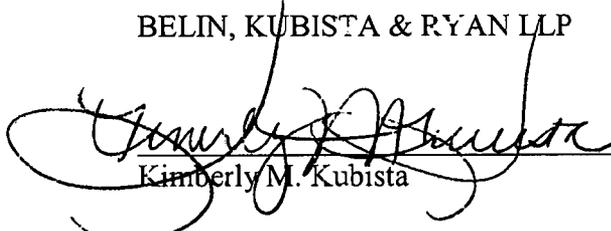
No. 08-542-CD

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

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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

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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


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

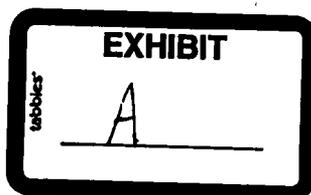
AND NOW, this 30th day of April, 2008, this being the date set for mediation conference, and upon agreement of the parties, it is the ORDER of this Court as follows:

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,

/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
FOR
SCOTT J. KAISER
Plaintiff v of

Jennifer L. Kaiser
JENNIFER L. KAISER
Defendant

Kimberly M. Kubista
KIMBERLY M. KUBISTA, ESQUIRE
Attorney for Plaintiff

Linda C. Lewis
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

NOV 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 PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA
CIVIL DIVISION

JENNIFER L. KAISER,
Plaintiff

vs.

SCOTT J. KAISER,
Defendant

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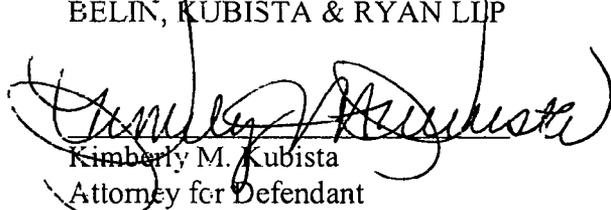
No. 08-542-CD

CERTIFICATE OF SERVICE

This is to certify that I have served a certified copy of 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, : NO. 08-542-CD
Plaintiff :
 :
 :
V. :
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SCOTT J. KAISER, :
Defendant :
 :

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 ⁶¹⁰
019:00:40
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Rec. Phys:
Naddeo
K. Kubista

William A. Shaw w/ Questionnaire
Prothonotary/Clerk of Courts

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 that reads "Paul E. Cherry". The signature is written in black ink and is positioned above the printed name and title.

PAUL E. CHERRY,
JUDGE

Attorney for the Plaintiff: James A. Kaddec, 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 Atty's:
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

Other

Defendant(s)

Defendant(s) Attorney

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

sent. to Atty's
K. KUBISTEN
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JENNIFER L. KAISER,
Plaintiff

V.

SCOTT J. KAISER,
Defendant

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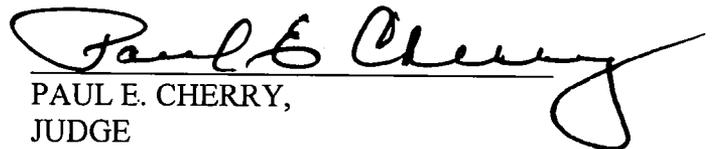
NO. 2008-542-CD

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: 12-27-08

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

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

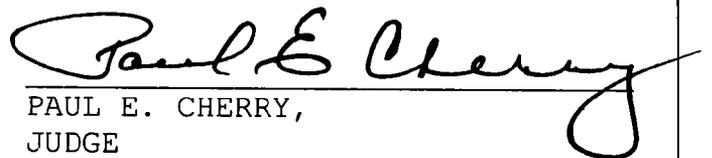
O R D E R

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

Naddeo
K. Kubista
(612)

William A. Shaw
Prothonotary/Clerk of Courts

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:

CA

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

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 OCC Atty
03:30pm K. Kubista
MAY 22 2009

5
William A. Sha 
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.

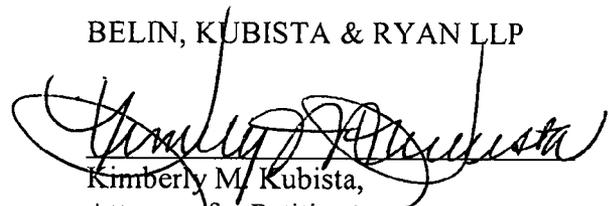
m) If Mother's days off fall on Father's days off, Father's days off shall take precedence over Mother's days off.

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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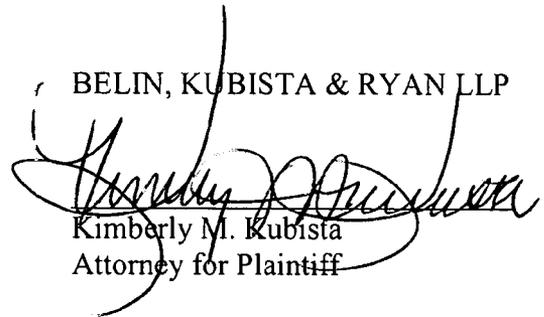
No. 08-542-CD

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

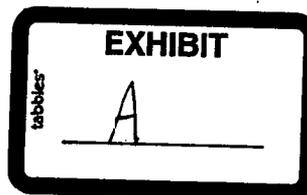
AND NOW, this 30th day of April, 2008, this being the date set for mediation conference, and upon agreement of the parties, it is the ORDER of this Court as follows:

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

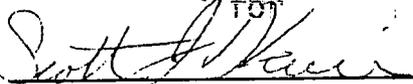
Judge

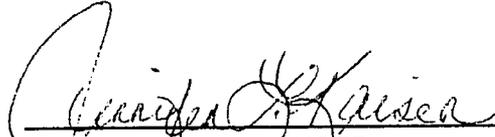
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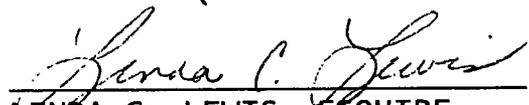
William L. Shaw
Prothonotary/
Clerk of Court

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

for

SCOTT J. KAISER
Plaintiff


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

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No. 08-542-CD

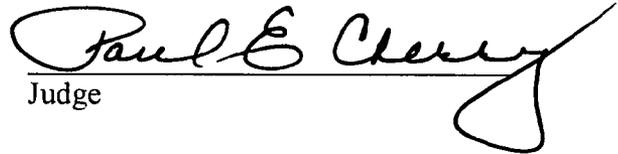
RULE

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 ^{acc}
014:003N
MAY 26 2009 Amy K. Kubista

William A. Shaw
Prothonotary/Clerk of Courts

(610)

FILED

MAY 26 2009

William A. Shaw
Prothonotary/Clerk of Courts

DATE: 5/26/09

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

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
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

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
012:49 RA
JAN 08 2010
Amy Kubista
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

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):

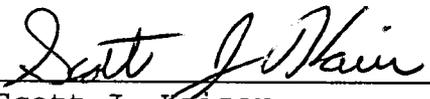
(a) I do not wish to make any claims for economic relief. I understand that I may lose rights concerning alimony, division of property, lawyer's fees or expenses if I do not claim them before a divorce is granted.

(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.

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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: James A. Naddeo
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.

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No. 2008-542-CD

FILED

JAN 14 2010
014200K CR
William A. Shaw
Prothonotary/Clerk of Courts
(UPHOLD TO ATT)

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

Defendant(s) Attorney

Other

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

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/W
William A. Shaw
Prothonotary/Clerk of Courts
Case to NADON
K. Kaiser

SCOTT J. KAISER

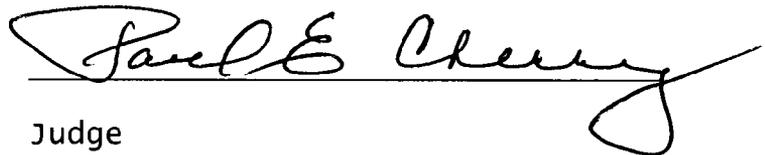
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ORDER

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:

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.

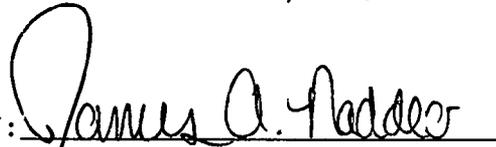
3. The action is contested with respect to the following claims: equitable distribution.

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

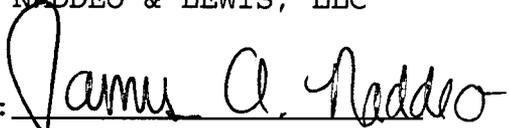
I, James A. Naddeo, Esquire, do hereby certify that a certified copy of Motion for Appointment of Master filed in the above-captioned action was served on the following person and in the following manner on the 8th day of March, 2010:

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,

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:

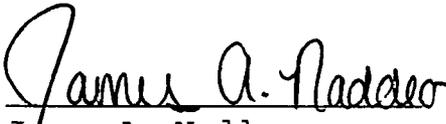
1. Ground for divorce: Irretrievable breakdown under Section 3301(c) and (d) of the Divorce Code.

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
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.

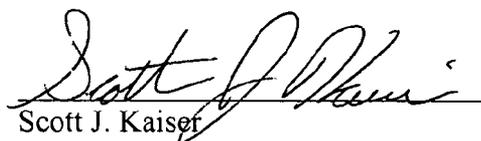
2. The marriage of Plaintiff and Defendant is irretrievably broken and ninety days have elapsed from the date of the filing of the complaint.

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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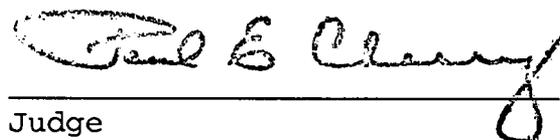
No. 2008-542-CD

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. Kubis JA

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

JENNIFER L. KAISER

NO. 08-542-CD

V.

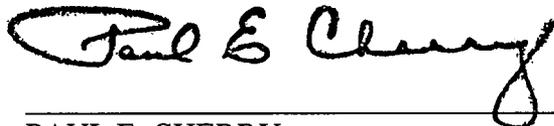
SCOTT J. KAISER

ORDER

NOW, this 9th day of March, 2010, the Court being in receipt of the Praecipe 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

Attys:
Naddeo
K. Kubista

100 D. Gibboney
(without memo)

(6.10)

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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

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

JENNIFER L. KAISER

: NO. 08-542-CD

V.

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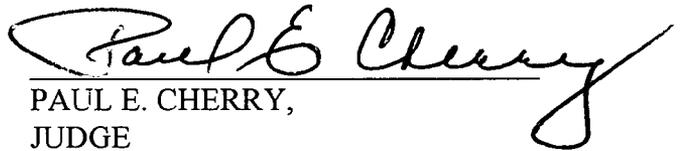
SCOTT J. KAISER

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

079:01/301
MAR 23 2010

William A. Shaw
Prothonotary/Clerk of Courts

ICC Atty's: Naddeo
K. Kubista

ICC D. Gibboney
(without memo)

FILED

MAR 23 2010

William A. Shaw
Prothonotary/Clerk of Courts

DATE: 3/23/10

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 Institutions:

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

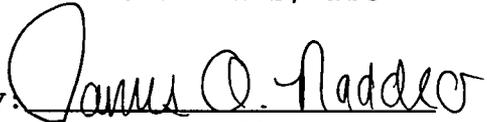
CERTIFICATE OF SERVICE

I, James A. Naddeo, Esquire, do hereby certify that certified copies of Plaintiff's Inventory and Appraisalment, 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

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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
Prothonotary/Clerk of Courts

(60)

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

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.

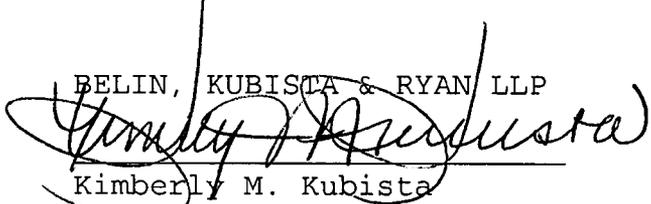
IX. Marital debts.

See inventory and appraisement.

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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- Private Party Value**
- Suggested Retail Value
- CPO Value
- Photo Gallery
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- Find Your Next Car Specifications

BLUE BOOK™ PRIVATE PARTY VALUE	Condition	Value
	Excellent	\$2,950
	Good	\$2,600
	Fair	\$2,200

Estimated Payments
\$ 49 /mo @ 4.49% APR
 Get a Pre-Owned Loan from 4.39% APR
 Get Your Credit Score Now
 Get a Free Insurance Quote

BUY A USED CAR

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- Dodge
- Caravan
- 75 Miles
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NEXT STEP: SEARCH LOCAL LISTINGS

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 VIN: No VIN? No Problem!
Average Consumer Rating (169 Reviews) Read Reviews
 4.0 out of 5 Review this Vehicle

DODGE

up to 0% APR Financing for 60 Months⁽⁵⁾
\$1000 BONUS Cash
On select 2010 Dodge Charger models

- Shopping Tools**
- Free CARFAX Record Check
- Auto Loan from 3.95% APR
- Get Your Credit Score Now
- Compare Insurance Rates with Progressive
- Payment Calculator
- Extended Warranty Quote
- Print For Sale Sign

Vehicle Highlights

Mileage: 100,000
 Engine: V6 3.0 Liter
 Transmission: Automatic
 Drivetrain: FWD

Selected Equipment [Change Equipment](#)

Standard	5 Passenger	Power Steering	Dual Front Air Bags
	Air Conditioning	AM/FM Stereo	
Optional	Power Windows	Cruise Control	Power Seat
	Power Door Locks	Single Compact Disc	Alloy Wheels
	Tilt Wheel	ABS (4-Wheel)	



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- Van/Minivan
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 \$2,650 DUE AT SIGNING
 INCLUDES SECURITY DEPOSIT, TAX, TITLE, LICENSE, AND DEALER FEES EXTRA.

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Condition	Value
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Good	\$5,360
Fair	\$4,860

Estimated Payments
\$101 /mo @ 4.49% APR
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Get a Pre-Owned Loan from
 4.39% APR

Get Your Credit Score Now

Get a Free Insurance Quote
 advertisement

BUY A USED CAR

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Oldsmobile

Silhouette

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Powered by CARFAX

VIN:

No VIN? No Problem!

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

FIND THE RIGHT CAR

Compare Used vs. New

\$5,000 to \$10,000

Both New and Used

Van/Minivan

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Direct Inquiries to:
800 492-3221



Cnb Bank
25 Irwin Dr
Philipsburg PA 16866

MEMBER F

003347

CTYN

March 31, 2008

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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-002-001-173-001-001-080303 009173 S02

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 502



Invoice # 100
March 13, 2008
CNS
CO1106278C 2-63775-LP 600

03/13/2008 \$100.00

Invoice # 100
March 14, 2008
CNS
CO1106278C 2-63775-LP 600

03/14/2008 \$130.00

Invoice # 100
March 17, 2008
CNS
CO1106278C 2-63775-LP 600

03/17/2008 \$100.00

Invoice # 100
March 24, 2008
CNS
CO1106278C 2-63775-LP 600

03/24/2008 \$200.00

Invoice # 100
March 26, 2008
CNS
CO1106278C 2-63775-LP 600

03/26/2008 \$422.00

Invoice # 100
March 13, 2008
CNS
CO1106278C 2-63775-LP 600

#1003 03/13/2008 \$335.22

Invoice # 100
March 14, 2008
CNS
CO1106278C 2-63775-LP 600

#1005 03/14/2008 \$44.52

Invoice # 100
March 26, 2008
CNS
CO1106278C 2-63775-LP 600

#1006 03/26/2008 \$129.00

Invoice # 100
March 31, 2008
CNS
CO1106278C 2-63775-LP 600

#1007 03/31/2008 \$348.30

Invoice # 100
March 28, 2008
CNS
CO1106278C 2-63775-LP 600

#1009 03/28/2008 \$221.00



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



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

		<i>This Period</i>	<i>Plan Year-to-Date</i>
		<i>07/01/2008- 09/30/2008</i>	<i>01/01/2008- 09/30/2008</i>
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

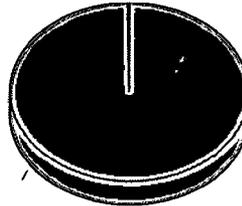
Total Vested Balance as of 09/30/2008

\$9,354.38

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

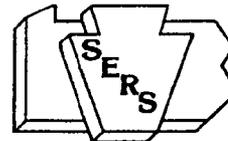
To help achieve long-term retirement security, you should give careful consideration to the benefits of a well-balanced and diversified investment portfolio. Spreading your assets among different types of investments can help you achieve a favorable rate of return, while minimizing your overall risk 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.



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: 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

Loan Inquiry

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

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		7.500000%	Current Amount Due .00	
Per diem		3.14568	Amount Past Due 208.29	
Other Charges		.00	Total Amount Due 208.29	
Amt partially paid		.00	Payment type/freq Int. included 1 M	

Last payment date 10/15/08 More...
 F1=Addl functions F3=Exit F4=Sweep Inquiry F5=History
 F6=Messages F8=Maintenance F9=Relationships F24=More Keys

GARAGE

11/03/08

Loan Inquiry

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

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

Internet Banking

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

1 of 2

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

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

More...

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

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

1 of 1

More...

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

Dodge Caravan

7



Opening/Closing Date: 07/03/08 - 08/02/08
Payment Due Date: 08/27/08
Minimum Payment Due: \$423.00

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 Date	Reference Number	Merchant Name or Transaction Description	Amount	
			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 31 days in cycle	Corresp. APR	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	\$0.00
Cash advances	V .06573%	23.99%	\$0.00	\$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	\$0.00
Promotional summary	.01093%	3.99%	\$21,291.75	\$72.14	\$0.00	\$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

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

U.S. Individual Income Tax Return 2009

(99) IRS Use Only—Do not write or staple in this space.

OMB No. 1545-0074

Label

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

Form fields for personal information: Your first name (SCOTT), Last name (KAISER), Social security number (205-64-3252), Home address (179 CHURCH STREET), City (MORRISDALE), State (PA), ZIP code (16858).

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 [X] Single, 2 [] Married filing jointly, 3 [] Married filing separately, 4 [] Head of household, 5 [] Qualifying widow(er) with dependent child.

Check only one box. First name, Last name, SSN.

Exemptions section: 6a [X] Yourself, 6b [] Spouse, 6c Dependents table, 6d Total number of exemptions claimed (1).

Income section table with columns for line number, description, and amount. Total income on line 22 is 50,814.

Adjusted Gross Income section table with columns for line number, description, and amount. Adjusted gross income on line 37 is 50,814.

Form 1040 (2009)

SCOTT J KAISER

205-64-3252

Page 2

Tax and Credits		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		39a			
if: <input type="checkbox"/> Spouse was born before January 2, 1945, <input type="checkbox"/> Blind. } Total boxes checked		39a			
b If your spouse itemizes on a separate return or you were a dual-status alien, see page 35 and check here.		39b			
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	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).	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		57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	57	
58		58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
59		59	Additional taxes: a <input type="checkbox"/> AEIC payments b <input type="checkbox"/> Household employment taxes. Attach Schedule H	59	
60		60	Add lines 55 through 59. This is your total tax	60	5,506

Payments		61	Federal income tax withheld from Forms W-2 and 1099	61	8,406
62		62	2009 estimated tax payments and amount applied from 2008 return	62	
63		63	Making work pay and government retiree credits. Attach Schedule M.	63	400
If you have a qualifying child, attach Schedule EIC.	64a	Earned income credit (EIC)	64a		
	b	Non-taxable combat pay election	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	
	72	If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid.	72	3,300	

Refund		73a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check here.	73a	3,300
Direct deposit? See page 73 and fill in 73b, 73c, and 73d, or Form 8888.	b	Routing number	031306294	c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings	
	d	Account number	12578924		
74		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 page 74	75	
76		76	Estimated tax penalty (see page 74)	76	

Do you want to allow another person to discuss this return with the IRS (see page 75)? Yes. Complete the following. No.

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

Sign Here

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				

**SCHEDULE A
(Form 1040)**

Itemized Deductions

OMB No. 1545-0074

2009

Attachment
Sequence No. **07**

Department of the Treasury
Internal Revenue Service (09)

▶ 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)	1				
2	Enter amount from Form 1040, line 38	2	50,814			
3	Multiply line 2 by 7.5% (.075)	3		3,811		
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4				
Taxes You Paid		State and local (check only one box):				
5	a <input checked="" type="checkbox"/> Income taxes, or	5		2,259		
6	b <input type="checkbox"/> General sales taxes	6		306		
7	Real estate taxes (see page A-5)	7				
8	New motor vehicle taxes from line 11 of the worksheet on back. Skip this line if you checked box 5b.	8				
9	Other taxes. List type and amount	9				
9	Add lines 5 through 8	9				2,565
Interest You Paid		Home mortgage interest and points reported to you on Form 1098				
10	Home mortgage interest and points reported to you on Form 1098	10		3,473		
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	11				
12	Points not reported to you on Form 1098. See page A-7 for special rules	12				
13	Qualified mortgage insurance premiums (see page A-7)	13				
14	Investment interest. Attach Form 4952 if required. (See page A-8.)	14				
15	Add lines 10 through 14	15				3,473
Gifts to Charity		Gifts by cash or check. If you made any gift of \$250 or more, see page A-8				
16	Gifts by cash or check. If you made any gift of \$250 or more, see page A-8	16		610		
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	17				
18	Carryover from prior year	18				
19	Add lines 16 through 18	19				610
Casualty and Theft Losses		Casualty or theft loss(es). Attach Form 4684. (See page A-10.)				
20	Casualty or theft loss(es). Attach Form 4684. (See page A-10.)	20				
Job Expenses and Certain Miscellaneous Deductions		Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See page A-10.)				
21	Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See page A-10.)	21		4,210		
22	See Attached Statement	22		35		
23	Tax preparation fees	23				
24	Other expenses—investment, safe deposit box, etc. List type and amount	24		4,245		
25	Add lines 21 through 23	25				
26	Enter amount from Form 1040, line 38	26	50,814			
27	Multiply line 25 by 2% (.02)	27		1,016		
28	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	28				3,229
Other Miscellaneous Deductions		Other—from list on page A-11. List type and amount				
29	Other—from list on page A-11. List type and amount	29				
Total Itemized Deductions		Is Form 1040, line 38, over \$166,800 (over \$83,400 if married filing separately)?				
30	<input checked="" type="checkbox"/> 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.	30				9,877
31	<input type="checkbox"/> Yes. Your deduction may be limited. See page A-11 for the amount to enter.					
32	If you elect to itemize deductions even though they are less than your standard deduction, check here					

**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
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)

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	50,814	
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? <input checked="" type="checkbox"/> No. Skip line 8. Enter the amount from line 4 on line 9 below. <input type="checkbox"/> 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). <input checked="" type="checkbox"/> No. Enter -0- on line 10 and go to line 11. <input type="checkbox"/> 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		
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. <input checked="" type="checkbox"/> No. Enter -0- on line 11 and go to line 12. <input type="checkbox"/> 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		
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.

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

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
08-542-CD
MAR 29 2010
Atty K. Kubista
William A. Shaw
Prothonotary/Clerk of Courts
60

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

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

- 18. Pension plans
- 19. Retirement plans, Individual Retirement Accounts
- 20. Disability payments
- 21. Litigation claims
- 22. Military/V. A. benefits
- 23. Education benefits
- 24. Debts due, including loans, mortgages held
- 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

:
:
:
:
:
:
:
:

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 3CC
0/10:40 AM
MAR 23 2009
Amy H. Kubista
@W
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	<u>\$ 50.00</u>
Utilities	
Electric	<u>\$ 63.30</u>
Gas	
Oil & Coal	<u>\$ 123.00</u>
Telephone	<u>\$ 142.00</u>
Water & Sewer	<u>\$ 58.12</u>
Garbage Disposal	<u>\$ 18.00</u>

EMPLOYMENT

Public Transportation	
Lunches	<u>\$ 160.00</u>

TAXES

Real Estate	<u>\$ 25.50</u>
Personal Property	
Income	

INSURANCE

Homeowners	<u>\$ 21.56</u>
Automobile	<u>\$ 65.50</u>
Life	
Accident & Health	
Other	

AUTOMOBILE

Payments	
Fuel	<u>\$ 160.00</u>
Repairs	<u>\$ 37.50</u>

MEDICAL

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

PROPERTY OWNED

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

INSURANCE

	<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	_____	_____	_____	_____	_____

*H = Husband; W = Wife; J = Joint; C = Child

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.

3-26-2010
DATE


NAME

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

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.

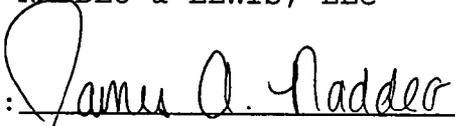
See inventory and appraisalment.

X. Proposed resolution.

Equal distribution of the marital assets and debts.

NADDEO & LEWIS, LLC

BY:


James A. Naddeo, Esquire
Attorney for Plaintiff



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BLUE BOOK® TRADE-IN VALUE 2000's TRUCK

	Condition	Value
 <small>More Photos</small>	Excellent	\$763
	Good	\$650
	Fair	\$463

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On Blue Book Classifieds™

Dodge

Caravan

75 Miles

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NEXT STEP: Price New Cars

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Average Consumer Rating (169 Reviews) [Read Reviews](#)

☆☆☆☆☆ **4.0 out of 5** [Review this Vehicle](#)

FIND THE RIGHT CAR
Compare Used vs. New

Under \$5,000

Both New and Used

Van/Minivan

[To View List, Click](#)

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

VIEW ANOTHER VEHICLE

Select Year...

Select Make...

Select Model...

Or Search by Category
Or Change ZIP Code

Finance & Insurance

- Get a New Car Loan from 3.95% APR
- Get a Pre-Owned Loan from 4.39% APR
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- Get a Free Insurance Quote

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DODGE

up to 0% APR Financing for 60 Months^[5]

\$1,000 Bonus Cash

on 2010 Dodge Caravan models



Dodge Caravan



Internet Price Build and Price
 Incentives View Inventory
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Presented by:

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 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



\$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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Used Car Values | Search Used Cars for Sale | Certified Pre-Owned | Compare Vehicles | Perfect Car Finder | Most Researched Vehicles | CARFAX Vehicle History

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TRaverse

24 MPG*



Named a "Best New Family Vehicle"

EXPLORE TRaverse

Latest Car News

Home > Used Cars > 1993 > Ford > Tempo > GL Sedan 4D

Save Vehicle | Print | Email | 

1993 Ford Tempo GL Sedan 4D

- Trade-In Value**
- Private Party Value
 - Suggested Retail Value
 - CPO Value
 - Photo Gallery
 - Compare Vehicles
 - Blue Book Review
 - Consumer Ratings
 - Find Your Next Car
 - Specifications

BLUE BOOK® TRADE-IN VALUE

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

Finance & Insurance

- Get a New Car Loan from 3.95% APR
- Get a Pre-Owned Loan from 4.39% APR
- Get Your Credit Score Now
- Get a Free Insurance Quote

BUY A USED CAR

On Blue Book Classifieds™

Ford

Tempo

75 Miles

Near ZIP 16830

To View Ads, Click

NEXT STEP: Price New Cars

Local Listings:

Search Ford Tempo

Search all Classifieds near 16830

Shopping Tools

- Free CARFAX Record Check
- Auto Loan from 3.95% APR
- Compare Insurance Rates with Progressive
- Payment Calculator
- Find a Dealer

Average Consumer Rating (75 Reviews) [Read Reviews](#)

3.9 out of 5 [Review this Vehicle](#)

FIND THE RIGHT CAR

Compare Used vs. New

Under \$5,000

Both New and Used

Sedan

To View List, Click

Vehicle Highlights

Mileage: 140,000

Engine: 4-Cyl. 2.3 Liter

Transmission: Automatic

Drivetrain: FWD

VIEW ANOTHER VEHICLE

Select Year...

Select Make...

Select Model...

Or Search by Category

Or Change ZIP Code

Selected Equipment [Change Equipment](#)

Standard

Air Conditioning Power Steering AM/FM Stereo

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 **\$188**

- 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

~~EXCELLENT~~

\$163

- 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

~~GOOD~~

\$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.

Poor

~~FAIR~~

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.

NEXT STEP: Price New Cars

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QUALIFIED BUYERS GET 1.9% APR FOR 60 MONTHS! OR \$1,500 CASH BACK!

1. Offer available with some other offers. No other payments in 2010. 2. \$1,000 cash back. 3. Excludes direct payments. 4. Some restrictions may not apply. 5. Taxable sale only. 6. See dealer for details. 7. Not available in all states. 8. Tax authority by 5/31/10. See dealer for details.

Latest Car News

Home > Used Cars > 2001 > Oldsmobile > Silhouette > GL Extended Minivan

2001 Oldsmobile Silhouette GL Extended Minivan

- Trade-In Value
- Private Party Value
- Suggested Retail Value
- CPO Value
- Photo Gallery
- Compare Vehicles
- Blue Book Review
- Consumer Ratings
- Find Your Next Car
- Specifications

BLUE BOOK TRADE-IN VALUE



More Photos

Condition	Value
Excellent	\$2,350
Good	\$2,025
Fair	\$1,525

Finance & Insurance

- Get a New Car Loan from 3.95% APR
- Get a Pre-Owned Loan from 4.39% APR
- Get Your Credit Score Now
- Get a Free Insurance Quote advertisement

BUY A USED CAR

On Blue Book Classifieds™

- Oldsmobile
- Silhouette
- 75 Miles

Near ZIP 16830

To View Ads, Click

Shopping Tools

- Free CARFAX Record Check
- Auto Loan from 3.95% APR
- Compare Insurance Rates 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

VIEW ANOTHER VEHICLE.

Select Year...

Select Make...

Select Model...

Or Search by Category

Or Change ZIP Code

NEXT STEP: Price New Cars

Local Listings:

- Search Oldsmobile Silhouette
- Search all Classifieds near 16830

Average Consumer Rating (187 Reviews)

Read Reviews

4.3 out of 5

Review this Vehicle

Vehicle Highlights

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

Selected Equipment

Standard

Air Conditioning	Cruise Control	ABS (4-Wheel)
Power Steering	AM/FM Stereo	Roof Rack
Power Windows	Single Compact Disc	Privacy Glass
Power Door Locks	OnStar	
Tilt Wheel	Dual Front Air Bags	

Change Equipment

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.

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* Pennsylvania 3/23/2010

Accurate Condition Appraisal **Change Condition**

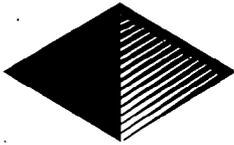
Accurately appraising the condition of a vehicle is an important aspect in determining its Blue Book value. Taking our 16 question condition quiz will ensure you know the correct condition rating.

NEXT STEP: Price New Cars

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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 Community People You Know

SUMMARY OF ACCOUNTS

Table with 3 columns: Account Number, Type of Account, Current Balance. Rows include 12475769 REG CKING TRUNCATED and 1026313 INSTALLMENT LOAN.

CHECKING ACCOUNT

Account Title: JENNIFER L KAISER OR SCOTT J KAISER

Summary table for REG CKING TRUNCATED account, including Account Number, Previous Balance, Deposits/Credits, Checks/Debits, Service Charge, Interest Paid, Ending Balance, and various fees.

DEPOSITS AND ELECTRONIC ACTIVITY

Table with 4 columns: DATE, DESCRIPTION, REFERENCE, AMOUNT. Lists transactions such as ATM W/D and DBT CRD.

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



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 CALL 800.LOAN.555
 OR
 APPLY ONLINE AT PSECU.COM.

JENNIFER L KAISER

JOINT OWNER

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 MA			
0208	PAYMENT: DIRECT DEPOSIT PA TREASURY DEPT TYPE: PAYROLL ID: 1236003133 CO: PA TREASURY DEPT	912.23	1134.72	
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 TYPE: PAYROLL ID: 1236003133 CO: PA TREASURY DEPT	916.23	1812.06	
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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OR
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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	
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0229	ENDING BALANCE		1399.87	
POST EFF	DESCRIPTION	AMOUNT	BALANCE	
0201	ID 04 CHECKING BEGINNING BALANCE		224.89	
0201 0131	WITHDRAWAL CHECK CARD	21.40-	222.49	
	01/30 2469216DE00X52VJ 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			
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	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 2416407E9EG1VK45B 5541 SHEETZ 00000646 PHILIPSBURG PA			
0228	WITHDRAWAL CHECK CARD	29.48-	1216.36	
	02/26 2401339EA0J8KG48W 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

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	7.500000%	Current Amount Due	.00
Per diem		3.14568	Amount Past Due	208.29
Other Charges		.00	Total Amount Due	208.29
Amt partially paid		.00	Payment type/freq	Int. included 1 M

Last payment date 10/15/08 More...
F1=Addl functions F3=Exit F4=Sweep Inquiry F5=History
F6=Messages F8=Maintenance F9=Relationships F24=More Keys

GARAGE

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

Loan Inquiry

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

1 of 1
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

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

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

More...

Storage

3/23/10
 SCOTT J KAISER
Paid-off Messages
 Original balance:
 Current balance:
 Control: From

Loan Inquiry
 Loan number:
 6,653.92
 .00
 Payment amount:
 Next due date:

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

Posted	Effective	Due Date	Src	T/C	Affects	Amount	Balance
10/03/07	10/03/07	10/26/07	C	00010	C Q	163.21	3,473.61
11/20/07	11/20/07	11/26/07	C	00010	C Q	163.21	3,348.09
12/03/07	12/03/07	12/26/07	C	00010	C Q	163.21	3,194.72
1/22/08	1/22/08	1/26/08	C	00010	C Q	163.21	3,067.61
2/26/08	2/26/08	2/26/08	C	00010	C Q	163.21	2,928.67
3/10/08	3/10/08	3/26/08	C	00010	C Q	163.21	2,774.07
3/24/08	3/24/08	4/26/08	C	00010	C Q	163.21	2,619.63
5/21/08	5/21/08	5/26/08	C	00010	C Q	163.21	2,490.77
6/24/08	6/24/08	6/26/08	C	00010	C Q	163.21	2,346.70
7/14/08	7/14/08	7/26/08	C	00010	C Q	163.21	2,194.10
7/31/08	7/31/08	8/26/08	C	00010	C Q	163.21	2,039.32
8/14/08	8/14/08	9/26/08	C	00010	C Q	163.21	1,882.56

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
 SCOTT J KAISER
Paid-off Messages
 Original balance:
 Current balance:
 Control: From

Loan Inquiry
 Loan number:
 6,653.92
 .00
 Payment amount:
 Next due date:

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

Posted	Effective	Due Date	Src	T/C	Affects	Amount	Balance
8/22/08	8/22/08	10/26/08	U	00343	C P	82.56	1,800.00
9/17/08	9/17/08	10/26/08	C	00010	C Q	163.21	1,650.77
11/06/08	11/06/08	11/26/08	C	00010	C Q	163.21	1,506.22
12/10/08	12/10/08	12/26/08	C	00010	C Q	163.21	1,354.58
1/05/09	1/05/09	1/26/09	C	00010	C Q	163.21	1,199.33
2/06/09	2/06/09	2/26/09	C	00010	C Q	163.21	1,044.80
3/06/09	3/06/09	3/26/09	C	00010	C Q	163.21	888.20
5/04/09	5/04/09	4/26/09	C	00010	C Q	166.47	733.57
5/21/09	5/21/09	5/26/09	C	00010	C Q	163.21	573.18
6/16/09	6/16/09	6/26/09	C	00010	C Q	163.21	413.34
7/29/09	7/29/09	7/26/09	C	00010	C Q	166.47	250.89
8/31/09	8/31/09	8/26/09	C	00010	C Q	252.76	.00

Bottom

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

Dodae Carawan

3/23/10
JENNIFER L KAISER

Loan Inquiry

Loan number:

16:13:13
1026313 L

Paid-off Messages Insurance

Original balance: 7,672.70

Payment amount:

1 of 1

Current balance: .00

Next due date:

153.76

9/26/09

Control: From

To

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

Loan Inquiry

Loan number:

16:18:03
1026313 L

Paid-off Messages Insurance

Original balance: 7,672.70

Payment amount:

1 of 1

Current balance: .00

Next due date:

153.76

9/26/09

Control: From

To

1=View 6=Print T=TS

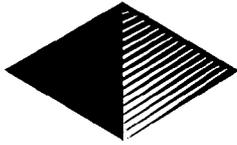
Posted	Effective	Due Date	Src	T/C	Affects	Amount	Balance
6/05/09	6/05/09	6/26/09	G	00842	C N	2.83	2,656.87
6/08/09	6/08/09	6/26/09	G	00842	C N	3.69	2,656.87
6/16/09	6/16/09	6/26/09	C	00010	C Q	153.76	2,517.30
7/07/09	7/07/09	7/26/09	G	00842	C N	2.68	2,517.30
7/08/09	7/08/09	7/26/09	G	00842	C N	3.46	2,517.30
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
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Page 1
11007400

CBTF

001863 0.4739 AT 0.346 TR00007

KAISER STORZ IT
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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-

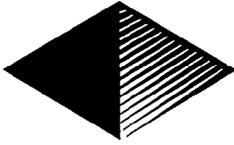
-----Daily Balance Summary-----

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

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

CBTF-001-001863-001-000-090204 001863 S04
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001869



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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-

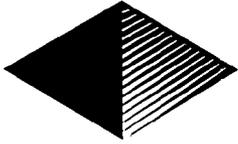
-----Daily Balance Summary-----

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 * *

CBTF-001-001869-001-000-090302 001869 S06
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11007400

001711

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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

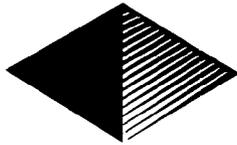
-----Daily Balance Summary-----

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 * *

CBTF-001-001711-001-000-090401 001711 S03
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001713



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 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

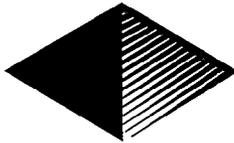
-----Daily Balance Summary-----

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		

* * END OF STATEMENT * *

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Date 6/30/09 Page 1
Primary Account 11007400



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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 CHECK # 2005	051376989	61.00-
6/15	Transfer to Loan Acct No. 909858	090700122	235.89-

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

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

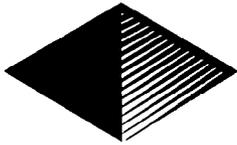
* Denotes missing check numbers

-----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 * *

CBTF-001-001702-001-000-090701 001702 S07 16858027575



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Page 1
11007400

001695

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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

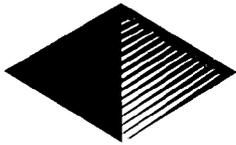
-----Daily Balance Summary-----

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 * *

CBTF-001-001695-001-000-090803 001695 S05
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001691



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Date 8/31/09
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11007400



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***** CHECKING ACCOUNT *****

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

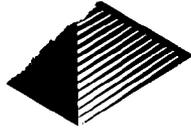
* Denotes missing check numbers

-----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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***** CHECKING ACCOUNT *****

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

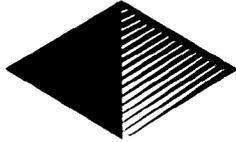
-----Daily Balance Summary-----

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 16858027575

801685



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Date 10/30/09 Page 1
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3 INSERT

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***** CHECKING ACCOUNT *****

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-

CBTF-001-001685-001-000-091102 001685 504
 16858027575

-----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

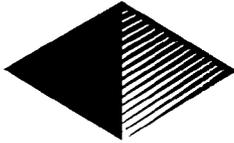
* Denotes missing check numbers

-----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 * *

001682



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PO BOX 275
MORRISDALE PA 16858-0275

Are your valuables protected ?
A Safe Deposit Box provides you with security
and protection for your valuables. Ask for details.

***** 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

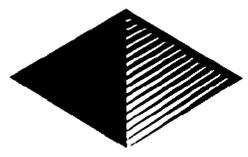
DATE	DESCRIPTION	REFERENCE	AMOUNT
11/05	Regular Deposit	012013400	130.00
11/13	Transfer to Loan	090700269	235.89-
	Acct No. 909858		
11/30	Regular Deposit	010039800	50.00
11/30	Total Service Charge Amount		6.00-

-----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 * *

CBTF-001-001682-001-000-091201 001682 S05
16858027575



CLEARFIELD BANK

TRUST COMPANY
Community People You Know

P.O. Box 171, Clearfield, PA 16830

Address Service Requested

001673

CBTF

Date 12/31/09
Primary Account

Page 1
11007400



001673 0.5048 AT 0.357 TR00008

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

Are your valuables protected ?
A Safe Deposit Box provides you with security
and protection for your valuables. Ask for details.

***** CHECKING ACCOUNT *****

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-

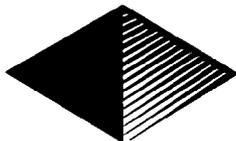
-----Daily Balance Summary-----

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 * *

CBTF-001-001673-001-000-100105 001673 S06
16858027575

001670



CBTF

CLEARFIELD BANK & TRUST COMPANY
Community People You Know

P.O. Box 171, Clearfield, PA 16830
Address Service Requested

Banking Conveniences For 24 Hour Account Access:

ONLINE24 - Online Banking
ATM Network
ACCESS24 - Telephone Banking
(814) 765-2053 or
Toll Free (888) 225-6065

Date 1/29/10 Page 1
Primary Account 11007400



001670 0.5048 AT 0.357 TR00008

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

Make a Green Statement
With your e-statement!
A little less paper... a few more trees

***** CHECKING ACCOUNT *****

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

* * END OF STATEMENT * *

S03
CBTF-001-001670-001-000-100201 001670
16858027575



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

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.

11946

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

PAY PLAN MONTHLY
SEE PAYMENT PLANS ON REVERSE SIDE

PHONE ()

MINIMUM AMOUNT DUE	\$	122.00
BALANCE	\$	245.00

CHANGE PAYMENT PLAN TO _____
CONTACT YOUR AGENT FOR OTHER CHANGES

PLEASE DO NOT WRITE BELOW THIS LINE

-010142424125504120521100000000-001220000024500-





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

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/>
		KYLE KOVACH 202 S. CENTRE ST PHILPSBURG, PA 16806	\$125

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	\$40
202 S. Centre St. Philipsburg PA 16866 * Grass Cutting			

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

Storage
Postage

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

*** 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

00000020*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 FOR Check # 3682 10X15

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

FROM January TO 2009

BY Kaiser Storz It

edward 1182

RECEIPT

DATE January 5, 2009 No. 061243

RECEIVED FROM Heather Roos \$50.00

Fifty and 00/100 DOLLARS

FOR RENT bay #03 (10x15) Check # 2223

FOR

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

CREDIT CARD BY Kaiser Storz It

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	

CREDIT CARD BY Kaiser Storz It

RECEIPT

DATE February 5, 2009 No. 061248

RECEIVED FROM David Mollura \$ 50.00

Fifty and 00/100 DOLLARS

FOR RENT Bay #13 (10x15) Check # 3829
 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	

CREDIT CARD BY Kaiser Storz It

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		
PAYMENT		
BAL. DUE		

CASH
 MONEY ORDER
 CHECK
 CREDIT CARD

FROM February 2009

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		
PAYMENT		
BAL. DUE		

CASH
 MONEY ORDER
 CHECK
 CREDIT CARD

FROM February 2009

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		
PAYMENT		
BAL. DUE		

CASH
 MONEY ORDER
 CHECK
 CREDIT CARD

FROM February 2009

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		
PAYMENT		
BAL. DUE		

CASH
 MONEY ORDER
 CHECK
 CREDIT CARD

FROM February 2009

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	

CREDIT CARD BY Kaiser Storz It

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	

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	

CREDIT CARD BY Kaiser Storz It

RECEIPT

DATE March 5, 2009 No. 061257

RECEIVED FROM Heather Ross \$50.00

Fifty and 00/100 DOLLARS

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

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

FROM March 2009 TO March 2009

BY Kaiser Storz II

RECEIPT

DATE March 5, 2009 No. 061258

RECEIVED FROM Della Bell \$45.00

Forty-five and 00/100 DOLLARS

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

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

FROM March 2009 TO March 2009

BY Kaiser Storz II

*Balance Due for MARCH 2009 is \$45.00

\$65 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
 FOR Check # 839 Bay # 01 (10x20)

ACCOUNT	<u>195.00</u>	<input type="radio"/> CASH
PAYMENT	<u>150.00</u>	<input type="radio"/> MONEY ORDER
BAL. DUE	<u>45.00</u>	<input checked="" type="radio"/> CHECK
		<input type="radio"/> CREDIT CARD

FROM Jan. 2009 TO MAR. 2009

BY Kaiser Storz II

\$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
 FOR 10x15 Bay # 12 Check # 3353

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

FROM April 2009 TO April 2009

BY Kaiser Storz II

RECEIPT

DATE upper a, crw / No. 001201
 RECEIVED FROM David Moller \$50.00
Fifty and 00/100 DOLLARS
 FOR RENT Bay #13 (10x15) Check # 3972
 FOR

ACCOUNT	
PAYMENT	
BAL. DUE	

 CASH
 MONEY ORDER
 CHECK
 CREDIT CARD
 FROM May 2009
 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>
PAYMENT	<u>100.00</u>
BAL. DUE	<u>100.00</u>

 CASH
 MONEY ORDER
 CHECK
 CREDIT CARD
 FROM January TO February 2009
 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	
PAYMENT	
BAL. DUE	

 CASH
 MONEY ORDER
 CHECK
 CREDIT CARD
 FROM April TO 2009
 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	
PAYMENT	
BAL. DUE	

 CASH
 MONEY ORDER
 CHECK
 CREDIT CARD
 FROM January TO April 2009
 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

admiral 1182

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 \$5 towards FEB'2009

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 TO PARTIAL FEB '09

BY Kaiser Storz It.

admiral 1182

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

admiral 1182

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

admiral 1182

RECEIPT

DATE May 5, 2009 No. U61269

RECEIVED FROM Rosella Quirk \$50.00

Fifty and 00/100 DOLLARS

FOR RENT Bay # 02 (10x15) MO# R201109679826

ACCOUNT CASH
 PAYMENT MONEY ORDER
 BAL. DUE CHECK
 CREDIT CARD

FROM May 2009
 BY Kaiser Storz It

1182

RECEIPT

DATE May 5, 2009 No. 061271

RECEIVED FROM Virginia McCracken \$50.00

Fifty and 00/100 DOLLARS

FOR RENT Bay # 04 (10x15) Check # 3428

ACCOUNT CASH
 PAYMENT MONEY ORDER
 BAL. DUE CHECK
 CREDIT CARD

FROM May 2009
 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

ACCOUNT CASH
 PAYMENT MONEY ORDER
 BAL. DUE CHECK
 CREDIT CARD

FROM May 2009
 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

ACCOUNT CASH
 PAYMENT MONEY ORDER
 BAL. DUE CHECK
 CREDIT CARD

FROM May 2009
 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

FOR RENT Bay # 07 (5x10) Check # 0803

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 TO 2009

BY Kaiser Storz It

RECEIPT

DATE June 1, 2009 No. 061274

RECEIVED FROM Edith C. Stiner \$ 55.00

Fifty-five and 00/100 DOLLARS

FOR RENT Bay # 12 (10x15) Check # 3357

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 TO 2009

BY

RECEIPT

DATE April 5, 2009 No. 061275

RECEIVED FROM Barry Steinkamp \$ 99.00

Ninety-nine and 00/100 DOLLARS

FOR RENT Bay # 09 (5x10) Check # 769 [33.00/month]

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 TO June 2009

BY Kaiser Storz It

RECEIPT

DATE April 8, 2009 No. 061276

RECEIVED FROM Della Bell \$ 45.00

Forty-five and 00/100 DOLLARS

FOR RENT Bay # 14 (10x10) Check # 1240

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 TO 2009

BY Kaiser Storz It

RECEIPT

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="radio"/> CASH
PAYMENT		<input type="radio"/> MONEY ORDER
BAL. DUE		<input checked="" type="radio"/> CHECK
		<input type="radio"/> CREDIT CARD

FROM June 2009

BY Kaisee Story IT

RECEIPT

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="radio"/> CASH
PAYMENT		<input type="radio"/> MONEY ORDER
BAL. DUE		<input checked="" type="radio"/> CHECK
		<input type="radio"/> CREDIT CARD

FROM June 2009

BY Kaisee Story IT

RECEIPT

June 5, 2009 No. 061279

RECEIVED FROM David Mollera \$50.00

Fifty and 00/100 DOLLARS

FOR RENT Bay #13 (10x15) Check #4117

FOR

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

FROM July 2009

BY Kaisee Story IT

RECEIPT

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 DUE

FOR

ACCOUNT	170 00	<input checked="" type="radio"/> CASH
PAYMENT	70 00	<input type="radio"/> MONEY ORDER
BAL. DUE	100 00	<input type="radio"/> CHECK
		<input type="radio"/> CREDIT CARD

FROM FEBRUARY 2009 TO PARTIAL APRIL 2009

BY Kaisee Story IT

RECEIPT

DATE June 10, 2009 No. 061281

RECEIVED FROM Sherry Olinger \$150.00

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>
PAYMENT	<u>150 00</u>
BAL. DUE	<u>90 00</u>

CASH
 MONEY ORDER
 CHECK
 CREDIT CARD

FROM MARCH 2009 TO *MAY 2009

BY KAISER STORZ IT

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	/
PAYMENT	/
BAL. DUE	/

CASH
 MONEY ORDER
 CHECK
 CREDIT CARD

FROM June 2009 TO

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>
PAYMENT	<u>65 00</u>
BAL. DUE	<u>25 00</u>

CASH
 MONEY ORDER
 CHECK
 CREDIT CARD

FROM August 11 TO Aug 31, 2009

BY Kaiser Storz It

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	/
PAYMENT	/
BAL. DUE	/

CASH
 MONEY ORDER
 CHECK
 CREDIT CARD

FROM July 2009 TO Sept 2009

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
PAYMENT		<input type="checkbox"/> MONEY ORDER
BAL. DUE		<input checked="" type="checkbox"/> CHECK
		<input type="checkbox"/> CREDIT CARD

 FROM August 2009
 BY Kaiser Storz It
edmer 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
PAYMENT		<input type="checkbox"/> MONEY ORDER
BAL. DUE		<input checked="" type="checkbox"/> CHECK
		<input type="checkbox"/> CREDIT CARD

 FROM September 2009
 BY Kaiser Storz It
edmer 1182

RECEIPT

263-4514

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
PAYMENT		<input type="checkbox"/> MONEY ORDER
BAL. DUE		<input checked="" type="checkbox"/> CHECK
		<input type="checkbox"/> CREDIT CARD

 FROM July 2009
 BY Kaiser Storz It
edmer 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
PAYMENT		<input type="checkbox"/> MONEY ORDER
BAL. DUE		<input checked="" type="checkbox"/> CHECK
		<input type="checkbox"/> CREDIT CARD

 FROM August 2009
 BY Kaiser Storz It
edmer 1182

RECEIPT

DATE July 2009 No. UB1207

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. 061298

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 Crumly \$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. U61293

RECEIVED FROM David Mollucci \$ 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	

CREDIT CARD

BY Kaiser Storz IT.

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	

CREDIT CARD

BY Kaiser Storz IT

RECEIPT

DATE August 24, 2009 No. 061295

RECEIVED FROM Randy A. Benton \$ 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	

CREDIT CARD

BY Kaiser Storz IT

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 OUT = 30 for Mar '09 + 35 for Apr thru Aug '09 = \$175

ACCOUNT	<u>240.00</u>	<input checked="" type="radio"/> CASH	FROM _____ TO <u>Total Due 205.00</u>
PAYMENT	<u>35.00</u>	<input type="radio"/> MONEY ORDER	
BAL. DUE	<u>205.00</u>	<input type="radio"/> CHECK	

CREDIT CARD

BY Kaiser Storz IT

RECEIPT

DATE September 2009 No. 110

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	210.00

CASH
 MONEY ORDER
 CHECK
 CREDIT CARD

FROM _____ TO _____

BY Kaiser Storz It

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	195.00

CASH
 MONEY ORDER
 CHECK
 CREDIT CARD

FROM June 2009 TO July 2009

BY Kaiser Storz It

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

1182

RECEIPT

DATE October 2009 No. 061300

RECEIVED FROM Virginia Mc Cracken \$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

1182

RECEIPT

DATE December 2009 No. 517901

FROM Heather Roos \$50.00

Fifty and 00/100 DOLLARS

FOR RENT Check # 2321 Bay # 03 (10x15)

FOR _____

ACCT.	
PAID	
DUE	

- CASH
- CHECK
- MONEY ORDER
- CREDIT CARD

FROM December 2009

BY Kaiser Storz II

acorn 2501

RECEIPT

RECEIPT

DATE November 2009 No. 517902

FROM Virginia Mc Cracker \$50.00

Fifty and 00/100 DOLLARS

FOR RENT Buy # of check # 3550 (10x15)

FOR

ACCT.		<input type="checkbox"/> CASH
PAID		<input checked="" type="checkbox"/> CHECK
DUE		<input type="checkbox"/> MONEY ORDER
		<input type="checkbox"/> CREDIT CARD

FROM November 2009

BY Kaiser Storz It

21 adams 2501

TOO	
CIA	
BLD	

FROM
YOR
AND
R

THIS NO. 3

RECEIPT

RECEIPT

DATE December 2009 No. 517903

FROM Virginia McCracken \$50.00

Fifty and 00/100 DOLLARS

FOR RENT FOR Check # 3571 Bay # 04 (10-15)

ACCT. CASH

PAID CHECK

DUE MONEY ORDER

CREDIT CARD

FROM December 2009

By Kaiser Storz, It

2501

RECEIVED

DATE

AMOUNT

PAID

DUE

DATE: _____
 FROM: _____
 TO: _____
 AMOUNT: _____
 RECEIVED BY: _____
 TITLE: _____
 ORGANIZATION: _____

RECEIPT

RECEIPT

DATE December 2009 No. 517904

FROM Mike Lowe \$ 65.00

Sixty-five and 00/100 DOLLARS

FOR RENT Bay #6 (5x10) #30-Mar-2009
 OFCR 35-April-2009

CASH
 CHECK
 MONEY ORDER
 CREDIT CARD

ACCT. _____
 PAID _____
 DUE _____

FROM _____ TO _____
 BY Kaiser Storz Inc.

adama 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
 FOR

ACCT.	<input type="radio"/> CASH
PAID	<input checked="" type="radio"/> CHECK
DUE	<input type="radio"/> MONEY ORDER
	<input type="radio"/> CREDIT CARD

FROM _____ TO _____

BY Kaiser Stone

adams 2501

SEARCHED _____ INDEXED _____

SERIALIZED _____ FILED _____

OCT 1 2009

FBI - MEMPHIS

RECEIPT
DATE
FROM
AMOUNT
PAID
DUE
RENT
BY

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.			
PAID			
DUE			

CASH
 CHECK
 MONEY ORDER
 CREDIT CARD

FROM Oct. 2009 TO Dec 2009

BY Kaiser Storz Jt

© 2009 253

DATE
FROM
FOR
FOR RENT
FOR
CASH
CHECK
MONEY
ORDER
CREDIT
CARD

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)
 FOR
ACCT. CASH
PAID CHECK
DUE MONEY ORDER
 CREDIT CARD
FROM Aug 2009 TO Sept 2009
BY Kaiser-Storz Jt
admiral 2501

RECEIPT

RECEIPT

DATE _____
 FROM _____
 TO _____
 FOR RENT _____
 FOR _____

CASH
 CHECK
 MONEY ORDER
 CREDIT CARD

ACCT.	
PAID	
DUE	

DATE December 2009 No. 517909

FROM David Mollura \$100.00

One hundred and 00/100 DOLLARS
 Check # 4485 - NOV 2009
 Check # 4532 - DEC 2009

FOR RENT Bay #13 (10x15)
 FOR _____

ACCT.		<input type="radio"/> CASH
PAID		<input checked="" type="radio"/> CHECK
DUE		<input type="radio"/> MONEY ORDER
		<input type="radio"/> CREDIT CARD

FROM _____ TO _____

Kaiser Storz IT

Edema 2501

RECEIPT

RECEIPT

DATE: _____

FROM: _____

FOR: _____

FOR RENT: _____

FOR: _____

PAID: _____

DUE: _____

ACCT: _____

PAID: _____

DUE: _____

DATE: _____

BY: _____

RECEIVED BY: _____

DATE: _____

AMOUNT: _____

REMARKS: _____

DATE: January 2010 No. 517911

FROM: Kathy Crumby \$ 160.00

One hundred Sixty and 00/100 DOLLARS

FOR RENT OF: Bay # 7/14 Check # 4961 (NSD) # 4962 (NSC)

ACCT. CASH

PAID CHECK

DUE MONEY ORDER

CREDIT CARD

FROM: Nov 2009 TO: Dec 2009

BY: Kaiser Storz II

2501

DATE _____ FROM _____

FOR RENT _____

FOR _____

ACCT. _____ PAID _____ DUE _____

CASH _____ CHECK _____ MONEY ORDER _____ CREDIT CARD _____

RECEIPT

DATE Jan. 19, 2010 No. 517918

FROM Rosella Quick \$ 150.00

One hundred Fifty and 00/100 DOLLARS

Bay #c2 (10x15)

FOR RENT MO# 20183168930 \$100.00 / #20178863815 \$50.00

ACCT.	300	00
PAID	150	00
DUE	150	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



JENNIFER L KAISER
408 N 11TH ST
PHILIPSBURG, PA 16866-1110



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.

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.



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: March 18, 2009
 Current Interest Rate: 7.990%
 Current Principal Balance: 4,035.27

*Estimated Payoff Amount Good
 For April 07, 2009 4,060.88

* 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: April 07, 2009

ACCOUNT ACTIVITY

Date	Description	Principal	Interest	Late Charge	Other	Amount
03/09/09	PAYMENT - THANK YOU	307.60	27.62	0.00	0.00	335.22
03/09/09	PRINCIPAL CREDIT	164.78	0.00	0.00	0.00	164.78

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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: 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.

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

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 1-888-805-0201, 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: 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

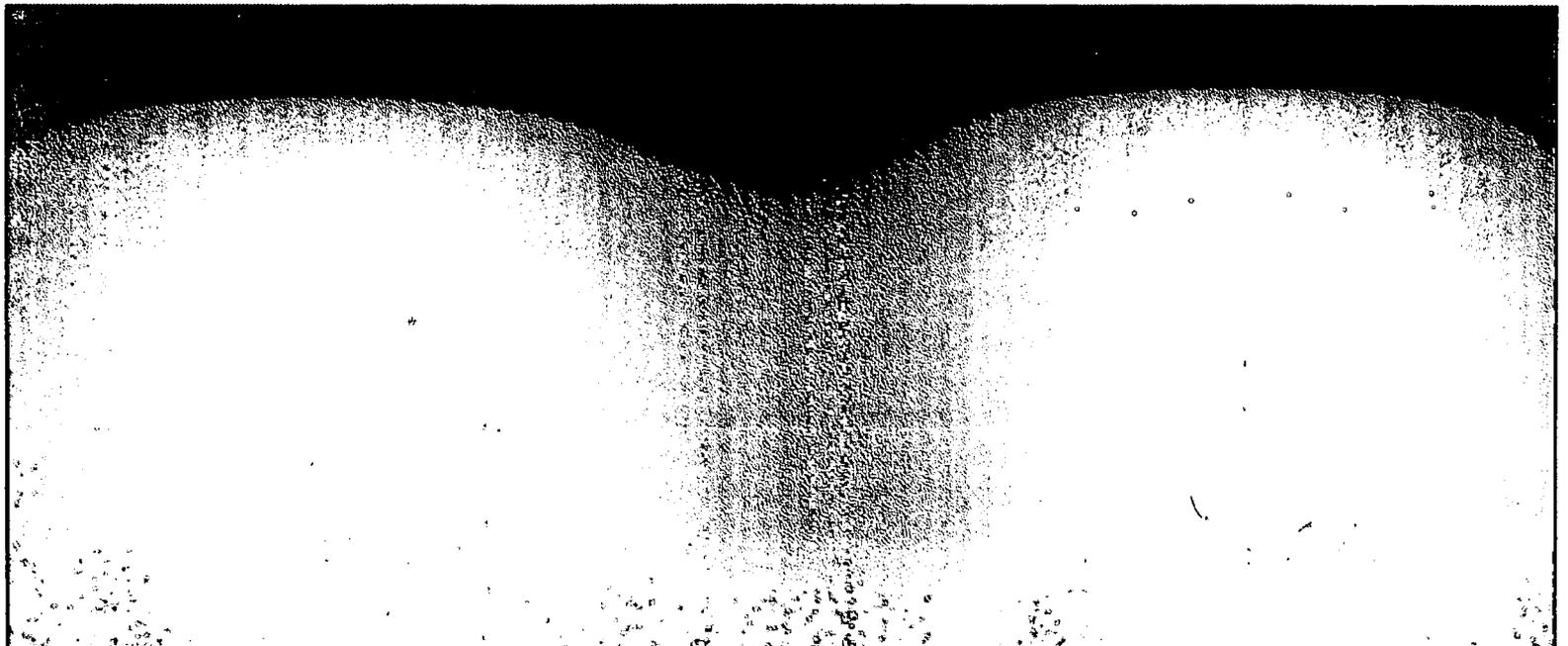
Date	Description	Principal	Interest	Late Charge	Other	Amount
04/18/09	LATE CHARGE ASSESSED	0.00	0.00	6.70	0.00	6.70
05/04/09	PAYMENT - THANK YOU	622.59	47.85	0.00	0.00	670.44

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 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.





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: June 17, 2009
Current Interest Rate: 7.990%
Current Principal Balance: 2,660.96

*Estimated Payoff Amount Good For July 07, 2009 2,682.23

* 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: July 07, 2009

ACCOUNT ACTIVITY

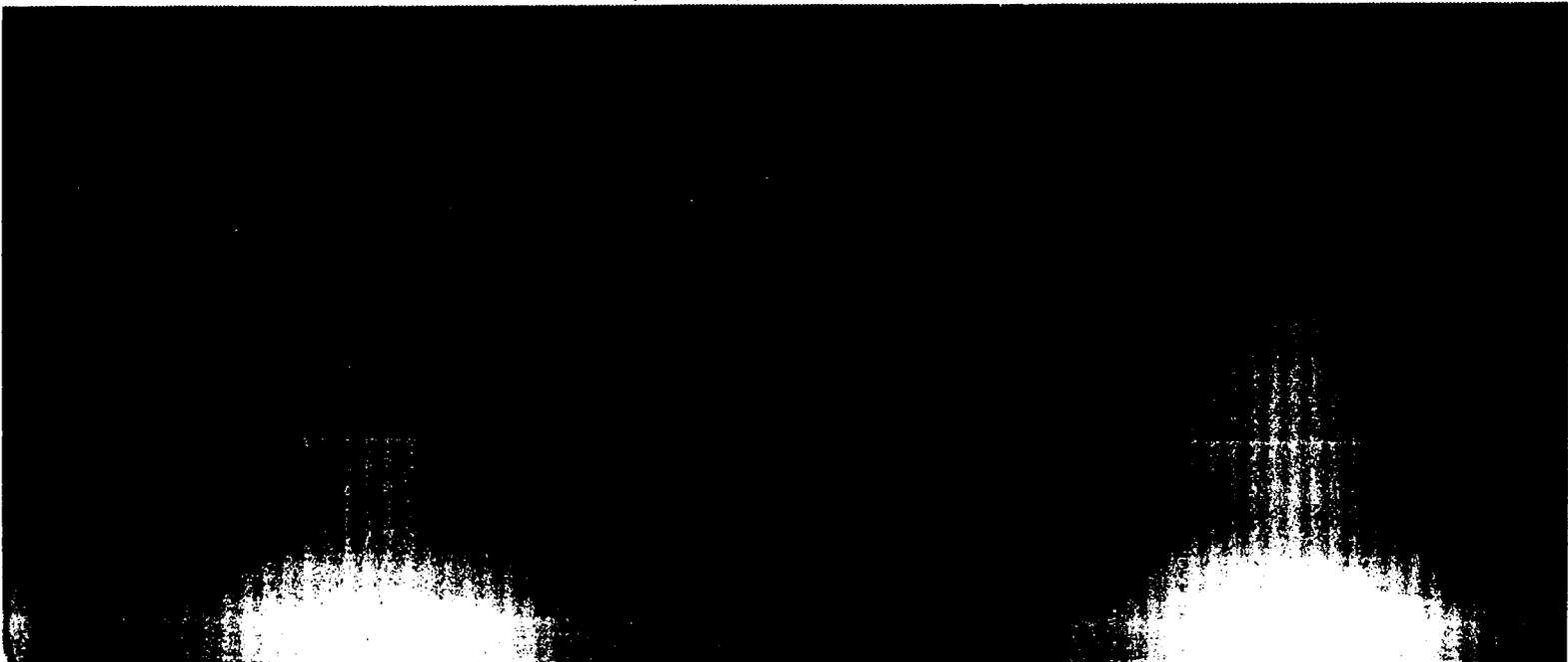
Date	Description	Principal	Interest	Late Charge	Other	Amount
06/12/09	PAYMENT - THANK YOU	316.50	25.42	0.00	0.00	341.92

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: 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

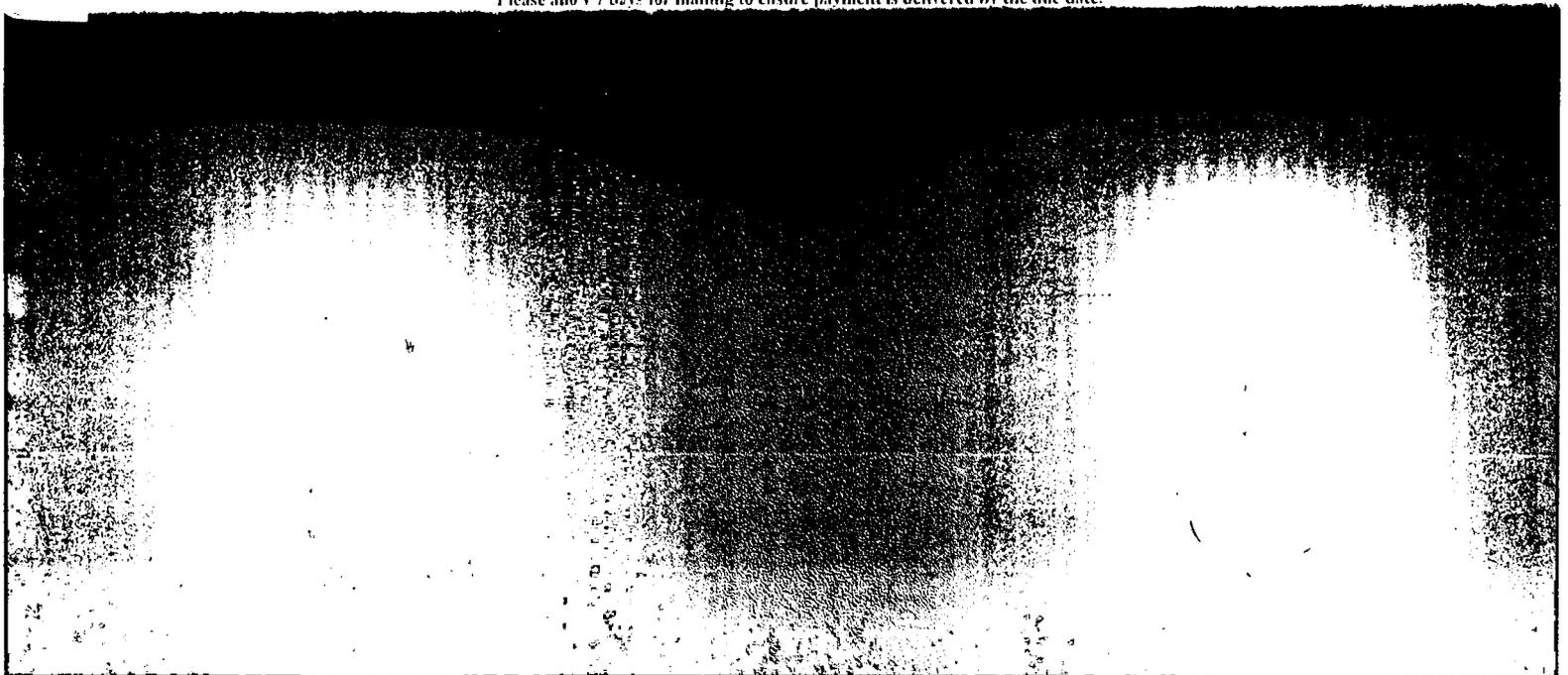
Date	Description	Principal	Interest	Late Charge	Other	Amount
07/13/09	PAYMENT - THANK YOU	317.16	18.06	0.00	0.00	335.22

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.





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

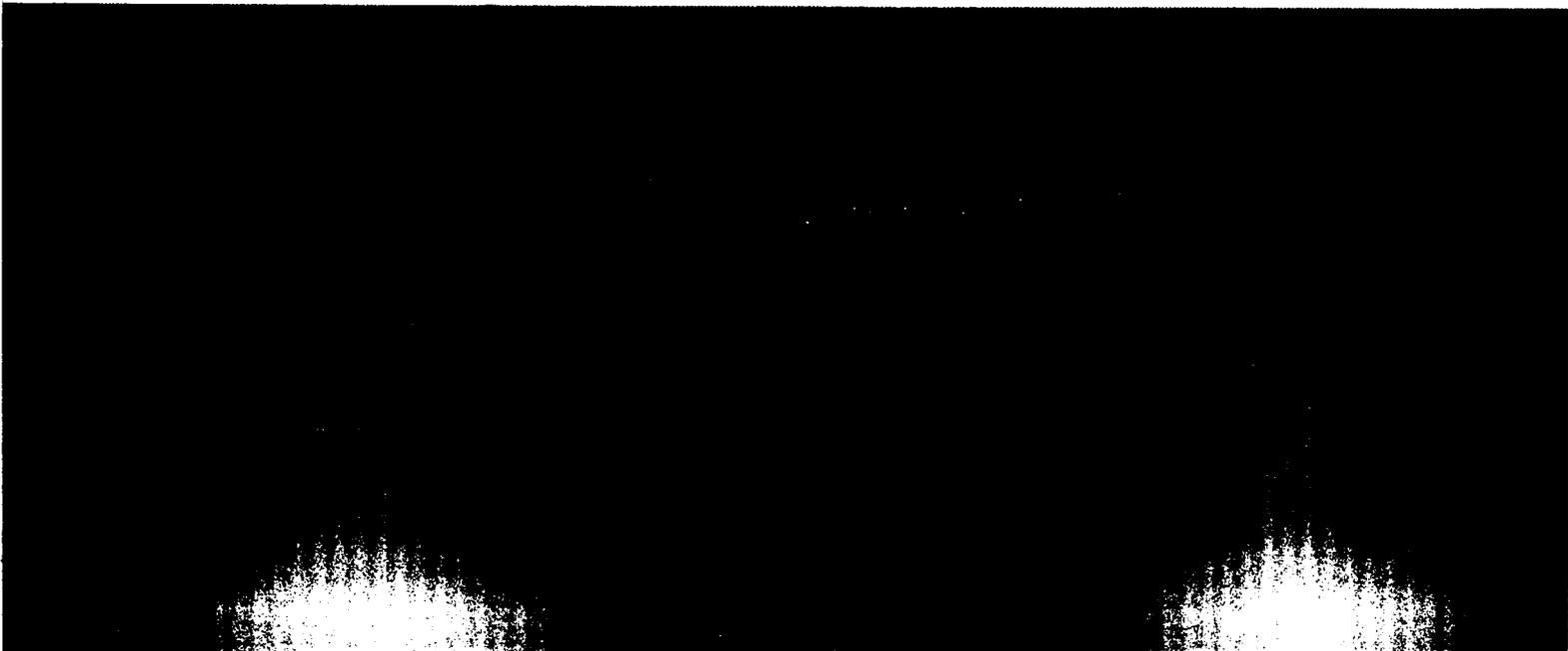
Due 341.79 9/07 | Payoff 1,699.04 As of 08/31/09

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.

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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: 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 SUMMARY

Regular 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

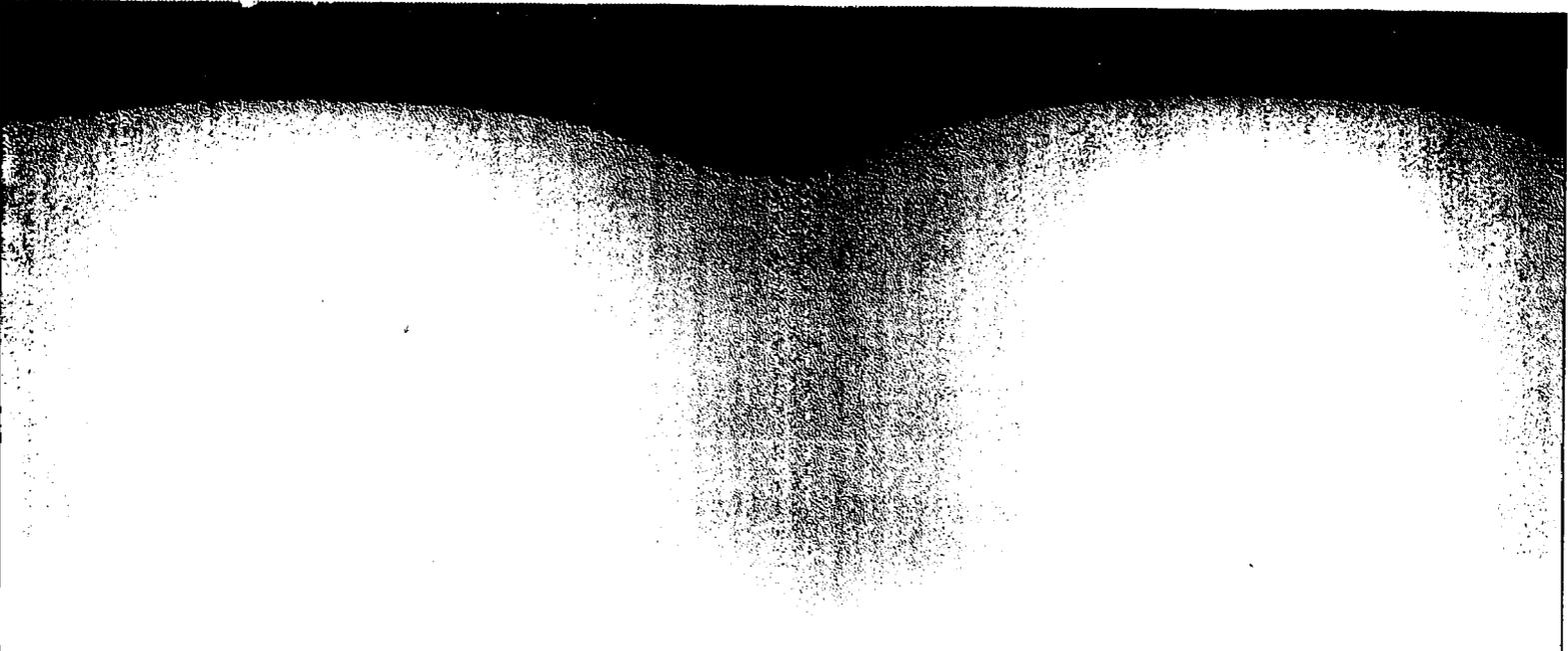
Date	Description	Principal	Interest	Late Charge	Other	Amount
10/13/09	PAYMENT - THANK YOU	326.55	8.67	0.00	0.00	335.22

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Please allow 7 days for mailing to ensure payment is delivered by the due date.





Citizens
 Automobile Finance
 P.O. Box 42302
 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

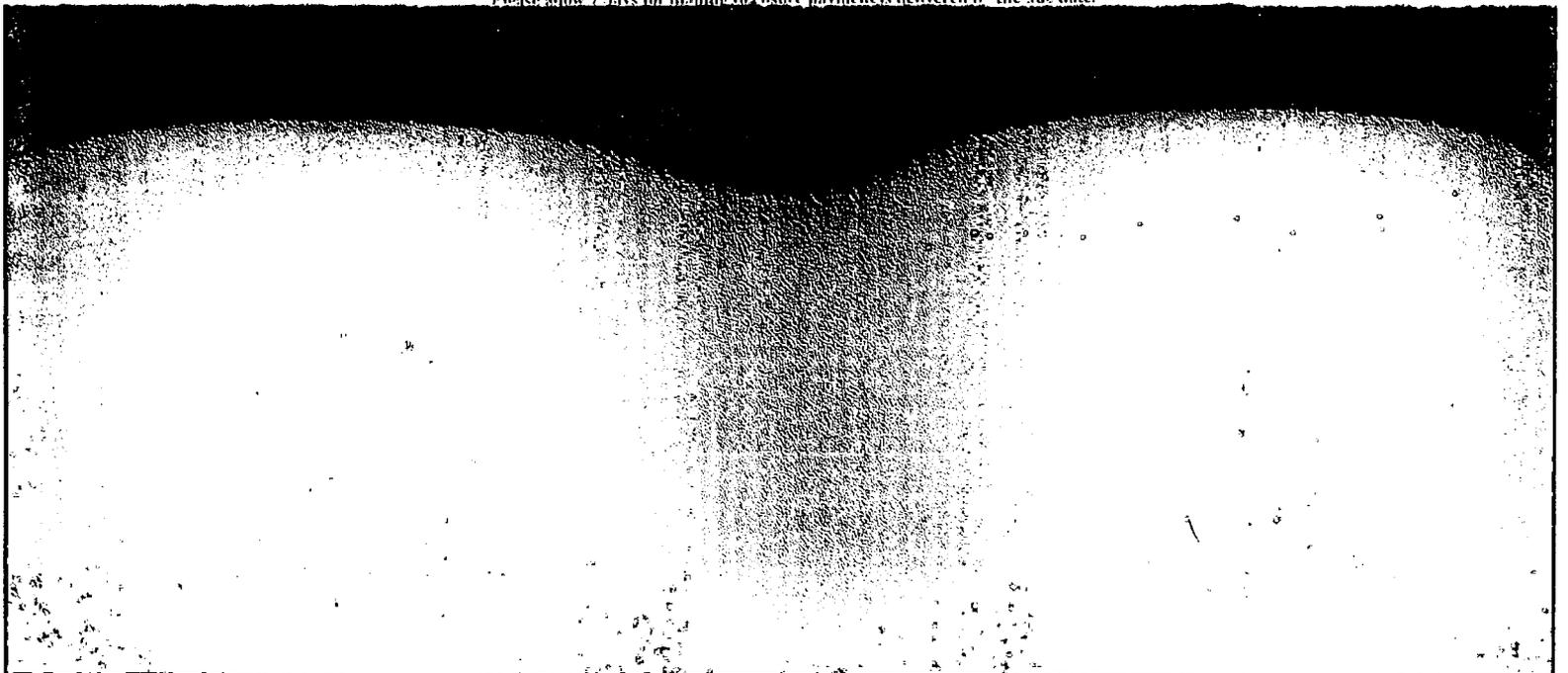
Date	Description	Principal	Interest	Late Charge	Other	Amount
11/06/09	PAYMENT - THANK YOU	316.48	5.47	13.27	0.00	335.22

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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: 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
Fast 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

Handwritten:
396.84
335.22

61.62

Principal	Interest	Late Charge	Other	Amount
329.05	6.17	0.00	0.00	335.22

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REFERENCE	DATE PERIOD	RELATIONSHIP	ACCOUNTING 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	006665	3	MONTHLY PAGER SERVICE		30.00
	06/01/2009 - 08/31/2009	814-649-5532	006665	3	Voice Mail Fee		6.00
	06/01/2009 - 08/31/2009	814-649-5532	006665	3	CUSTOM. VOICE PROMPTS		3.00
	06/01/2009 - 08/31/2009	814-649-5532	006665	3	PAGE INSURE		3.00

Billing Summary

ACCOUNT NO.	CLOSING DATE	BILL DUE BY
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

We Sincerely Appreciate Your Business

REFERENCE	DATE PERIOD	RELAT	ING INFORMATION	QTY	CHARGES	DITS	AMOUNT PAID
10024853	09/01/2009 - 11/30/2009	E14-649-9532	0006665	3	MONTHLY PAGER SERVICE		30.00
	09/01/2009 - 11/30/2009	E14-649-9532	0006665	3	Voice Mail Fee		6.00
	09/01/2009 - 11/30/2009	E14-649-9532	0006665	3	USTOM VCICE PROMPTS		3.00
	09/01/2009 - 11/30/2009	E14-649-9532	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

We Sincerely Appreciate Your Business

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	CLUSTOM VOICE FROMPTS	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

03/05/09

Invoice Number

1515639789

10022278 01 AT 0.346 **AUTO T5 0 3810 16866-111008 12 E PITT1012



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>	\$463.54
Payment - Thank You	-\$463.54
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

Total Charges Due by March 05, 2009 \$167.90

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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	04/05/09
	Invoice Number	1527453891

10022530 01 AT C.346 **AUTO T8 0 3610 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 WOCDS DR.
CRANBERRY TWP., PA 16066

Manage Your Account

My Verizon at www.verizonwireless.com

Account Number

Date Due

220819251-00001

05/05/09

Invoice Number

1538292429

10022409 01 AT 0.545 **AUTO T8 0 4010 16866-111008 1 3 E P171012



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	\$1.99
Verizon Wireless Surcharges and Other Charges & Credits	\$7.84
Taxes, Governmental Surcharges & Fees	\$7.55
Total Current Charges	\$134.14

Total Charges Due by May 05, 2009

\$134.14

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Pay on the Web

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1.800.922.0204 or *611 from your wireless



700 CRANBERRY WOODS DR.
CRANBERRY TWP., PA 15036

Manage Your Account	Account Number	Date Due
My Verizon at www.verizonwireless.com	220819251-00001	06/05/09
	Invoice Number	1549073261

10022317 01 AT 0.357 **ALTO T9 0 4110 16866-111608 12 E PIT 11612



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

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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
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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 15366-111006 13 E PITT1012



JENNIFER KAISER
408 N E LEVENTH ST
PHILADELPHIA, PA 19106-1110

Quick Bill Summary

May 11 - Jun 10

Previous Balance <i>(see back for details)</i>	\$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

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Pay from Wireless	Pay on the Web	Questions:
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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 <i>(see back for details)</i>	\$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	\$0.00
Data	\$0.00
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

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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

2208-19251-00001

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

Total Charges Due by September 05, 2009 \$131.96

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Pay from Wireless

Pay on the Web

Questions:

#PMT (#70)

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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

60010680 01 AT 0.357 **AUTO T3 0 4510 16866-111008 12 E FITT1012



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

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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

11/05/09

Invoice Number

6329054334

13021700 01 AT 0.357 **AUTO **9 0 4310 15366-11003 12 E PTT101:

|||||

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

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Questions:

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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 PITT1012



JENNIFER KAISER
408 N ELEVENTH ST
PHILIPSBURG PA 16855-1110

Quick Bill Summary

Oct 11 – Nov 10

Previous Balance <i>(see back for details)</i>	\$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 CRANBERRY WOODS DR.
CRANBERRY TWP., PA 16066

Manage Your Account

My Verizon at www.verizonwireless.com

Account Number

220819251-00001

Date Due

Past Due

Invoice Number

6355714369

1CO21ES0 01 AT 0.357 **AUTO T7 0 4810 16866-111020 1 E PITT1012



JENNIFER KAISER
420 N 11TH ST
PILIPSBLRG PA 16836-1110

Quick Bill Summary

Nov 11 - Dec 10

Previous Balance <i>(see back for details)</i>	\$132.42
Net 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, 2010	\$147.41

Total Amount Due \$279.83

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:

1-800-922-0204

My Verizon at www.verizonwireless.com

1-800-922-0204 or 1-800-922-0204 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

00291

Thank you HRENKO INS AGENCY, INC. (AA4332)
HRENKO INSURANCE AGENCY INC
P O BOX 29
PHILIPSBURG PA 16866

Received by: _____





100 Erie Ins. Pl. • Erie, PA 16530

0

March 6, 2009

Account Number: 01-33002

Billing Cycle: February through October
7 Installments Remaining: April 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.....	135.00
Total paid last month.....	-135.00
Amount Past Due.....	.00
This month's installment.....	123.00
Please Pay	123.00
Due Date.....	04-01-09

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	802.00	02-06	Coverage Change	-86.00	-101.00	02-20	620.00
			03-08	Service Charge	5.00			
Q260101182	Gen Liab	275.00				-34.00	02-20	241.00
ACCOUNT TOTALS		1077.00			-81.00	-135.00		861.00

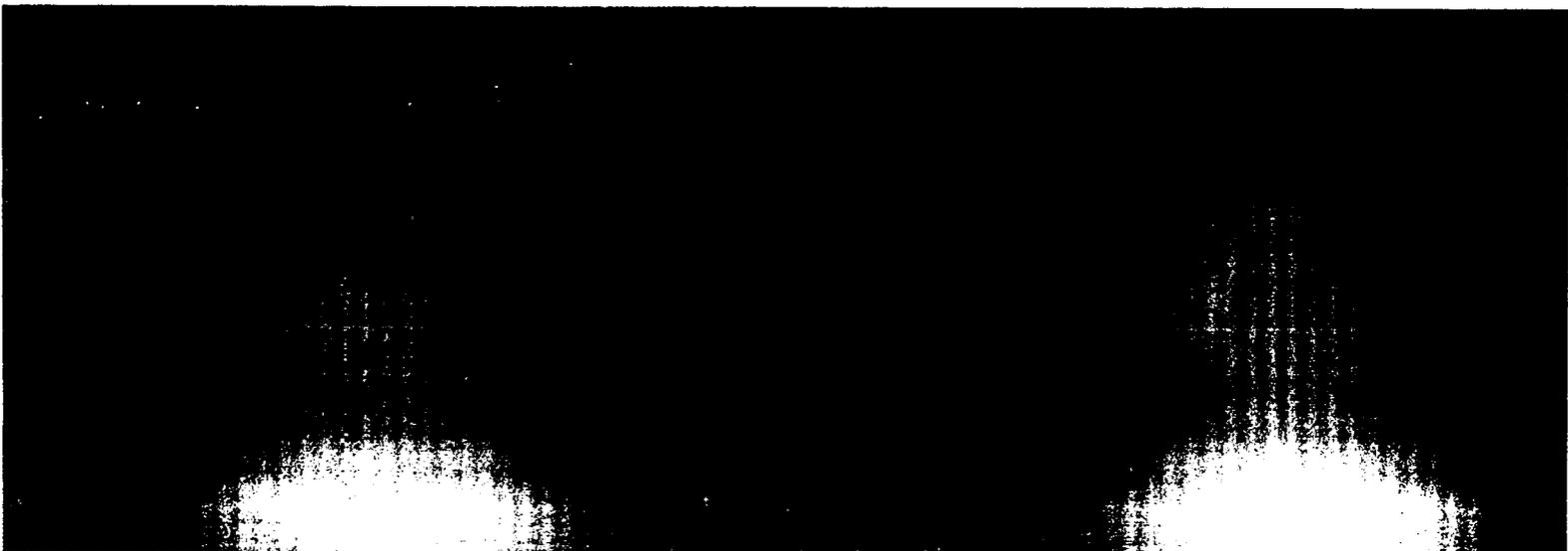
REGULAR MONTHLY INSTALLMENT IS CHANGED DUE TO A NEW COVERAGE CHANGE.

Transactions occurring in the last 10 days may not appear on this statement.

RETURNED PAYMENT FEES WILL BE ADDED TO YOUR ACCOUNT.

01564

KEEP THIS PORTION FOR YOUR RECORDS



April 10, 2009

Account Number: 01-33002

Billing Cycle: February through October

6 Installments Remaining: May 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.....	123.00
Total paid last month.....	-123.00
Amount Past Due.....	.00
This month's installment.....	124.00
Please Pay	124.00
Due Date.....	05-01-09

Please call your Agent listed below if you have any questions about your billing statement.

AA4332
 HRENKO INS AGENCY, INC.
 E14-342-5204

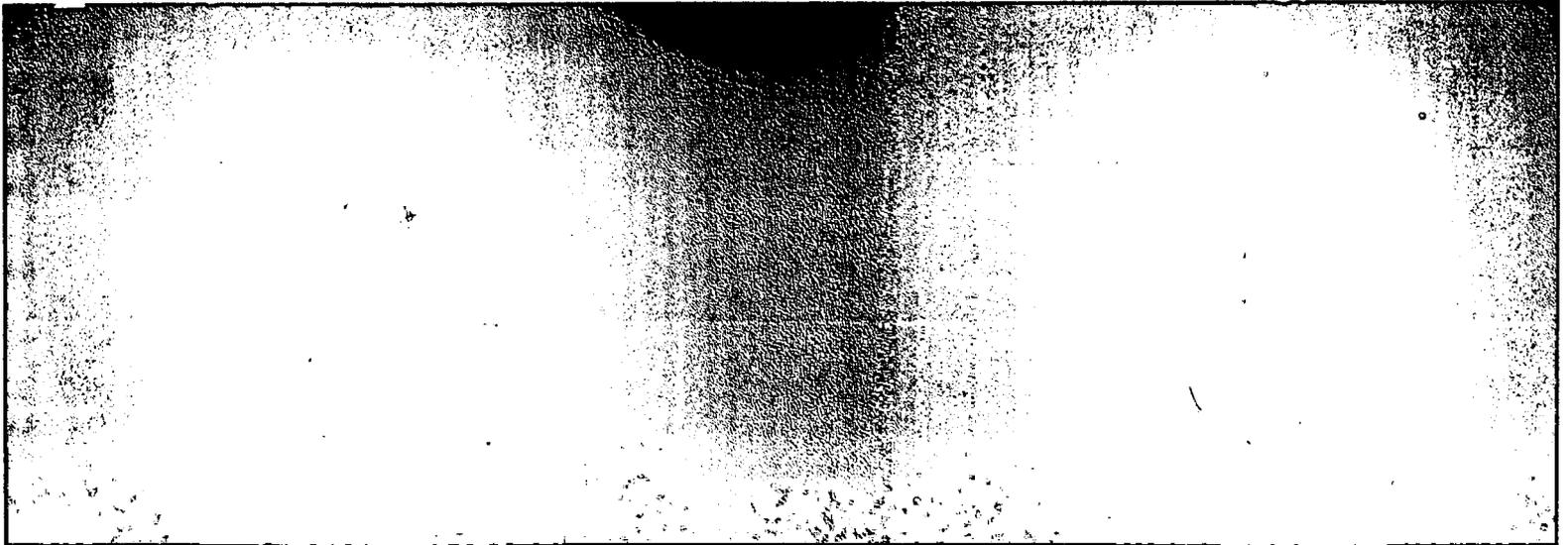
Policy Number	Type of Policy	Previous Balance	PREMIUM TRANSACTIONS SINCE LAST STATEMENT			Payments received since last statement		Current Balance
			Date	Transaction Type	Amount	Amount	Date	
Q020131183	Comm Auto	620.00	04-12	Service Charge	5.00	-89.00	03-27	536.00
Q260101182	Gen Liab	241.00				-34.00	03-27	207.00
ACCOUNT TOTALS		861.00			5.00	-123.00		743.00

Transactions occurring in the last 10 days may not appear on this statement.

RETURNED PAYMENT FEES WILL BE ADDED TO YOUR ACCOUNT.

01692

KEEP THIS PORTION FOR YOUR PECCRD3



May 8, 2009

Account Number: 01-33002

Billing Cycle: February through October
5 Installments Remaining: June 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

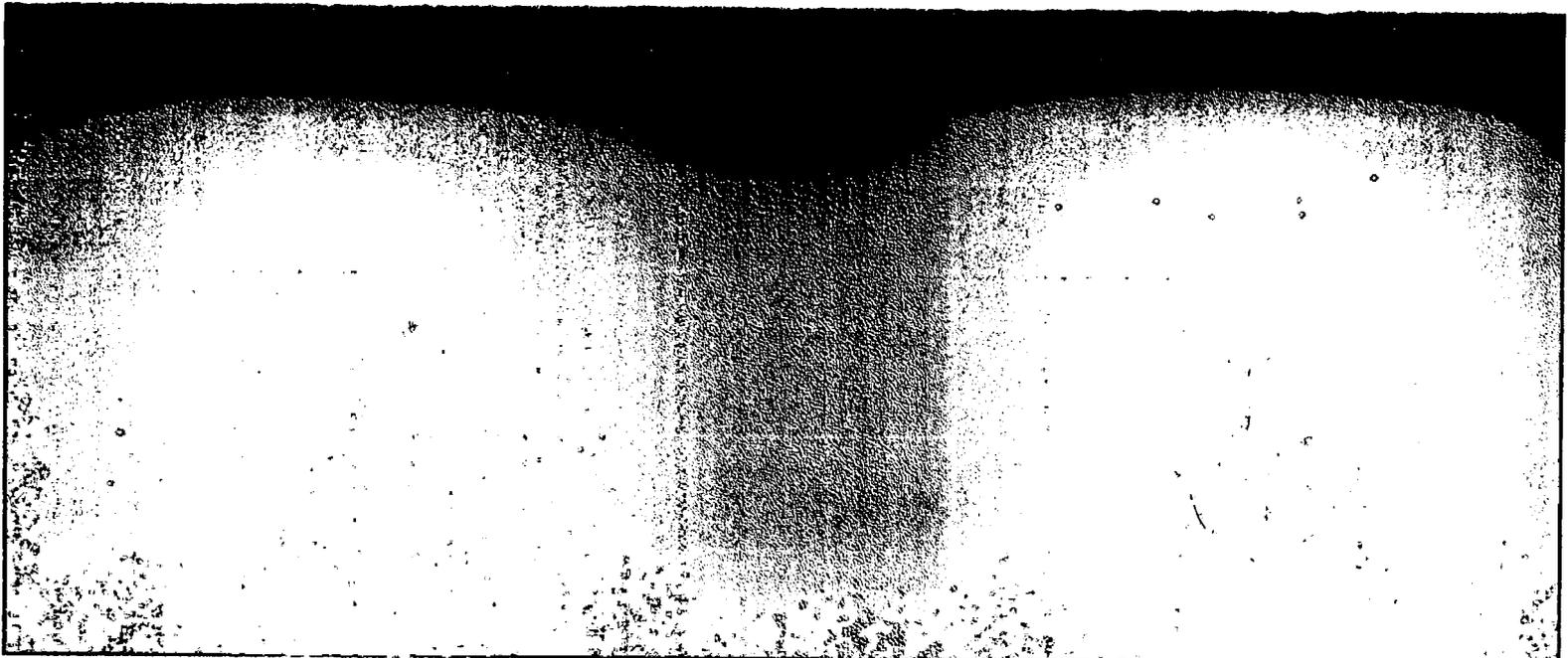
Billing Summary

Total due last month.....	124.00
Total paid last month.....	-124.00
Amount Past Due.....	.00
This month's installment.....	125.00
Please Pay	125.00
Due Date.....	06-01-09

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	536.00	05-10	Service Charge	5.00	-89.00	05-06	452.00
Q260101182	Gen Liab	207.00				-35.00	05-06	172.00
ACCOUNT TOTALS		743.00			5.00	-124.00		624.00



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 S
 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

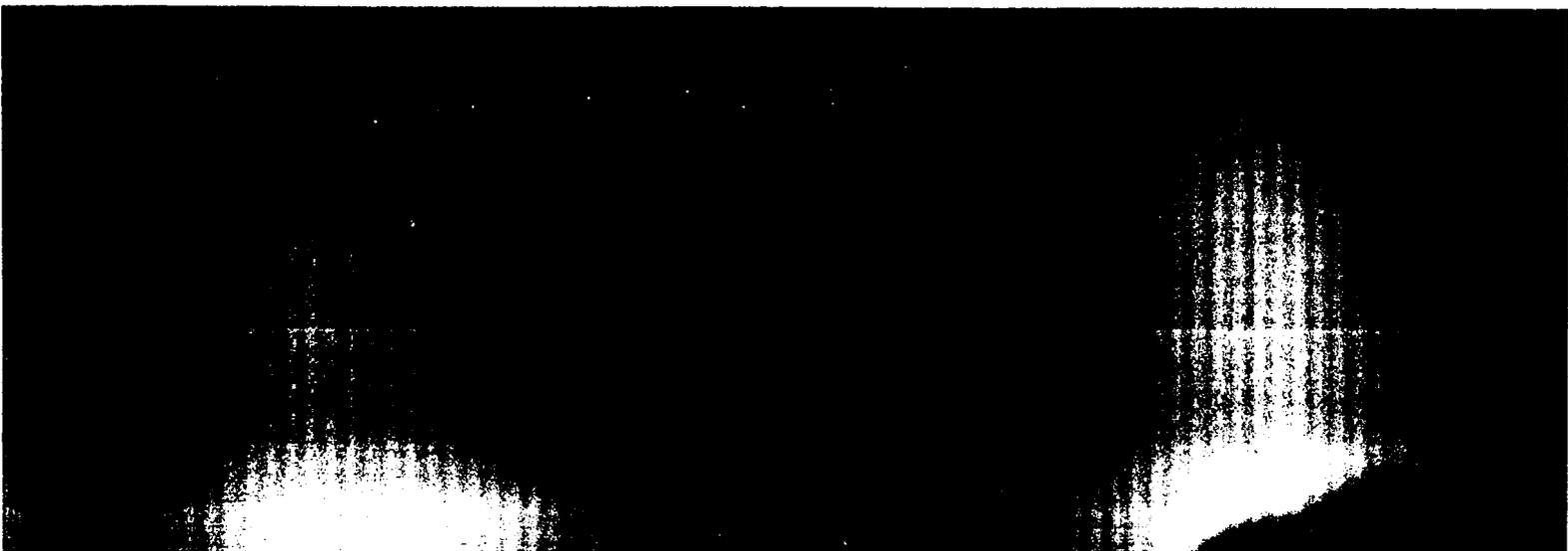
Policy Number	Type of Policy	Previous Balance	PREMIUM TRANSACTIONS SINCE LAST STATEMENT			Payments received since last statement		Current Balance
			Date	Transaction Type	Amount	Amount	Date	
Q020131183	Comm Auto	452.00	06-07	Service Charge	5.00	-91.00	05-20	366.00
Q260101182	Gen Liab	172.00				-34.00	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.

01736

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

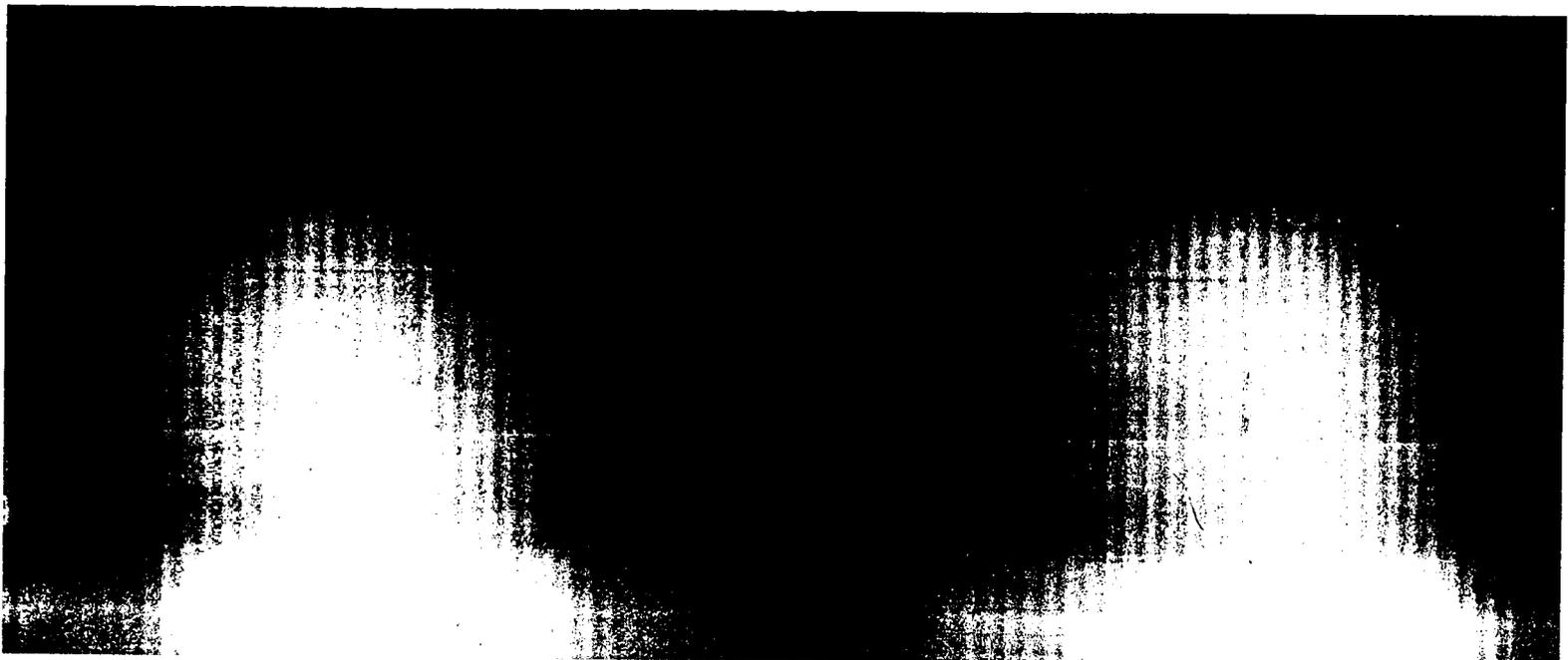
Billing Summary

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	Ccmm Auto	279.00	08-09	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

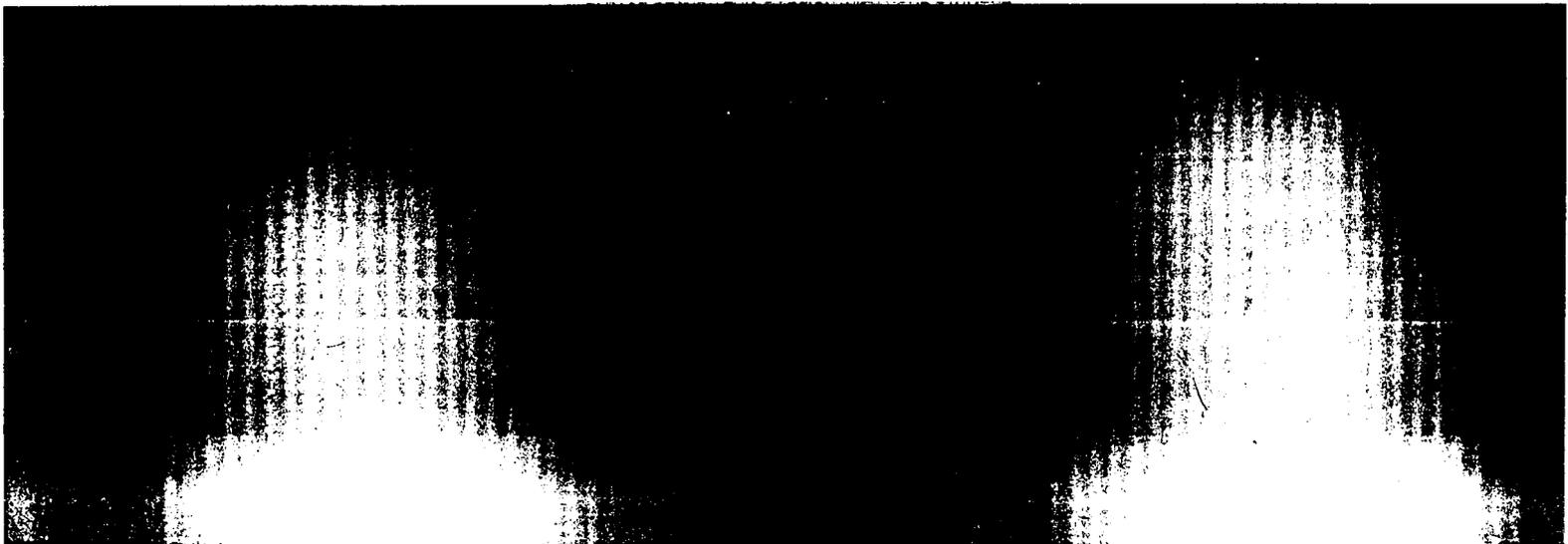
Total due last month.....	130.00
Total paid last month.....	-130.00
Amount Past Due00
This month's installment.....	135.00
Please Pay	135.00
Due Date.....	10-01-09

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

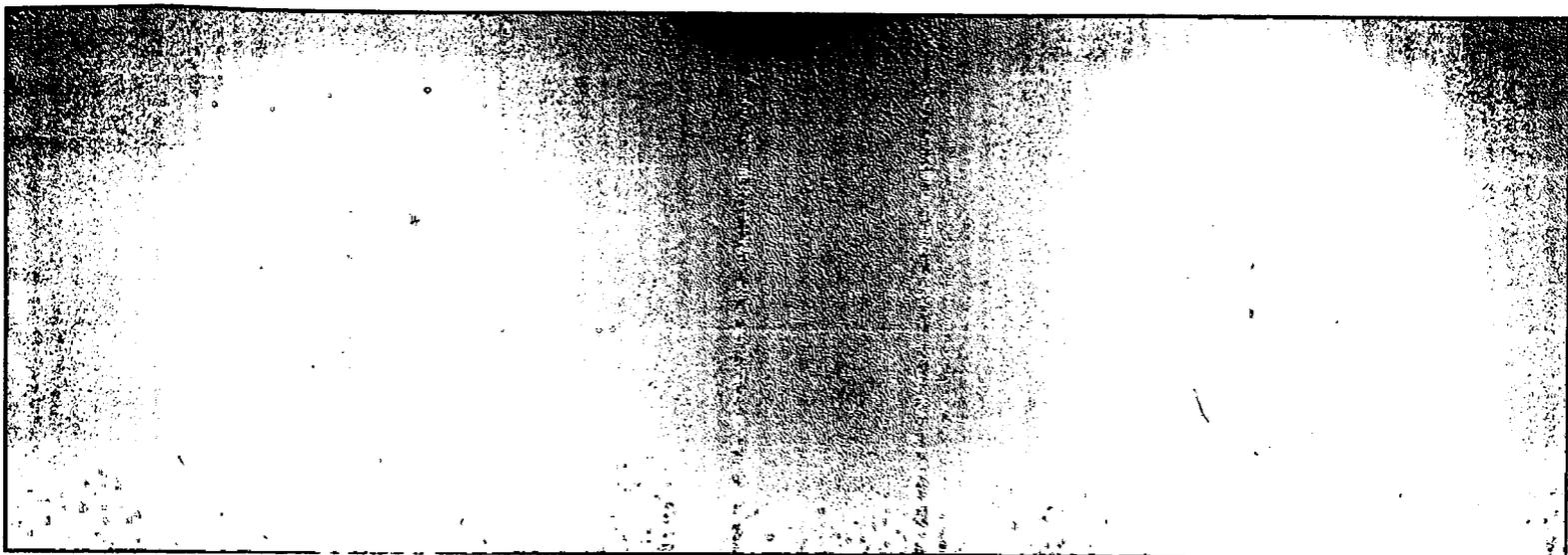
Transactions occurring in the last 10 days may not appear on this statement.
 RETURNED PAYMENT FEES WILL BE ADDED TO YOUR ACCOUNT.
 KEEP THIS PORTION FOR YOUR RECORDS





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
	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
	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
	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
	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
	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
	JAN 22	136900	136905	MAR 7	137819	137838
	JAN 30	136905	136924	MAR 7	137838	137882
(L)	JAN 30	136924	136940	MAR 7	137882	137909
	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
	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
	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
	Feb 13	137087	137091	MAR 9	138100	138150
	Feb 16	137091	137132	MAR 9	138150	138230
(L)	Feb 16	137132	137211	MAR 9	138230	138270
	Feb 16	137211	137251	MAR 10	138270	138289
	Feb 14	137251	137268	MAR 10	138289	138305
(L)	Feb 16	137268	137288	MAR 10	138305	138309
	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
	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

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	
MAR 16	138604	138609	21 MAR 09	140428	140428
MAR 16	138609	138620	03 JUNE	140428	140447
MAR 22	138620	138645	3 JUNE	140447	140505
MAR 22	138645	138675	3 JUNE	140505	140540
MAR 22	138675	138679	9 JUNE	140540	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
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
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
APR 15	138995	139015	15 JUNE	140882	140886
APR 15	139015	139026	25 JUNE	140886	140923
APR 16	139026	139045	25 JUNE	140923	140962
APR 16	139045	139103	25 JUNE	140962	140967
APR 16	139103	139143	28 JUNE	140967	141007
APR 16	139143	139183	28 JUNE	141007	141072
APR 16	139183	139227	28 JUNE	141072	141082
APR 16	139227	139231	28 JUNE	141082	141147
APR 23	139231	139267	28 JUNE	141147	141202
APR 23	139267	139307	28 JUNE	141202	141321
APR 23	139307	139313	3 JULY	141321	141340
MAY 2	139313	139353	3 JULY	141340	141359
MAY 2	139353	139432	3 JULY	141359	141370
MAY 2	139432	139472	17 JULY	141370	141389
13 MAY	139472	139510	17 JULY	141389	141405
13 MAY	139510	139553	17 JULY	141405	141410
13 MAY	139553	139557	19 JULY	141410	141429
MAY 15	139557	139769	19 JULY	141429	141487
MAY 15	139769	139972	19 JULY	141487	141527
MAY 15	139972	139988	19 JULY	141527	
MAY 16	139988	140029			
MAY 16	140029	140233			
MAY 16	140233	140419			
MAY 20	140419	140423			

2009 OLDSMOBILE SILHOUETTE

[Handwritten signature]

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
July 30	141545	141561	26 Sept	143360	143366
July 30	141561	141566	5 Oct	143366	143487
Aug 1	141566	141606	5 Oct	143487	143643
Aug 1	141606	141671	5 Oct	143643	143684
Aug 1	141671	141690	10 Oct	143684	143701
Aug 1	141690	141755	10 Oct	143701	143744
Aug 1	141755	141795	10 Oct	143744	143770
Aug 4	141795	141802	18 Oct	143770	143788
Aug 5	141802	141821	18 Oct	143788	143832
Aug 5	141821	141840	18 Oct	143832	143857
Aug 5	141840	141851	20 Oct	143857	143898
Aug 7	141851	141856	20 Oct	143898	143962
Aug 16	141856	141872	20 Oct	143962	143988
Aug 16	141872	141931	21 Oct	143988	144013
Aug 16	141931	141972	21 Oct	144013	144078
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
Aug 25	142016	142074	24 Oct	144154	144182
Aug 25	142074	142114	25 Oct	144182	144207
Aug 25	142114	142156	25 Oct	144207	144213
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
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
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
12 SEPT	142899	142924	11 NOV	144608	144648
13 SEPT	142924	142951	17 NOV	144648	144694
13 SEPT	142951	143018	17 NOV	144694	144773
13 SEPT	143018	143061	17 NOV	144773	144798
18 SEPT	143061	143080	17 NOV	144798	144823
18 SEPT	143080	143138	17 NOV	144823	144902
18 SEPT	143138	143178	17 NOV	144902	144941
18 SEPT	143178	143219	25 NOV	144941	144956
18 SEPT	143219	143282	25 NOV	144956	144964
18 SEPT	143282	143306	25 NOV	144964	144979
26 SEPT	143306	143331	25 NOV	144979	

2009 OLDSMOBILE SILHOUETTE

Direct Inquiries to:
800 492-3221



MEMBER FDIC

CNB Bank
25 Irwin Dr
Philipsburg PA 16866

Return Service Requested

CTYN

010366

February 28, 2009

5

Page 1 of 4

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



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



Statement of Accounts

0002437754

Jennifer L Kaiser

March 31, 2009

Page 2 of 4

Positively Free Small Business 0002437754

Low balance \$165.86
 Average balance \$642.89

					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			

Direct Inquiries to:
800-492-3227



CNB Bank
25 Irwin Dr
Philipsburg PA 16866

MEMBER FDIC

Return Service Requested

003800

April 30, 2009

6

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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



If you need more information about a transfer listed on your statement

refer to the statement on which the problem or error appeared.

Explain as clearly as you can why you believe it is an error or why

If you do not have 10 business days to do this, we will credit your account
for the amount in error and the time it takes us to complete our investigation.

YOUR PRIVACY CHOICES

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
analyze your information that we obtain in connection with providing a financial
service. You may request information regarding your account balance, payment history

and other

We do not share your information with other financial customers to anyone, except as permitted by law. We
may share your information with our marketing services on our behalf or to other finan-

cial institutions. Employees who need to know that information to provide prod-
ucts and services to you are trained in procedures that comply with federal standards to guard your

information. We will continue to adhere to the privacy policies and practices described

MONTHLY 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 report any differences to the bank,
we will investigate and correct any errors.

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



Direct Inquiries to:
800 492-3221



MEMBER FDIC

CNB Bank
25 Irwin Dr
Philipsburg PA 16866

CTYN

Return Service Requested

May 31, 2009

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Page 1 of 4

010410 0.7686 AV 0.335 TR00040

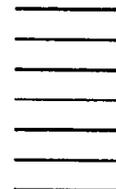
JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

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.



010410



CTYN-003-010410-001-002-090601 010410 S04
16866111008

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
04-30	Beginning balance			\$276.00
05-04	Deposit 940.00			1,216.00
05-05	#Electronified Check VZ WIRELESS ARC ARC 090505 1184		-134.14	1,081.86
05-06	Check 1186		-670.44	411.42
05-07	#Electronified Check ERIE INSURANCE 1256038677 090507 1185		-124.00	287.42
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

Number	Date	Amount
1184	05-05	134.14
1185	05-07	124.00
1186	05-06	670.44
1187	05-22	17.60
1188	05-22	125.00
1189	05-26	91.67

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			

Direct Inquiries to:
800 492-3221



MEMBER FDIC

CNB Bank
25 Irwin Dr
Philipsburg, PA 16866

Return Service Requested

CTYN

June 30, 2009

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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.

003674



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 MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 1008 ALTOONA PA 4187040000017288 06-25-09		-2.62	944.22			
06-26	#POS Purchase MERCHANT PURCHASE TERMINAL 434129 CRYSTAL CLEAN AUTO SPA PHILLIPSB PA 4187040000017288 06-25-09		-9.00	935.22			
06-29	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0646 PHILIPSBU PA 4187040000017288 06-28-09		-35.00	900.22			
06-30	Ending totals	1,298.00	-789.82	\$900.22			

NAME	CD11305778C
ACCOUNT NO.	500
DATE	
CNS BANK	
AMOUNT	\$ 366.00

06/05/2009 \$366.00

NAME	CD11305778C
ACCOUNT NO.	500
DATE	06/10/2009
CNS BANK	
AMOUNT	\$ 126.00

06/10/2009 \$126.00

NAME	CD11305778C
ACCOUNT NO.	500
DATE	06/15/2009
CNS BANK	
AMOUNT	\$ 806.00

06/15/2009 \$806.00

NAME	CD11305778C
ACCOUNT NO.	5190
DATE	06/18/2009
CNS BANK	
AMOUNT	\$ 44.52

#1190 06/18/2009 \$44.52

NAME	CD11305778C
ACCOUNT NO.	1191
DATE	06/15/2009
CNS BANK	
AMOUNT	\$ 341.92

#1191 06/15/2009 \$341.92



CTYN-003-003674-001-002-090702 003674 S04



Direct Inquiries to:
800 492-3221



MEMBER FDIC

CNB Bank
25 Irwin Dr
Philipsburg PA 16866

Return Service Requested

CTYN

003730

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

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	CASH	
ACCOUNT		
DATE		
CNS BANK		222.00
⑆011306278⑆		600

07/08/2009 \$252.00

NAME	CASH	
ACCOUNT		
DATE		
CNS BANK		446.00
⑆011306278⑆		600

07/30/2009 \$446.00

NAME	CASH	1194
ACCOUNT		
DATE		
CNS BANK		335.22
⑆011306278⑆		600

July 15, 2009
Charges Automobile from \$15,255.00
then released this for ad

#1194 07/15/2009 \$335.22



Direct Inquiries to:
800-492-3224



MEMBER FDIC

ENB Bank
25 Irwin Dr
Phillipsburg PA 16866

Return Service Requested

CTYN

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

010166



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 PHILIPSBU 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 504



NAME: Levy Transport 1100
 A/C NO: 21377-54 500.00
 DATE: 11 500.00
 CENS BANK
 1031106170C 600

08/03/2009 \$500.00

NAME: 1100
 A/C NO: 200.00
 DATE: 18 200.00
 CENS BANK
 1031106170C 600

08/18/2009 \$200.00

NAME: Levy Transport 1197
 A/C NO: 21377-54 178.61
 DATE: August 1, 2009
 P. 1. Distancia Auto Paga \$ 178.61
 P. 2. Arrendado Seguro y Seguro de Vida \$ 0.00
 CENS BANK
 1031106170C 2-4-1175-10 1197

#1197 08/10/2009 \$178.61

NAME: Levy Transport 1198
 A/C NO: 21377-54 663.74
 DATE: August 20, 2009
 P. 1. Utilidad Operativa Franca, Inc \$ 663.74
 P. 2. Arrendado Seguro y Seguro de Vida \$ 0.00
 CENS BANK
 1031106170C 2-4-1175-10 1198

#1198 08/20/2009 \$663.74

Direct Inquiries to:
800 492-3222



MEMBER FDIC

CNB Bank
25 Irwin Dr
Philipsburg PA 16866
Return Service Requested

CTYN

003708

September 30, 2009

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003708 0.7686 AV 0.335 TR00017

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

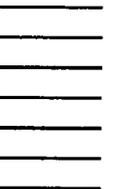


Statement of Accounts
2437754

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 000G 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			
	4187040000017288 09-01-09			
09-08	#POS Purchase		-8.05	461.45
	MERCHANT PURCHASE TERMINAL 476197		✓	
	LOVE S 524 MIFFLINVI PA			
	4187040000017288 09-01-09			
09-08	#POS Purchase		-79.17	382.28
	MERCHANT PURCHASE TERMINAL 416407		✓	
	FRED DIEHLS OF01940022 PHILIPSBU PA			
	4187040000017288 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 000C 0646 PHILIPSBU PA			
	4187040000017288 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	CASH
10011002780C	
10011002780C	100.00
10011002780C	600

09/02/2009 \$100.00

NAME	CASH
10011006270C	
10011006270C	994.00
10011006270C	600

09/11/2009 \$994.00

NAME	CASH
10011006270C	
10011006270C	604.00
10011006270C	600

09/18/2009 \$604.00

NAME	CASH
1200	
1200	44.52
1200	1200

#1200 09/17/2009 \$44.52

NAME	CASH
1201	
1201	341.79
1201	1201

#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	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	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	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			

NAME	DATE
ADDRESS	AMOUNT
CITY	
STATE	
ZIP	
CNS	\$ 179.00
CD 11 376 2780	600

10/09/2009 \$128.00

NAME	DATE
ADDRESS	AMOUNT
CITY	
STATE	
ZIP	
CNS	\$ 282.00
CD 11 308 7700	600

10/14/2009 \$352.00

NAME	DATE
ADDRESS	AMOUNT
CITY	
STATE	
ZIP	
CNS	\$ 100.00
CD 11 106 2780	600

10/26/2009 \$100.00

NAME	DATE
ADDRESS	AMOUNT
CITY	
STATE	
ZIP	
CNS	\$ 335.22
CD 11 308 7700	600

#1205 10/15/2009 \$335.22

NAME	DATE
ADDRESS	AMOUNT
CITY	
STATE	
ZIP	
CNS	\$ 490.20
CD 11 308 7700	600

#1206 10/08/2009 \$490.20



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

010431

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.

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

5 Enclosures



Date	Description	Additions	Subtractions	Balance
10-31	Beginning balance			\$708.10
11-02	Deposit 666.00	666.00	✓	1,374.10
11-04	Deposit 100.00	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 MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0648 PHILIPSBU PA 4187040000017288 11-11-09		-45.00 ✓	959.47
11-18	#POS Purchase MERCHANT PURCHASE TERMINAL 416407 SHEETZ 0000 0638 DUBOIS PA 4187040000017288 11-17-09		-53.26 ✓	906.21
11-30	Deposit 100.00	100.00	✓	1,006.21
11-30	Ending totals	866.00	-567.89	\$1,006.21

Number	Date	Amount
1207	11-09	335.22
1208	11-09	134.41

CTYN-002-010431-001-001-091201 010431 S06



NAME	DATE	AMOUNT
ADAMS INC. L.S. 11/02/09	11/02/09	666.00
242754		
CNS BANK		
12011027780 600		

11/02/2009 \$666.00

NAME	DATE	AMOUNT
Wm. Sec. Transport	11/04/09	100.00
ADAMS INC. L.S. 11/04/09	11/04/09	
CNS BANK		
12011047780 600		

11/04/2009 \$100.00

NAME	DATE	AMOUNT
ADAMS INC. L.S. 11/30/09	11/30/09	100.00
242754		
CNS BANK		
12011067780 600		

11/30/2009 \$100.00

NAME	DATE	AMOUNT
ADAMS INC. L.S. 11/09/09	11/09/09	335.22
242754		
CNS BANK		
12071097780 1207		

#1207 11/09/2009 \$335.22

NAME	DATE	AMOUNT
ADAMS INC. L.S. 11/09/09	11/09/09	134.41
242754		
CNS BANK		
12081097780 1208		

#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

004022



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 4187040000017268 12-20-09		-39.00	539.56
12-22	#POS Purchase MERCHANT PURCHASE TERMINAL 471705 NAPA AUTO PARTS PHILIPSBPHILIPSBU PA 4187040000017268 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. & K. K. 1234 Main Street Anytown, PA 12345	L. Cash 100.00 100.00
--	-----------------------------

12/15/2009 \$100.00

J. J. & K. K. 1234 Main Street Anytown, PA 12345	1209 Dr. 32.9 \$ 335.92 335.92 335.92
--	---

#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

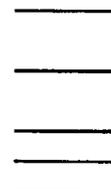
JENNIFER L KAISER
D/B/A KAISER TRANSPORT
408 N 11TH ST
PHILIPSBURG PA 16866-1110

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

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

NAME: _____
 ADDRESS: _____
 CITY: _____
 STATE: _____
 ZIP: _____
 PHONE: _____
 FAX: _____
 E-MAIL: _____
 CNBS BANK
 \$ 100.00
 CD11306278C 600

01/04/2010 \$100.00

NAME: _____
 ADDRESS: _____
 CITY: _____
 STATE: _____
 ZIP: _____
 PHONE: _____
 FAX: _____
 E-MAIL: _____
 CNBS BANK
 \$ 1,586.00
 CD11306278C 600

01/06/2010 \$1,586.00

NAME: _____
 ADDRESS: _____
 CITY: _____
 STATE: _____
 ZIP: _____
 PHONE: _____
 FAX: _____
 E-MAIL: _____
 CNBS BANK
 \$ 224.00
 CD11306278C 600

01/19/2010 \$336.00

NAME: _____
 ADDRESS: _____
 CITY: _____
 STATE: _____
 ZIP: _____
 PHONE: _____
 FAX: _____
 E-MAIL: _____
 CNBS BANK
 \$ 711.33
 CD11306278C 2-4-1775-46 600

01/21/2010 \$711.33

NAME: _____
 ADDRESS: _____
 CITY: _____
 STATE: _____
 ZIP: _____
 PHONE: _____
 FAX: _____
 E-MAIL: _____
 CNBS BANK
 \$ 44.52
 CD11306278C 2-4-1775-46 600

#1211 01/04/2010 \$44.52

NAME: _____
 ADDRESS: _____
 CITY: _____
 STATE: _____
 ZIP: _____
 PHONE: _____
 FAX: _____
 E-MAIL: _____
 CNBS BANK
 \$ 396.84
 CD11306278C 2-4-1775-46 600

#1213 01/04/2010 \$396.84

NAME: _____
 ADDRESS: _____
 CITY: _____
 STATE: _____
 ZIP: _____
 PHONE: _____
 FAX: _____
 E-MAIL: _____
 CNBS BANK
 \$ 1,444.40
 CD11306278C 2-4-1775-46 600

#1214 01/12/2010 \$1,444.40

NAME: _____
 ADDRESS: _____
 CITY: _____
 STATE: _____
 ZIP: _____
 PHONE: _____
 FAX: _____
 E-MAIL: _____
 CNBS BANK
 \$ 229.60
 CD11306278C 2-4-1775-46 600

#1215 01/25/2010 \$229.60

NAME: _____
 ADDRESS: _____
 CITY: _____
 STATE: _____
 ZIP: _____
 PHONE: _____
 FAX: _____
 E-MAIL: _____
 CNBS BANK
 \$ 903.00
 CD11306278C 2-4-1775-46 600

#1216 01/25/2010 \$903.00

Direct Inquiries to:
800 492-3222



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

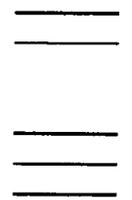
Statement of Accounts
2437754

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.



010317



CTYN-002-010317-001-001-100301 010317 S04
16866111008

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



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 Stranger + Weaver and Johnson's Funeral Service

ADDRESS

Deer Creek Road, P.O. Box 238

Morrisdale PA 16858 (814) 342-2221

IN ACCOUNT WITH

Kaiser Transport (814) 649-9533

408 N 14th St Philipsburg PA 16866

Mileage Unit Price Total

1	Flat Fee (0-30 Miles)	100.00	100.00
	- Clearfield Hospital		
	- James Hanslovay		
	(05 FEBRUARY 2009)		

Check # 22721

TOTAL 100.00

193663

STATEMENT

DATE

FEBRUARY 2009

TERMS

TO

Birger A Freeberg Funeral Home, Inc.

ADDRESS

200 David St

Holtzdale PA 17651

(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

- Altoona Hospital

- George Chincharick

(17 February 2009)

Check #5076

TOTAL

100 00

193664

STATEMENT

DATE

FEBRUARY 2009

TERMS

1/3

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 Philipsburg PA 16866

Milenge Unit Price Total

1	Flat Fee (0-30 Miles)	100.00	100.00
	- Windy Hill Village		
	- Barbara Franek		
	(19 February 2009)		

Check # 22721

TOTAL 100.00

193669

STATEMENT

DATE MARCH 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 Philipsburg PA 16866

Mileage 1 Unit Price 100 Total 100

Flat Fee (0-30 Miles) 100 00 100 00

- Mt Laurel

- Paul Copanas

(06 March 2009)

Check # 22859

Total 100 00

193674

STATEMENT

DATE March 2009

TERMS —

TO KRUISE FUNERAL Home

ADDRESS PO Box 587

Madera PA 14861 (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

(29 March 2009)

50

TOTAL LOADED MILES

2 00

100 00

- Total Mileage is 80

Check # 062052

TOTAL

200 00

193686

STATEMENT

DATE APRIL 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
---	-----------------------	-----	----	-----	----

- Clearfield Hospital
- Leroy Smeal
(April 15, 2009)

CHECK # 5174

TOTAL			100	00
-------	--	--	-----	----

193694

STATEMENT

DATE JUNE 2009

TERMS —

TO Clearfield County Coroner

ADDRESS 906 EDWARD ST

Phillipsburg PA 16866

IN ACCOUNT WITH KAISER TRANSPORT (814) 649-9532

403 N. 11th St Phillipsburg PA 16866

Mileage Unit Price Total

1	FIAT FEE (0-30 miles) - Clearfield Hospital to J.C. Blair Memorial - Scott Kerstetter (03 JUN 2009)	100.00	100.00	
---	---	--------	--------	--

28	Total Loaded Mileage (Total Mileage is 58)	2.00	56.00	
----	---	------	-------	--

Check # 63760

TOTAL 156.00

199699

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. 14th St Philipsburg PA 16866

Mileage		Unit Price	Total
1	Flat Fee (0-30 miles) - Old Erie Pike West Decatur (Home Residence) to JC Blair Memorial - Tina Sunderland (09 JUN 2009)	100 00	100 00
17	Total Loaded Mileage - Total Mileage is 47	2 00	34 00
	Check # 63760		
		TOTAL	134 00

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

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

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~~

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) 449-9532

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

—

TO Goble-Baronick Funeral Home

ADDRESS 211 S. Main St.

Du Bois, PA 15801 (814) 371-2040

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) - Dr. Samuel Barkley - DRMC West, Du Bois to 4170 City Ave, Philadelphia, PA (31 August 2009)	100 00	100 00
---	--	--------	--------

247	TOTAL LOADED MILEAGE (Total Mileage is 277)	200	494 00
-----	--	-----	--------

2	TOLLS	5 00	10 00
---	-------	------	-------

Check # 14229

		TOTAL	604 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
- Total Mileage is 63

2 00

66 00

Check# 64879

TOTAL

166 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
-------	--	--	--	-----	----

7 10703

STATEMENT

DATE December 2009

TERMS —

TO
Clearfield County Coroner
ADDRESS
906 Edward St
Philipsburg PA 16806

IN ACCOUNT WITH
Kaiser Transport (814) 644-9532
408 N. 11th St Philipsburg PA 16866

Mileage		Unit Price	Total
1	Flat Fee (0-30 miles) - Robert Konz - DRMC, West to Mt Nittany Med Center (18 December 2009)	100 00	100 00
35	TOTAL LOADED Mileage, - Total Mileage is 65	2 00	70 00
		TOTAL	170 00

gas

1/2/09
checked 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
XXXXXXXXXXXXXXXX7288
01/02/2009 08:58:34
Visa
XXXXXXXXXXXXXXXX7288
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
XXXXXXXXXXXXXXXX7288
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
XXXXXXXXXXXXXXXX7288
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 @ \$1.859/G
Volume: 9
Gas Total: \$25.00
Total \$25.00
Visa

Visa
XXXXXXXXXXXXXXXX7288
02/06/2009 16:43:22
Thanks for your business.

2.17.09

gas

2/17/2009 8:31 AM

Sheetz #064
808 North Front Street
Philipsburg, PA 1686
(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 1686
(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 1686
(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 1686
(814) 342-6433
Store: 064
Appr:08465

Pump No: 04
Unleaded @ \$1.999/G
Volume: 15.000 Gal

Gas Total: \$29.98
Total \$29.98

Visa

Visa

XXXXXXXXXXXX7288

03/15/2009 17:53:58

Thanks for your business.

4, 16.09
gas.



4, 5.09
gas.

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.

4/16/2009 12:01 AM

Sheetz #064
808 North Front Street
Philipsburg, PA 16866
(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.

4/5/2009 10:39 PM

Sheetz #064
808 North Front Street
Philipsburg, PA 16866
(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.

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!

4.23.09
gas

4/23/2009 9:02 PM
 Sheetz #064
 808 North Front Street
 Philipsburg, PA 16866
 (814) 342-6433
 Store: 064
 Appr:00003

Pump No: 05
 Unleaded @ \$2.19/Gal
 Volume: 13.76 Gal
 Gas Total: \$28.50
 Total: \$28.50
 Visa

Visa
 XXXXXXXXXXXXX7288
 04/23/2009 21:00:18

Thanks for your business.

INTL CONFERENCE 159
 53 BURNH
 PHILADELPHIA, PA 19106
 342 1870

CONF FOR SHIPPER WITH US
 1000 FINE MICHIGAN DR
 MORGANTHAU, PA 16658

5.13.09

gas 5.15.09
card.

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
 XXXXXXXXXXXXX7288

05/15/2009 23:04:40

Thanks for your business.

Item Number	Qty	Price	May
11446	2.30		
Total Sale			

 THANK YOU FOR
 FUELING AT WAWA!

gas

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
FT 350
TYRONE, PA 16806
975-0897
PA
TRAFFIC
RT 350
TYRONE
TRAN # 0000658
DATE 06/28/09 15:23
TIME 0:02
PRODUCT UNLE
PRICE 2.599
TOTAL \$35.00
VISA
XXXXXXXXXXXX7288
CARD # 05210
EXP 05/07/2010
CARD CODE: 0000
ATTN: 07851111111
SITE ID 0700007

42.00

Bring a 1% rebate with the BP Visa. Take application and App a Today

THANK YOU
HAVE A NICE DAY

Thanks for your business.

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

Fuel
09/01/2009

uct
aded
Gallons Price
20.589 2.579
Amount
\$53.10

is #324
inville, PA
1/09 00:45:00
et: 914046
oval: VISA
: *****7288

Mifflinville, PA

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

37.00

10/13/2009 17:59:28

gas

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

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/Case

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 01:55:05 PM

Credit \$ 9.00
Cash \$ 0.00
Code \$ 0.00

Total \$ 9.00

THANK YOU FOR VISITING
OUR FACILITY !!!!

Check # 1178 02/12/2009

Invoice Book



Save money. Live better.

SUPER CENTER

WE SELL FOR LESS

MANAGER JOSH KUNKLE

(814) 765 8089

ST# 2129 OP# 00032507 IE# 18 TR# 02429

STATEMENT BK 008795805312 3.44 X

SUBTOTAL 3.44

TAX 1 6.000 % 0.21

TOTAL 3.65

ECA CHECK TEND 3.65

CHARGE DUE 0.00

When you pay by check, you authorize us to use the 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 walmar.com/sweetideas

02/12/09 14:36:37

Crystal Clean Auth Spa
924 N. Front St.
Phillipsburg Pa 1866
TRANSPORT/RAISER
*****7288
06/26/2009 01 16:21 PM
CREDIT \$ 9.00
CASH \$ 0.00
Code \$ 0.00
Total \$ 9.00
THANK YOU FOR VISITING *****

6,25.09

8,16.09

1.2.09

food

C/Carol

FIVE GUYS
BUFFERS AND FRIES

STORE # MD-184

50 CARR - CREEK STE 110

FR: ERICK, M. JI

(P) 301-662-7140

(F)

15.12

1/2/2009 1:38:09 PM

FIVE GUYS

72

Order Number:

4 9:

CB

ONION

LETTUCE

-> SHROOM

TOMATO

CB

LETTUCE

TOMATO

-> SHROOM

ONION Lite

Fry

Salt Drink

2.59

1.69

Sub. Total: \$14.26

Tax: \$0.86

Total: \$15.12

Visa: \$15.12

Change \$0.00

Register: 2

Tran Ser: 6772

Cashier: Jenny S.

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

7:09 Card
Food

BELL - PHILIPSBURG

Time: 5:16:55 PM

Approved

Visa
XXXXXXXXXXXX7288

Date: 2/28/2010

Swipe
249

Molly
661988

ID: 2

To Go
TRANSPORT/KAISER

8.05

Ap#: 061515

GR.F TO COMPLY WITH
CARDHOLDER AGREEMENT

MER COPY

\$1,000 GIVEAWAY ON BACK!

food

03/08/2009

TEXAS ROADHOUSE
1665 Waddle Road
State College, PA 16803
814-235-7427

Server: PM BAR DOB: 03/06/2007
08:53 PM 03/08/2009
411/1 7/40023

VISA 4104301
Card #XXXXXXXXXXXX7288
Magnetic card present: TRANSPORT
KAISER
Approval: 073120

Amount: 18.41

+ Tip: 3.00

= Total: 21.41

19.41

GUEST COPY

2-19-09

food

PHILIPSBURG, PA 17268

PHILIPSBURG, PA 17268

DISCOUNT

REGISTRATION # ID# 0514042 1074

Feb. 19, 2010 10:11:00
REGISTRATION #

13.83

VISA CARD ACCOUNT #
TRANSACTION AMOUNT 13.83

CASH TENDERED

CHANGE

Sheetz #096
132 North Broad St.
Ridgway, PA 15853
(814) 776-0531

5/15/2009 11:15:47 PM

CSS Inside

Order Number: 454

food

Register: 3
1 Hot Dog \$0.69
+ Chili Sauce \$0.29
1 Hot Dog \$0.69
2 32 oz Drink \$2.58
1 Hot Dog Special -\$0.39

Sub. Total: \$3.86

Tax: \$0.24

Total: \$4.10

Discount Total: -\$0.39

Visa: \$4.10

Change: \$0.00

Visa
Card Num : XXXXXXXXXXXX7288
Store : 0096
Approval : 021545
Time : 2009/05/15 23:15:45

5.15.09

Card

6.3.09

food

Apply online at
www.weismarkets.com
PHILLIPSBURG, PA 16866

PHILLIPSBURG, PA 16866

WEIS

06/09/09 06:47 PM
118 108 202 171
TOTAL: \$6.77
CREDIT PAYMENT
REF: 074700
ACCT: *****7288 EXP: XXX
SEQ: 180029389
TOTAL: \$6.77
CHANGE 0.00

5.34

6.9.09

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 \$0.69
+ Chili Sauce \$0.29
+ Master Tran: \$1.49
1 44 oz Drink

Sub. Total: \$2.47
Tax: \$0.15
Total: \$2.62
Discount Total: \$0.00
Visa: \$2.62
Change: \$0.00

Visa
Card Num : XXXXXXXXXXXXX7288
Store : 0100
 : 035201
 : 2009/06/25 14:51:59

food 06/25/09

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
05:48 PM
Table 416/1

DOB: 06/28/2009
06/28/2009
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

hfëá

GUEST COPY

003 by 00334/DEBRA
THANK YOU, PLEASE COME AGAIN
PHONE (814)684-1106

Change = 0.00
Credit Card = 5.50
Card Name : TRANSPORT/KATISER
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
ST 6.17

QTY	ITEM	U/PRICE	SUBTOTAL
1	WHOPPER		2.99
1	SMALL FRY		1.59
1	SMALL DRINK		1.59

Your Order # 0322
*****IN*****
BURGERKING
RESTAURANT #2551

Store: 2551 - GDK DEVELOPMEN.
Check: 0322 06/22/09 11:51PM
Server: 00334/DEBRA

6.12.09

Food 0745

ARBY'S RESTAURANT
124 N. FRONT ST.
PHILIPSBURG, PA 16866
(814) 342-7205
MID #878929089278

Merchant ID: 088290099278

Sale *food*

XXXXXXXXXXXX7283

Exp: 02/13

VISA

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!

Card ID: 00351674
Term ID: 00120
456163862595

Sale

VISA

XXXXXXXXXXXX7283

09/26/09

18:25:05

Inv #: 000051

Amount:

\$ 6.00

Tax:

\$ 0.35

Total:

(6.35)

food
10/21/2009

Food 09/01/2009

THANK YOU FOR STOPPING AT LOVES
ARBY'S 524
MIFFINVILLE, PA
570-752-9019

Store # 524

Check # 24
Drawer # 5

To Go

Sale # 00540541

1 MED BEEF N CHDR	4.59
1 MAKE A CCMBQ	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



CONTROL NO. 1906375

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

REF BY

RECEIVED X
 BY
 ALL GOODS RETURNED MUST BE ACCOMPANIED BY THIS INVOICE

DATE	INVOICE NO.	STORE NO.	CM	SLS
12/21/09	406072	07245		0
TIME	PURCHASE ORDER NO. ATTENTION			
11:10				
INVOICE TYPE		TOTAL		
VISA				

ACCT. NO.	QUANTITY	PART NUMBER	LINE DESCRIPTION	PRICE	NET	TOTAL	CODE
00000			CASH SALE - TAXABLE				
			THANK YOU - YOUR PATRONAGE				
			IS APPRECIATED, PA				
			(21)VI-#####7289/001232				
2000	1.00	49-719	Oldsmobile Silhouette	100.690	73.720	73.72	T1
	1.00	49-719	RAY	CORE DEPD	27.780	27.78	T1D
	1.00	49-719	RAY	CORE DEPD	27.780	27.780	T1D
			W/ MAKE HYDRAULICS				
SUB TOTAL				73.72	4.43	78.15	CASH
				0.00	6.000%		
				MISC	TAX		

OF PHILIPSBURG

814-342-3223



BUICK

PONTIAC

71

DATE: 03/03/09

TIME: 14:29:52

DEPT. SALES OF PHILIPSBURG
113 WAGON ST
PHILIPSBURG, PA 17066
(814) 342-3223
194002 - 0087
SHIFT 1

TYPE: VISA
ACCT#: 4375555557228
NAME: TRANSPORT-KAISER

TERMS: 007 - 000
TRAIL TYPE: SALE
AUTH#: 032943
RON: 86014

TOTAL: \$57.03

TRANSPORT-KAISER

I AGREE TO PAY ABOVE TOTAL AMOUNT
BY CARRYING TO CREDIT 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 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 03/03/09	
COMMENTS			MO: 137751

HOURS: 2.95 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 JOURNAL PREFIX CVCS	
JOB# 2: 00CVZ07 VEHICLE CHECKOVER. HOURS: 9.95 TECH(S): 1001 SERVICE MANAGER STATES PERFORM CHECKOVER DURING SERVICE USING MULTI-POINT INSPECTION REPORT. PERFORMED CHECKOVER.				JOB# 2 TOTALS	
JOB# 2 TOTALS				JOB# 2 JOURNAL PREFIX CVCS	
JOB# 3 CHARGES				JOB# 2 JOURNAL PREFIX CVCS	
LABOR				JOB# 2 JOURNAL PREFIX CVCS	
JOB# 3: 10CVZ06 CHECK ENGINE LIGHT. HOURS: 23.20 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	
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

[Handwritten 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!

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

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. 1007 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/
	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 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
* [] CASH [] CHECK CK NO. [] *	TOTAL PARTS....	656.51
* [] VISA [] MASTERCARD [] DISCOVER *	TOTAL SUBLET...	0.00
* [] OTHER [] CHARGE *	TOTAL G.O.G....	0.00
*****	TOTAL MISC CHG.	0.00
	TOTAL MISC DISC	0.00
	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.

IF OUR SERVICE WAS SATISFACTORY TELL YOUR FRIENDS. IF NOT, PLEASE TELL US IMMEDIATELY.

THANK YOU!

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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

2001 Oldsmobile - Silhouette GL
3.4L, V6, VIN (E)
Lic # : DTL9083 Odometer In : 140426
Unit # : Odometer Out :
Vin # : 1GHDX23E21D133380
Hat # :

Ref # :

Part Description / Number	Qty	Sale	Extended	Labor Description	Hours	Extended
FRIGI-QUIET & DYE BG701	1.00	9.00	9.00	CHARGE A/C SYSTEM & CHECK FOR LEAKS	1.20	59.95
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.....

8.5.09

Maintenance.

0073
101 Nichols St
Clarksfield, PA 16830
814-765-4310

8/5/2009 6:00:45 AM
POS Terminal

Order Number: 596

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 : XXXXXX XXXX7288

Store : 0073

Approval : 050043

Time : 2009/08/05 06:00:44

DIEHL'S OF PHILIPSBURG

814-342-3223

ing Motors, Inc.
ed Diehl's of Philipsburg
Walton Street + P.O. Box 171
LIPSBURG, PA 16866-0171



BUICK



PONTIAC

CELL: 290-3938

CUSTOMER NO. 910194		ADVISOR MIKE HOLLIS	901097	TAG NO. 859	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-----
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-----

* [] CASH [] CHECK CK NO. [] *
* [] VISA [] MASTERCARD [] DISCOVER *
* [] OTHER [] CHARGE *

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 _____

*09/03/09
Credit
Card*

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!

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VALLEY TIRES CO INC STR #22
 1583 PHILLIPSBURG-BIGLER HWY
 PHILLIPSBURG, PA 16866
 814-343-9340

VALLEY TIRE CO. INC.

1583 Bigler Highway
 Phillipsburg, PA 16866
 Phone: 814-343-9340
 Fax: 814-343-9366



Sale

Order: 0827
 Merchant: 703907808
 10/22/09 10:00:25

ISA
 XXXXXXXXXXXX7208
 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	10/22/09 11:04:25	52 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		20.09							
CHANGE:		.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
12.20	6.70	6.00%	18.95	1.14			20.09

Scott NEVELL

1.25

PA TURNIPIKE FARE RECEIPT
PLAZA 020 POCCONO

DATE 08/31/09 TIME 21:57
LANE 15 CLASS 1 TP 00 PAID \$5.00
COLL 3143 TRAN 5508

ROADWAY AND WEATHER: 1-866-976-8747
CUSTOMER ASSISTANCE CENTER: 1-800-331-3414
E-ZPASS: 1-877-736-8727
WWW.PATURNIPIKE.COM

1.2.09 cash/change

PA TURNIPIKE FARE RECEIPT
PLAZA 020 MID-COUNTY
DATE 08/31/09 TIME 21:57 COLL 3143 TRAN 5508
LANE 15 CLASS 1 TP 00 PAID \$5.00

ROADWAY AND WEATHER: 1-866-976-8747
CUSTOMER ASSISTANCE CENTER: 1-800-331-3414
E-ZPASS: 1-877-736-8727
WWW.PATURNIPIKE.COM

Postage

weis

THANKS FOR SHOPPING WEIS MARKETS #118
501 NORTH CENTRE ST
PHILLIPSBURG, PA. 16866
TELEPHONE: 814-342-6451

YOUR CASHIER TODAY WAS UDETTTE

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	Qty	Unit Price	Final Price
FOREVER STAMP BK20	1	8.80	\$8.40
TAX			\$1.00
Change			-\$1.60
			8.40
			\$8.40

USPS only stop on all
USPS stamps. For more information, visit
www.usps.com or call 1-800-ASK-USPS.

Postage and postage
guarantee set by
USPS. For more information,
visit www.usps.com or call
1-800-ASK-USPS.

Postage
CVS/pharmacy
for all the ways you care™

815 N FRONT STREET, PHILIPSBURG, 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



SUPER CENTER
WE SELL FOR LESS
MANAGER JOSH KUNKLE
(814) 765-8089
STAMP BK 006795805812 3.44 X
SUBTOTAL 3.44
TAX 6.000 % 0.21
TOTAL 3.65
CASH TEND 20.00
CASH BAL 16.35

ITEMS SOLD 1

104 8523 2375 0704 4917 1130



of simple, fun and earth-friendly
products 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	Sales Receipt		Final Price
	Sale Qty	Unit 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

11
1.58

Ken Long Motors, Inc.
 dba Fred Diehl's of Philipsburg
 113 Walton Street + P.O. Box 171
 PHILIPSBURG, PA 16866-0171
 814-342-3223

FRED DIEHL'S OF PHILIPSBURG

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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
O

S
H
I
P

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
TOTAL						1.55

ELECTRICAL, SPECIAL ORDERS, AND FACTORY ORDERED ITEMS ARE NOT RETURNABLE. NO REFUNDS AFTER 30 DAYS OR WITHOUT THIS INVOICE. RESTOCKING CHARGE ON ALL RETURNS.

Customer Signature X _____

CUSTOMER COPY

PARTS INVOICE

8.1.09
 20⁰⁰ cash
 Reimburse

TEXAS ROASTERY
 1865 Riddle Road
 Collingswood, PA
 610-235-7477

08/01/2009
 4:50:09
 2:00:48

XXXXXXXXXX

Amount: 36.21
 Tip: 5.00
 Total: 41.21

1/2 - 20.00
 Reimburse
 08/01/2009

GUEST COPY



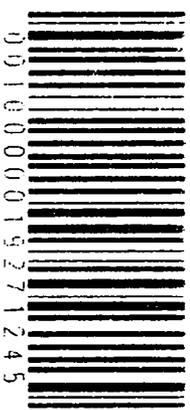
- + Ham
- + Turkey
- + Provolone Cheese
- + White Rice
- + Italian Sausage
- + Sliced Lettuce
- + Sliced Tomatoes
- + Diced Onion
- + Mild Peppr Ring
- + Green Peppers
- + Barbecue Sauce

1 Club Cold Ssb 6 Inch

****ORDER STORED****
 Order Number: 105
 5/16/2009 12:49:03 PM
 Philadelphia, PA 19104
 2611 North Front Street
 Philadelphia, PA 19104
 (610) 342-6433

*** PLEASE PAY AT REGISTER
 BEFORE PICKING UP ORDER ***
 *** THANK YOU ***

5.16.09

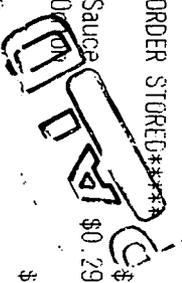


0010000019271245

5.16.09
 *** PLEASE PAY AT REGISTER ***
 BEFORE PICKING UP ORDER
 *** THANK YOU ***

Sheet 4054
 2611 North Front Street
 Philadelphia, PA 19104
 (610) 342-6433
 5/16/2009 12:51:42 PM
 Order Number: 124

- 1 Hot Dog \$0.65
- + Chili Sauce \$0.29
- + Diced Onion \$0.65
- 1 Hot Dog \$0.65
- + Ketchup
- + Mustard
- + Sauerkraut (\$0.59)
- 1 Hot Dog Special \$1.35
- Balance Due



PAID

**SCHEDULE C
(Form 1040)**

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074

2006

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) 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. • 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.	31 (3,190.)
32	If you have a loss, check the box that describes your investment in this activity (see page C-6). • 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

**SCHEDULE C
(Form 1040)**

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074

2006

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 : 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	<input type="checkbox"/>	22,151.
2	Returns and allowances		
3	Subtract line 2 from line 1		22,151.
4	Cost of goods sold (from line 42 on page 2)		
5	Gross profit. Subtract line 4 from line 3		22,151.
6	Other income, including federal and state gasoline or fuel tax creditor refund (see page C- 3)		
7	Gross income. Add lines 5 and 6		22,151.

Part II Expenses. Enter expenses for business use of your home only on line 30.			
8	Advertising	23.	18 127.
9	Car and truck expenses (see page C- 4)	14,686.	19
10	Commissions and fees		20a
11	Contract labor (see page C- 4)		20b
12	Depletion		21
13	Depreciation and section 179 expense deduction (not included in Part III) (see page C- 4)	2,111.	22
14	Employee benefit programs (other than on line 19)		23
15	Insurance (other than health)		24
16	Interest:		24a 81.
a	Mortgage (paid to banks, etc.)		24b 252.
b	Other		25 532.
17	Legal and professional services	65.	26
			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. • 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.		31 2,132.
32	If you have a loss, check the box that describes your investment in this activity (see page C- 6). • 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 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	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 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.

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
6	(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	
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.

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?		X Yes		No		24b If "Yes," is the evidence written?		X Yes		No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost			
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) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No										
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?	X		X									
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) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) 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

**SCHEDULE C
(Form 1040)**

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074

2007

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).

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.) 179 CHURCH STREET City, town or post office, state, and ZIP code 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 <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	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):	20a	
11	Contract labor (see page C-4)	11		a	Vehicles, machinery, and equipment	20b	
12	Depletion	12		b	Other business property	21	223
13	Depreciation and section 179 expense deduction (not included in Part III) (see page C-4)	13	654	21	Repairs and maintenance	22	
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	23	1,120
15	Insurance (other than health)	15	459	23	Taxes and licenses	24a	
16	Interest:	16a	1,737	a	Travel, meals, and entertainment:	24b	
a	Mortgage (paid to banks, etc.)	16b		a	Travel	25	450
b	Other	17	75	b	Deductible meals and entertainment (see page C-6)	26	
17	Legal and professional services	17	75	25	Utilities	27	1,584
18		18		26	Wages (less employment credits)	28	6,376
19		19		27	Other expenses (from line 48 on page 2)	29	-3,030
20		20		28	Total expenses before expenses for business use of home. Add lines 8 through 27 in columns	30	
21		21		29		31	-3,030
22		22		30	Tentative profit (loss). Subtract line 28 from line 7		
23		23		31	Expenses for business use of your home. Attach Form 8829		
24		24			Net profit or (loss). Subtract line 30 from line 29.		
25		25			• 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.		
26		26			• If a loss, you must go to line 32.		
27		27			32 If you have a loss, check the box that describes your investment in this activity (see page C-7).		
28		28			• 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.	32a	<input checked="" type="checkbox"/> All investment is at risk.
29		29			• If you checked 32b, you must attach Form 6198. Your loss may be limited.	32b	<input type="checkbox"/> Some investment is not at risk.

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

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).

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** 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.): **179 CHURCH STREET**
City, town or post office, state, and ZIP code: **MORRISDALE PA 16858**

F Accounting method: (1) Cash (2) Accrual (3) 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 Yes 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	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	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		21	Repairs and maintenance	21	
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	
15	Insurance (other than health)	15		23	Taxes and licenses	23	
16	Interest:	16a		24	Travel, meals, and entertainment:	24a	865
a	Mortgage (paid to banks, etc.)	16a		a	Travel	24a	
b	Other	16b		b	Deductible meals and entertainment (see page C-6)	24b	
17	Legal and professional services	17	65	25	Utilities	25	450
18				26	Wages (less employment credits)	26	
19				27	Other expenses (from line 48 on page 2)	27	2,397
20				28	Total expenses before expenses for business use of home. Add lines 8 through 27 in columns	28	19,445
21				29	Tentative profit (loss). Subtract line 28 from line 7	29	12,207
22				30	Expenses for business use of your home. Attach Form 8829	30	
23				31	Net profit or (loss). Subtract line 30 from line 29.	31	12,207
24					<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. 		
25					<ul style="list-style-type: none"> If you have a loss, check the box that describes your investment in this activity (see page C-7). 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. 	32a	<input type="checkbox"/> All investment is at risk.
26						32b	<input type="checkbox"/> Some investment is not at risk.

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:

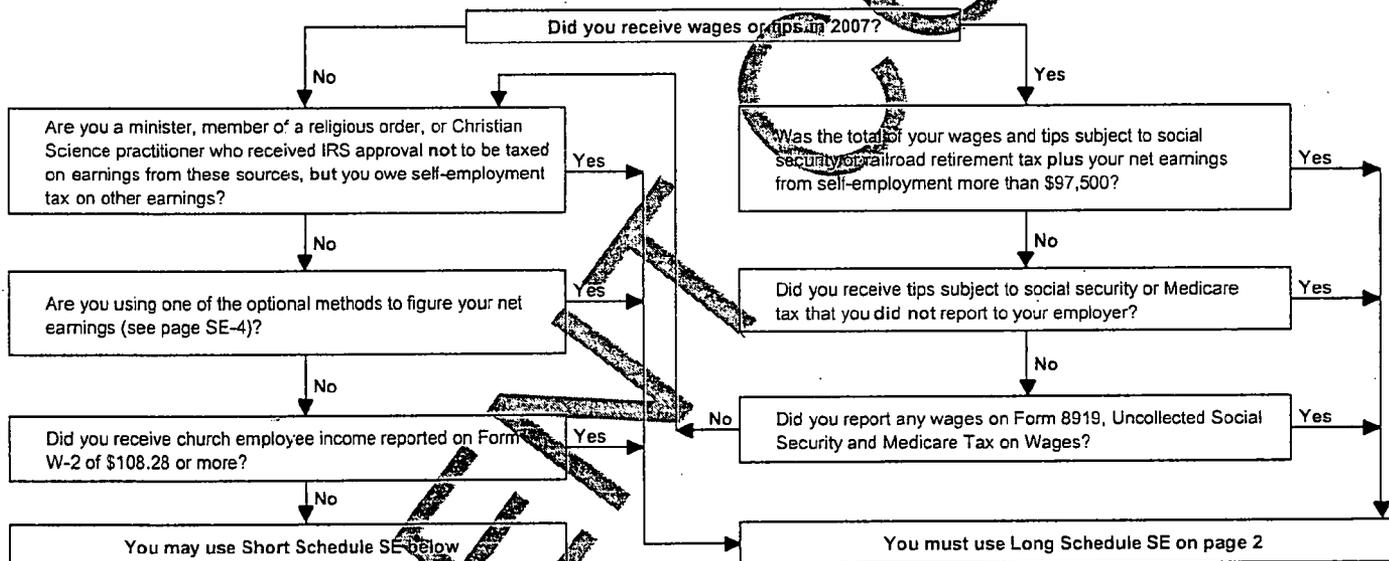
- You had net earnings from self-employment from other than church employee income (line 4 of Short Schedule SE or line 4c of Long Schedule SE) of \$400 or more, or
- You had church employee income of \$108.28 or more. Income from services you performed as a minister or a member of a religious order 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: **2006**

- 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.

ASSET ID	DEPRECIATION	TYPC	Manner/Date Acquired (Purchased, gift, inherited, etc.)	Date Placed in Service, if different	System (MACRS, ACRS, etc.)	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)
								2111	2111		
1	FLOW TRUCK	P	03/11/2004	03/11/2004	MACRS 5	2111		2111	2111	100	2111
2	BLDG EQUIP SM TOOLS	P	05/19/2003	05/19/2003	MACRS 3	1031		1031	1031	100	1031
3	STORAGE BUILDING	R	05/19/2003	05/19/2003	MACRS N	26000	500	25500	25500	100	25500
4											
5											
6											
7											
8											

* Enter basis adjustment for clean-fuel 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											
								Year: 2006		Year:		Year:		Year:					
								Rec. Year	Depr. (1x %)	Rec. Year	%	Rec. Year	Depr. (1x %)	Rec. Year	Depr. (1x %)				
2111	25500		25500	5	S/HY			2006	20.0										
2111				5	H/Y			2006	20.0										
1031				3	S/AL HY			2006	16.6										
1031				3	H/Y			2006	16.6										
	25500		25500	39	MM	1717		2006	2.5	654									
	25500		25500	39	MM	1717		2006	2.5	654									

** 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.

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury Internal Revenue Service

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: 125,000; 2 Total cost of section 179 property placed in service; 3 Threshold cost of section 179 property before reduction in limitation: 500,000; 4 Reduction in limitation; 5 Dollar limitation for tax year: 125,000

Table with 3 columns: (a) Description of property, (b) Cost (business use only), (c) Elected cost. Includes lines 6-13 for listed property and carryover calculations.

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; 15 Property subject to section 168(f)(1) election; 16 Other depreciation (including ACRS)

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: 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

Section B - Assets Placed in Service During 2007 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Includes rows for 3-year, 5-year, 7-year, 10-year, 15-year, 20-year, 25-year, Residential rental, and Nonresidential real property.

Section C - Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System

Table with 7 columns: (a) Class life, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Includes rows for 12-year and 40-year class lives.

Part IV Summary (see instructions)

21 Listed property. Enter amount from line 28; 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.; 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

For Paperwork Reduction Act Notice, see separate instructions.

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	35.
9 Car and truck expenses (see instructions)	9	8,711.	19	
10 Commissions and fees	10		20	
11 Contract labor (see instructions)	11	6,883.	20a	
12 Depletion	12		20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	
14 Employee benefit programs (other than on line 19)	14		22	872.
15 Insurance (other than health)	15	1,122.	23	
16 Interest:			24	
a Mortgage (paid to banks, etc.)	16a		24a	
b Other	16b	990.	24b	224.
17 Legal & professional services	17	172.	25	1,406.
18 Office expense			26	
19 Pension and profit-sharing plans			27	414.
20 Rent or lease (see instructions):			28	20,829.
a Vehicles, machinery, and equipment			29	625.
b Other business property			30	
21 Repairs and maintenance			31	625.
22 Supplies (not included in Part III)				
23 Taxes and licenses				
24 Travel, meals, and entertainment:				
a Travel				
b Deductible meals and entertainment (see instructions)				
25 Utilities				
26 Wages (less employment credits)				
27 Other expenses (from line 48 on page 2)				
28 Total expenses before expenses for business use of home. Add lines 8 through 27				
29 Tentative profit or (loss). Subtract line 28 from line 7				
30 Expenses for business use of your home. Attach Form 8829				
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.				
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 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 8-26 or line 30.

OUTSIDE SERVICES	236.
PARKING AND TOLLS	95.
POSTAGE	83.
48 Total other expenses. Enter here and on page 1, line 27	414.

SCHEDULE E
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Supplemental Income and Loss

(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:	Yes	No
A	STORAGE UNITS 179 CHURCH STREET, MORRISDALE, PA 16858		<ul style="list-style-type: none"> • 14 days, or • 10% of the total days rented at fair rental value? (See instructions.) 		X
B					
C					

Income:		Properties			Totals
		A	B	C	(Add columns A, B, and C.)
3	Rents received	3,951.			3,951.
4	Royalties received				
Expenses:					
5	Advertising				
6	Auto and travel (see instructions)				
7	Cleaning and maintenance				
8	Commissions				
9	Insurance	489.			
10	Legal and other professional fees	172.			
11	Management fees				
12	Mortgage interest paid to banks, etc (see instructions)				
13	Other interest	1,685.			
14	Repairs	1,187.			
15	Supplies				
16	Taxes	1,345.			
17	Utilities				
18	Other (list) ▶				
	BANK FEES	81.			
	GARDENING	175.			
	MISCELLANEOUS	68.			
19	Add lines 5 through 18	5,202.			5,202.
20	Depreciation expense or depletion (see instructions)	671.			671.
21	Total expenses. Add lines 19 and 20	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.	-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.	-1,922.			
24	Income. Add positive amounts shown on line 22. Do not include any losses.				
25	Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here.				-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.				-1,922.

SCHEDULE SE
(Form 1040)

Self-Employment Tax

OMB No. 1545-0074

2008

Attachment
Sequence No. 17

Department of the Treasury
Internal Revenue Service

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

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:

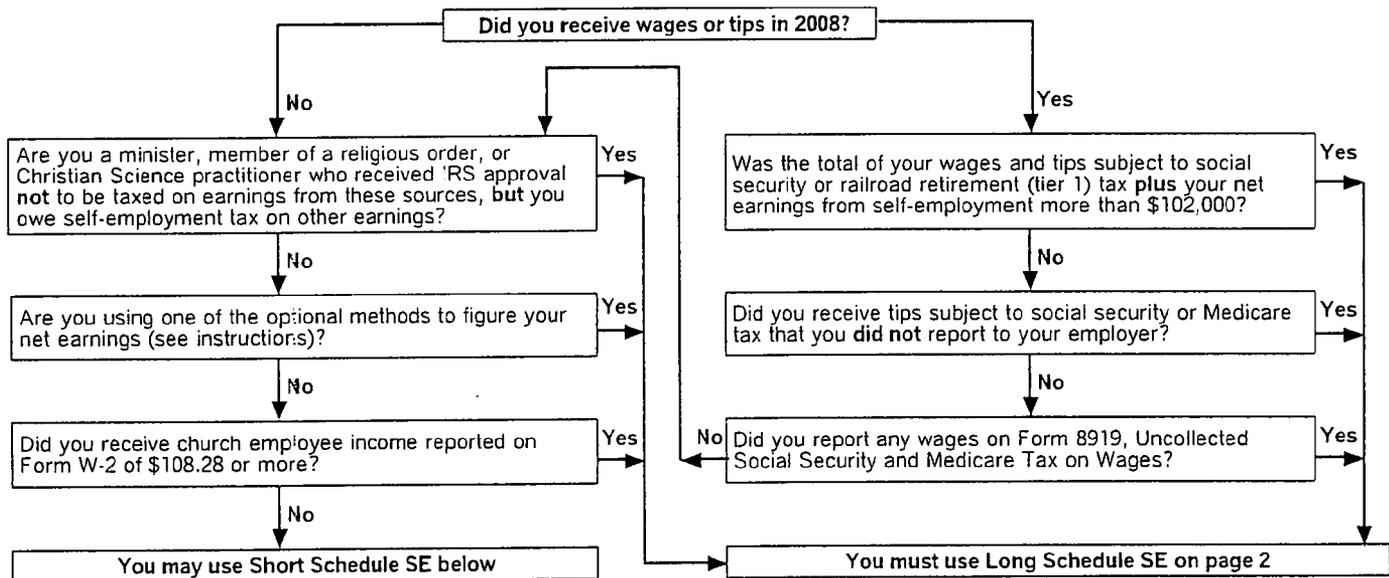
- You had net earnings from self-employment from **other than** church employee income (line 4 of Short Schedule SE or line 4c of Long Schedule SE) of \$400 or more, or
- You had church employee income of \$108.28 or more. Income from services you performed as a minister or a member of a religious order 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 57.

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 X	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	625.
3 Combine lns 1a, 1b & 2	3	625.
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	577.
5 Self-employment tax. If the amount on line 4 is: • \$102,000 or less, multiply line 4 by 15.3% (.153). Enter the result here and on Form 1040, line 57. • More than \$102,000, multiply line 4 by 2.9% (.029). Then, add \$12,648 to the result. Enter the total here and on Form 1040, line 57.	5	88.
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	44.

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: JENNIFER L. KAISER
Social Security Number (shown first): 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.

Part A. Property Description:

Show the address and kind of each rental real estate property, and/or each source of royalty income.

Table with columns: Kind of property, For Profit Property (YES/NO), Address. Row A: STORAGE UNITS, YES (checked), 179 CHURCH STREET, MORRISDALE, PA 16858.

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.

Table for Part B with columns: Property A, B, C (T, S, J). Row 1: Rent received 3,951.

Expenses

Table for Expenses with columns: Line number, Description, Amount. Rows 3-16: Advertising, Automobile and travel, Cleaning and maintenance, Commissions, Insurance (489), Legal and professional fees (172), Management fees, Mortgage interest, Other interest (1,685), Repairs (1,187), Supplies, Taxes - not based on net income (1,345), Utilities, Depreciation expense (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.

Table for Line 17: Other expenses (itemize): 324. Line 18: Total Expenses - Add Lines 3 through 17: 5,873.

Income or Loss

Line 19: Income - Subtract Line 18 from Line 1 or 2. Line 20: Loss - Subtract Line 1 or 2 from Line 18 (checked box if a net loss): 1,922.

21 Net Income or Loss Total Lines 19 and 20. (check the box if a net loss) [X] 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) [] 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) [X] 23 1,922

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	<u>401.</u>
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>

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.

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., CPA

Date ▶

2/08/2010

**ERO Must Retain This Form – See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

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. Home address (number and street). If you have a P.O. box, see instructions. 420 11TH STREET. PHILIPSBURG, PA 16866. Check here if you, or your spouse if filing jointly, want \$3 to go to this fund? (see instructions) [] You [] Spouse

Filing Status

Check only one box.

1 [] Single 4 [X] 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. 2 [] Married filing jointly (even if only one had income) 3 [] Married filing separately. Enter spouse's SSN above & full name here. 5 [] Qualifying widow(er) with dependent child (see instructions)

Exemptions

If more than four dependents, see instructions and check here []

6a [X] Yourself. If someone can claim you as a dependent, do not check box 6a. 6b [] Spouse. 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.

Income

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.

7 Wages, salaries, tips, etc. Attach Form(s) W-2. 7 41,787. 8a Taxable interest. Attach Schedule B if required. 8a 8b Tax-exempt interest. Do not include on line 8a. 8b 9a Ordinary dividends. Attach Schedule B if required. 9a 9b 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 15b Taxable amount (see instrs). 15b 16a Pensions and annuities. 16a 16b 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 20b 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.

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

Table with 3 columns: Line number, Description, Amount. Includes lines 38-55 covering income, deductions, and credits.

Other Taxes

Table with 3 columns: Line number, Description, Amount. Includes lines 56-60 covering self-employment tax and other taxes.

Payments

If you have a qualifying child, attach Schedule EIC.

Table with 3 columns: Line number, Description, Amount. Includes lines 61-71 covering federal income tax withheld and other payments.

Refund

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

Table with 3 columns: Line number, Description, Amount. Includes lines 72-74 covering refund and estimated tax.

Amount You Owe

Table with 3 columns: Line number, Description, Amount. Includes lines 75-76 covering amount owed and tax penalty.

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? [X] 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.

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: CORRECTIONS OFFICE. Date: 2/01/10. Your occupation: CORRECTIONS OFFICE. Daytime phone number: 814-290-3938.

Paid Preparer's Use Only

Preparer's signature: FRED C. LUCAS, JR., CPA. Date: 2/01/10. Check if self-employed: []. Preparer's SSN or PTIN: P00157061. Firm's name: WALTER HOPKINS & COMPANY, LLP. Address: P.O. BOX 684, PHILIPSBURG, PA 16866-0684. EIN: 25-1065143. 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
9 Car and truck expenses (see instructions)	9 5,199.
10 Commissions and fees	10
11 Contract labor (see instructions)	11 3,697.
12 Depletion	12
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13
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 870.
17 Legal & professional services	17 200.
18 Office expense	18 7.
19 Pension and profit-sharing plans	19
20 Rent or lease (see instructions):	
a Vehicles, machinery, and equipment	20a
b Other business property	20b
21 Repairs and maintenance	21
22 Supplies (not included in Part III)	22 155.
23 Taxes and licenses	23
24 Travel, meals, and entertainment:	
a Travel	24a
b Deductible meals and entertainment (see instructions)	24b 78.
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.	32 a <input type="checkbox"/> All investment is at risk. 32 b <input type="checkbox"/> 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 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 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 8-26 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 E
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Supplemental Income and Loss
(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

2009

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:	
			Yes	No
A	STORAGE UNITS 179 CHURCH STREET, MORRISDALE, PA 16858		A	X
B			B	
C			C	

Income:		Properties			Totals (Add columns A, B, and C.)	
		A	B	C		
3	Rents received.....	3	4,622.		3	4,622.
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	555.			
10	Legal and other professional fees.....	10				
11	Management fees.....	11				
12	Mortgage interest paid to banks, etc (see instructions).....	12			12	
13	Other interest.....	13	1,530.			
14	Repairs.....	14	165.			
15	Supplies.....	15	3.			
16	Taxes.....	16	1,423.			
17	Utilities.....	17				
18	Other (list) ▶ BANK FEES POSTAGE	18	120. 47.			
19	Add lines 5 through 18.....	19	3,843.		19	3,843.
20	Depreciation expense or depletion (see instructions).....	20	671.		20	671.
21	Total expenses. Add lines 19 and 20...	21	4,514.			
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	108.			
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				
24	Income. Add positive amounts shown on line 22. Do not include any losses.....	24			24	108.
25	Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here...	25			25	
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 18. Otherwise, include this amount in the total on line 41 on page 2.....	26			26	108.

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.

SCHEDULE SE
(Form 1040)

Self-Employment Tax

OMB No. 1545-0074

2009

Attachment
Sequence No. 17

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 1040. ▶ See Instructions for Schedule SE (Form 1040).

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:

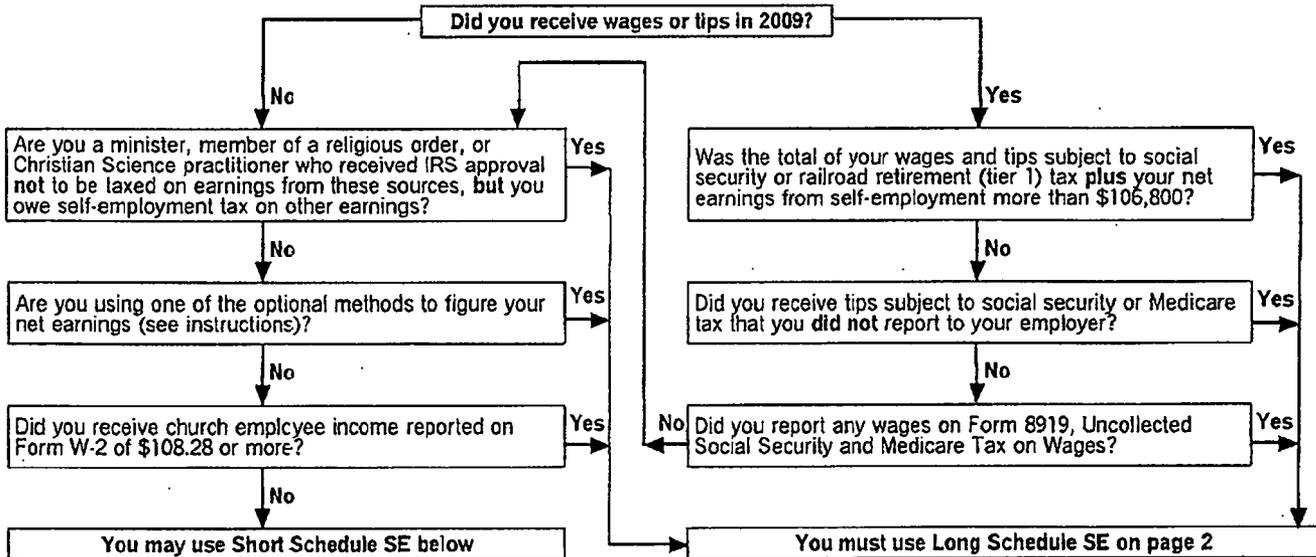
- You had net earnings from self-employment from other than church employee income (line 4 of Short Schedule SE or line 4c of Long Schedule SE) of \$400 or more, or
- You had church employee income of \$108.28 or more. Income from services you performed as a minister or a member of a religious order 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

Department of the Treasury
Internal Revenue Service (99)

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

2009

Attachment
Sequence No. 21

▶ See separate instructions.

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	Yes	Complete only Part II below.
			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	8	X .20																																																												
<table border="1" style="width: 100%;"> <thead> <tr> <th colspan="3">If line 7 is:</th> <th colspan="3">If line 7 is:</th> </tr> <tr> <th>Over</th> <th>But not over</th> <th>Decimal amount is</th> <th>Over</th> <th>But not over</th> <th>Decimal amount is</th> </tr> </thead> <tbody> <tr> <td>\$0—15,000</td> <td></td> <td>.35</td> <td>\$29,000—31,000</td> <td></td> <td>.27</td> </tr> <tr> <td>15,000—17,000</td> <td></td> <td>.34</td> <td>31,000—33,000</td> <td></td> <td>.26</td> </tr> <tr> <td>17,000—19,000</td> <td></td> <td>.33</td> <td>33,000—35,000</td> <td></td> <td>.25</td> </tr> <tr> <td>19,000—21,000</td> <td></td> <td>.32</td> <td>35,000—37,000</td> <td></td> <td>.24</td> </tr> <tr> <td>21,000—23,000</td> <td></td> <td>.31</td> <td>37,000—39,000</td> <td></td> <td>.23</td> </tr> <tr> <td>23,000—25,000</td> <td></td> <td>.30</td> <td>39,000—41,000</td> <td></td> <td>.22</td> </tr> <tr> <td>25,000—27,000</td> <td></td> <td>.29</td> <td>41,000—43,000</td> <td></td> <td>.21</td> </tr> <tr> <td>27,000—29,000</td> <td></td> <td>.28</td> <td>43,000—No limit</td> <td></td> <td>.20</td> </tr> </tbody> </table>		If line 7 is:			If line 7 is:			Over	But not over	Decimal amount is	Over	But not over	Decimal amount is	\$0—15,000		.35	\$29,000—31,000		.27	15,000—17,000		.34	31,000—33,000		.26	17,000—19,000		.33	33,000—35,000		.25	19,000—21,000		.32	35,000—37,000		.24	21,000—23,000		.31	37,000—39,000		.23	23,000—25,000		.30	39,000—41,000		.22	25,000—27,000		.29	41,000—43,000		.21	27,000—29,000		.28	43,000—No limit		.20	9	353.
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27,000—29,000		.28	43,000—No limit		.20																																																										
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.

**Depreciation and Amortization
(Including Information on Listed Property)**

Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions. ▶ Attach to your tax return.

Attachment
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.....			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)

[X] 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.

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 to
S 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

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.

12	1453
13	1412
14	0
15	0
16	0
17	0
18	0

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.

19a	00	
19b	00	
20		0
21		0

- 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

22	0
23	0
24	1412
25	41
26	0

- 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.

27	41
28	0

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.

29	0
30	0
31	0
32	0
33	0
34	0
35	0

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
FRED C. LUCAS, JR., CPA		2/01/10
WALTER HOPKINS & COMPANY, LLP		
P.O. BOX 684 PHILIPSBURG, PA 16866-0684		

Firm FEIN	Preparer's SSN/PTIN
251065143	P00157061

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) (0) 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

Table with 6 columns: 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. Row 1: T, 23-2172299, 41,787., 45,981., 45,981., 1,412. Total Part A: 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

Table with 8 columns: A T/S, B Type, C Payer name, D 1099-R code, E Total federal amount, F Adjusted plan basis, G PA compensation, H PA tax withheld. Total Part B: 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

0901910026

PAIA0601L 12/21/09

0901910026

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

SERVICELIVERY TRANS OTHER TRANSIT GR0UN

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
			I	I	0
19 Laundry and cleaning	19	0	J	J	0
20 Legal and professional services	20	200	K	K	0
21 Management fees	21	0			
22 Office supplies	22	7			
23 Pension and profit-sharing plans	23	0			
24 Postage	24	70	34 Total other expenses	34	1970
25 Rent on business property	25	0	35 Total expenses	35	12353
26 Repairs	26	0	36 Reduce expenses by total business credits	36	0
27 Subcontractor fees	27	3697	37 Total adjusted expenses	37	12353
			38 Net profit or loss	38	1233

PA120612L 02/08/10

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	2A	00
2b	Cost of items withdrawn for personal use	2B	00
2c	Balance (subtract Line 2b from Line 2a)	2C	00
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	00
6	Add Lines 1, 2c, 3, 4, and 5	6	00
7	Inventory at end of year	7	00
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	00
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			00
Trans. equipment	4C	0	0			00
Machinery	4D	0	0			0
Other (specify)						
	4E	0	0			0
	4F	0	0			00
	4G	0	0			00
	4H	0	0			00
	4I	0	0			00
	4J	0	0			0
	4K	0	0			0
	4L	0	0			00
	4M	0	0			00
	4N	0	0			00
	4O	0	0			00
	4P	0	0			0
5	Totals	0			5	0
6	Depreciation included in Schedule C-1				6	00
7	Balance (subtract Line 6 from Line 5). Enter here and on Part II, Line 13a				7	0

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: JENNIFER L. KAISER
Social Security Number (shown first): 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.

Table with columns: Kind of property, For Profit Property (YES/NO), Address. Row A: STORAGE UNITS, YES (checked), 179 CHURCH STREET, MORRISDALE, PA 16858.

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.

Main table for income and expenses. Columns: Property A, B, C (T, S, J). Rows: Income (Rent received: 4,622; Royalties received: 2), Expenses (Advertising: 3; Automobile and travel: 4; Cleaning and maintenance: 5; Commissions: 6; Insurance: 555; Legal and professional fees: 8; Management fees: 9; Mortgage interest: 10; Other interest: 1,530; Repairs: 165; Supplies: 3; Taxes - not based on net income: 1,423; Utilities: 15; Depreciation expense: 671; Other expenses (itemize): 167; Total Expenses: 4,514).

Income or Loss

Summary table for income or loss. Line 19: Income - Subtract Line 18 from Line 1 or 2: 108. Line 20: LOSS - Subtract Line 1 or 2 from Line 18 (check box, if a net loss). Line 21: Net Income or Loss: 108. Line 22: Rent or royalty income (loss) from PA S corporation(s) and partnerships. Line 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: 108.

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	1,233.
FROM SCHEDULE C TOTAL	<u>1,233.</u>
TOTAL BUSINESS INCOME - LINE 4	<u>\$ 1,233.</u>

STATEMENT 2
FORM PA-40, LINE 6
RENT, ROYALTY, PATENT OR COPYRIGHT INCOME

NET INCOME OR (LOSS) FROM SCHEDULE E.....	\$ 108.
TOTAL	<u>\$ 108.</u>

STATEMENT 3
SCHEDULE E, LINE 17 - STORAGE UNITS
OTHER RENTAL AND ROYALTY EXPENSES

BANK FEES.....	\$ 120.
POSTAGE.....	47.
TOTAL	<u>\$ 167.</u>

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 PHILIPSBURG, PA 16866	State	ZIP Code

TAXING AUTHORITY OF RESIDENCE

City, township or borough <u>PHILIPSBURG BORO</u>	Local tax rate – Taxpayer..... <u>1.0000</u> %
Number of months of residency..... <u>12</u>	Spouse..... %
School district number..... <u>17700</u>	Account number – Taxpayer.....
	Spouse.....

LEGAL RESIDENCE FOR THIS TAX YEAR (if changed within the year)

Taxpayer _____	Number of Months _____
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	25-1065143	Date	Preparer's Telephone Number
WALTER HOPKINS & COMPANY, LLP			
P.O. BOX 684			
PHILIPSBURG	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

SERVICELIVERY TRANS OTHER TRANSIT GROUN

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			
24 Postage	24	70	34 Total other expenses	34	1970
25 Rent on business property	25	0	35 Total expenses	35	12353
26 Repairs	26	0	36 Reduce expenses by total business credits	36	0
27 Subcontractor fees	27	3697	37 Total adjusted expenses	37	12353
			38 Net profit or loss	38	1233

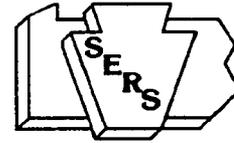
PA120612L 02/08/10

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 12c 12d 1300.00
b Employer identification number (EIN) 23-2172299		a Employee's social security number 178-66-2711
13 Statutory employee	Retirement plan	14 Other OPT-LST 52.00
	<input checked="" type="checkbox"/>	
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	Final Average Salary	: \$33,734.55
(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	: \$21,113.84
Your Birth Date	: 04/21/1972	Survivor's Birth Date	:
Your Sex	: F	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 align="center">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 align="center">WITHDRAWAL AMOUNT</p> <p align="center">none</p> <p align="center">\$0.00 (partial)</p> <p align="center">\$11,602.61 (total)</p>	<p align="center">MONTHLY BENEFIT</p> <p align="center">\$166.51</p> <p align="center">\$166.51</p> <p align="center">\$119.53</p>	
<p align="center">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 align="center">WITHDRAWAL AMOUNT</p> <p align="center">none</p> <p align="center">\$0.00 (partial)</p> <p align="center">\$11,602.61 (total)</p>	<p align="center">MONTHLY BENEFIT</p> <p align="center">\$164.85</p> <p align="center">\$164.85</p> <p align="center">\$118.34</p>	<p align="center">PRESENT VALUE TERM OF VALUE</p> <p align="center">\$41,123.15 20.7882 yrs</p> <p align="center">\$41,123.15 20.7882 yrs</p> <p align="center">\$29,520.54 20.7879 yrs</p>
<p align="center">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 align="center">WITHDRAWAL AMOUNT</p> <p align="center">none</p> <p align="center">\$0.00 (partial)</p> <p align="center">\$11,602.61 (total)</p>	<p align="center">MONTHLY BENEFIT</p> <p align="center">\$0.00</p> <p align="center">\$0.00</p> <p align="center">\$0.00</p>	<p align="center">SURVIVOR BENEFIT</p> <p align="center">\$0.00</p> <p align="center">\$0.00</p> <p align="center">\$0.00</p>
<p align="center">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 align="center">WITHDRAWAL AMOUNT</p> <p align="center">none</p> <p align="center">\$0.00 (partial)</p> <p align="center">\$11,602.61 (total)</p>	<p align="center">MONTHLY BENEFIT</p> <p align="center">\$0.00</p> <p align="center">\$0.00</p> <p align="center">\$0.00</p>	<p align="center">SURVIVOR BENEFIT</p> <p align="center">\$0.00</p> <p align="center">\$0.00</p> <p align="center">\$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



**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-

00102155C SWS01 DI-003

Scott Kaiser
 179 Church Street
 Morrisdale PA 16858-8325

Your Account Statement

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



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% X (Beginning balance + Ending balance - Net Investment change)).

Activity Highlights

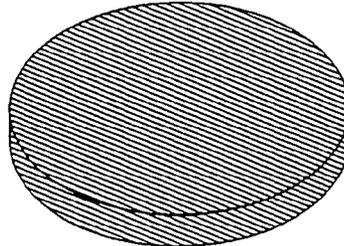
		<i>This Period</i> 10/01/2007-12/31/2007	<i>Plan Year-to-Date</i> 01/01/2007-12/31/2007
Beginning Balance		\$5,408.77	\$408.82
Additions	+ Your Contributions	\$1,272.90	\$5,050.68
	+ Employer Contributions	418.58	1,551.92
	+ Dividends and Earnings	62.55	151.38
	Total Additions	\$1,754.03	\$6,753.98

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

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

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", is 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 |
| _____ | 3. Stocks, bonds, securities and options |
| _____ | 4. Certificates of deposit |
| _____ | 5. Checking accounts, cash |
| _____ | 6. Savings accounts, money market and savings certificates |
| _____ | 7. Contents of safe deposit boxes |
| _____ | 8. Trusts |
| _____ | 9. Life insurance policies (indicate face value, cash surrender value and current beneficiaries |
| _____ | 10. Annuities |
| _____ | 11. Gifts |
| _____ | 12. Inheritances |
| _____ | 13. Patents, copyrights, inventions, royalties |
| _____ | 14. Personal property outside the home |
| _____ | 15. Businesses (list all owners, including percentage of ownership, and officer/director positions held by a party with company) |
| _____ | 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 |
| _____ | 20. Disability payments |
| _____ | 21. Litigation claims (matured/unmatured) |
| _____ | 22. Military/VA benefits |
| _____ | 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) |
| _____ | 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. * 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:

WEEKLY

MONTHLY

YEARLY

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	_____	\$500.00	_____
Maintenance	_____	_____	_____
Utilities:			
Electric	_____	\$ 70.00	_____
Gas	_____	_____	_____
Oil (Heating)	_____	\$109.00	_____
Telephone, Cable, Internet	_____	\$179.10	_____
Water/Sewage	_____	\$ 40.00	_____
Employment:			
Public Transportation	_____	_____	_____
Lunch	_____	_____	_____
Taxes:			
Real Estate	_____	_____	_____
Personal Property	_____	_____	_____
Per Capita	_____	_____	_____
Insurance:			
Homeowners	_____	_____	_____
Automobile	_____	\$ 35.91	_____
Health	_____	_____	_____
Life	_____	_____	_____
Accident	_____	_____	_____
Other (fire)	_____	_____	_____
Automobile:			
Payments	_____	_____	_____
Fuel	_____	_____	_____
Repairs	_____	_____	_____

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:

Credit Card(PSECU)	_____	\$308.00	Balance
Charge Account	_____	_____	\$14,888.33
Memberships	_____	_____	_____

Loans: ALL CBT

Consolidation	_____	\$356.97	Balances
Business (storage)	_____	\$235.89	\$ 8,787.08
Garage	_____	\$181.11	\$16,439.48
			\$13,792.65

Miscellaneous:

Household help	_____	_____	_____
Child Care	\$3.45/hr.	_____	_____
Papers/books/ magazines	_____	_____	_____
Cable	_____	_____	_____

Vacation	_____	_____	_____
Gifts	_____	_____	_____
Legal fees	_____	_____	_____
Charitable	_____	_____	_____
Other			
Cell Phone	_____	\$142.70	_____
Garbage	_____	\$ 27.00	_____
ValueCity Furniture	_____	\$100.00	_____
Northwest Consumer Discount	_____	\$161.40	_____

TOTAL EXPENSES \$2,420.08 per month

PROPERTY OWNED:

<u>DESCRIPTION</u>	<u>VALUE</u>	<u>OWNERSHIP</u>		
		H	W	J
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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:
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:
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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 CC
07/10/09
MAR 30 2010
S
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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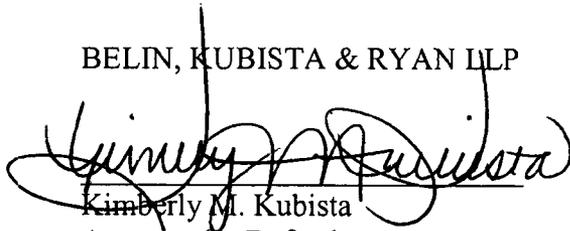
No. 08-542-CD

CERTIFICATE OF SERVICE

This is to certify that I have served a certified copy of Defendant's Inventory and Appraisal, 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

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FILED

APR 27 2010

0/11:50/15

William A. Shaw

Prothonotary/Clerk of Courts

CONF TO K. KAISER

2
NADOCJ

ORDER

NOW, this 26th day of April, 2010, following Pre-Trial Conference, it is the

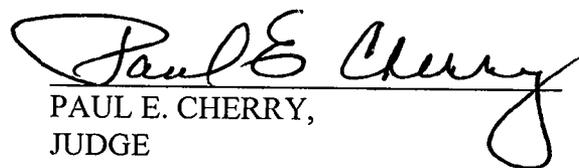
ORDER of this Court as follows:

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

:
:
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:
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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

:
:
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:
:
:
:

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.

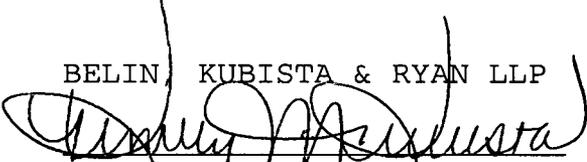
IX. Marital debts.

See inventory and appraisement.

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



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 Quote | Find a Dealer Near Search

1989 Ford Tempo GL - \$990

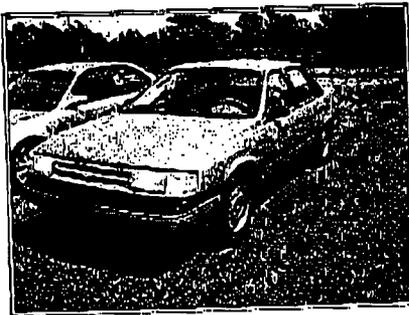
Dealer: Wallys Auto Sales

Call: 888-747-9631 Live Chat:

[Send to Email](#)

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: 1FAPPJ6X4KK216883

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 a 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?

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Wallys Auto Sales
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Last Name:

Email:

Phone: Day Evening

City:

State:

ZIP Code:

Do you have a trade-in? Yes No

Send Email

* Required

[Cars.com Privacy Statement](#)

About the Dealer

Wallys Auto Sales
888-747-9631

Live Chat:
5360 N Broadway St Wichita KS (Map)

[See All Used Inventory](#)
[Visit Dealer Website](#)

[Print this ad and bring it to the dealer.](#)

Partner Marketplace

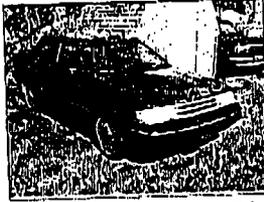
Financing
Good or average credit? [Get Low Interest, zero down auto finance options.](#)
No credit, poor credit or bad credit. [Vehicle finance for any credit situation.](#)

[More Categories: Car Insurance | Credit | Finance | Motor Oil](#)



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View all photos (10 total)

1989 Ford Tempo GL - \$1,400

Dealers: D.C. Motors/ City Wide Auto Credit
Call: 088-887-9834

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 CallFax Record Check

Features: Power Locks, Tilt Wheel, AM/FM, Cassette, Air Conditioning, Rear Defroster, Passenger Airbag, Driver Airbag, Power Steering

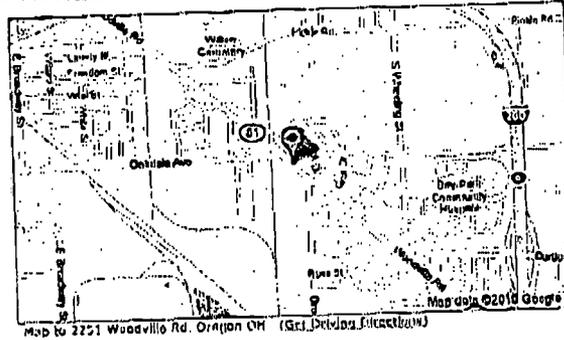
Seller's Note: 1989 Ford Tempo GL Visit us @ www.citywideautocredit.net to See More Pictures and get additional information. You can Apply for Financing at our website get directions and much more! Please call us @ 1-419-698-5259 or 1-888-887-9834 with all questions or to schedule a Test Drive Today We offer Top Quality Vehicles at Wholesale Prices with a FREE Warranty! Ask About our 100% GUARANTEED CREDIT APPROVAL! *WE Take Trade Ins* 0 reviews | Write a Review

About the Dealer

D.C. Motors/ City Wide Auto Credit
888-887-9834
2251 Woodville Rd. Oregon OH



Printed on May 4, 2010



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Date: 5/20/2010
Time: 02:55 PM

Clearfield County Court of Common Pleas
Receipt

NO. 1934864
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

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 appraisalment.

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.

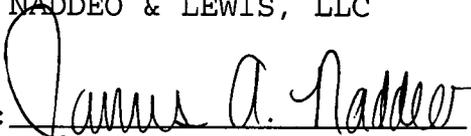
See inventory and appraisement.

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

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

JENNIFER L. KAISER

: NO. 08-542-CD

V.

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SCOTT J. KAISER

FILED

MAY 27 2010

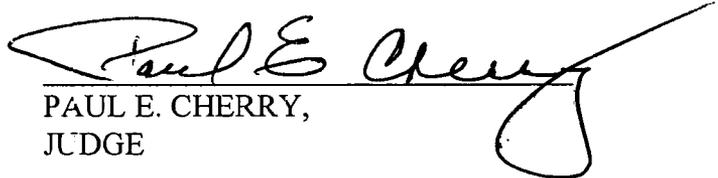
4
0/9:15/c (60)
William A. Shaw
Prothonotary/Clerk of Courts
Sent to NADPC
Kaiser

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 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

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.

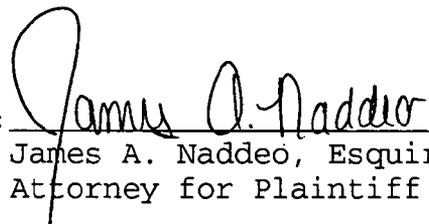
4. That the parties have been unable to negotiate a settlement.

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

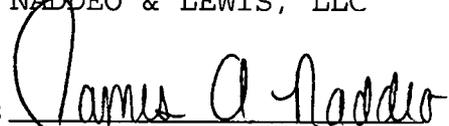
I, James A. Naddeo, Esquire, do hereby certify that a true and correct copy of Motion to Set a Master's Hearing filed in the above-captioned action was served on the following person and in the following manner on the 6th day of October, 2010:

First-Class Mail, Postage Prepaid

Kimberly M. Kubista, Esquire
Belin, Kubista & Ryan
15 North Front Street
PO Box 1
Clearfield, PA 16330

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 Praecepto 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 D. 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

No. 08-542-CD

V.

SCOTT J. KAISER

FILED *DCC/Atty:*
11/2/10/2010 *Khabista*
NOV 03 2010 *Naddep*
William A. Shaw
Promotory/Clerk of Courts *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 nor 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 *2cc Atty Kubista*
5 *0/10:45cm*
MAR -2 2011 *(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

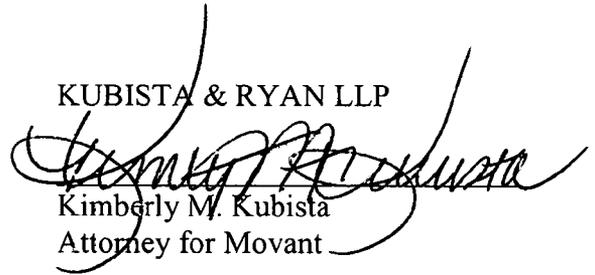
AND NOW, comes the Movant, SCOTT J. KAISER, by and through his attorney, Kimberly M. Kubista, and sets forth the following Motion for Telephone Testimony and in support thereof would aver as follows:

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

A handwritten signature in black ink, appearing to read 'Kimberly M. Kubista', written over the typed name and title.

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

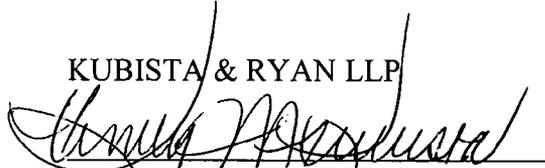
MOTION TO LEAVE RECORD OPEN

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

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01/10.42um 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.

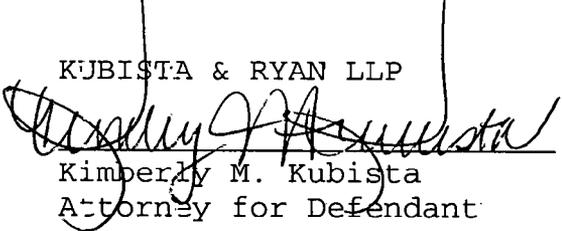
IX. Marital debts.

See inventory and appraisalment.

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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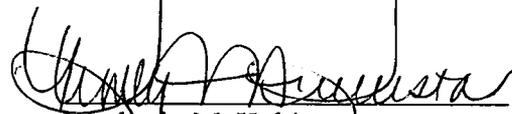
No. 08-542-CD

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
1-800-4-7-0084 • 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, 2000 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 equa. 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

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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

- 18. Pension plans
- 19. Retirement plans, Individual Retirement Accounts
- 20. Disability payments
- 21. Litigation claims
- 22. Military/V. A. benefits
- 23. Education benefits
- 24. Debts due, including loans, mortgages held
- 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

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

JENNIFER L. KAISER,
Plaintiff

vs.

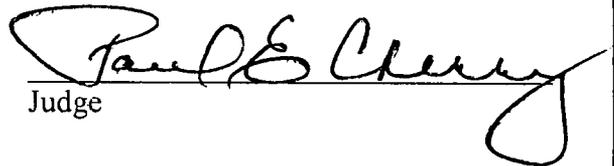
SCOTT J. KAISER,
Defendant

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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FILED
03/30/11
MAR 07 2011
30C
Att
K. Kubista
William A. Shaw
Prothonotary/Clerk of Courts

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

State _____ 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

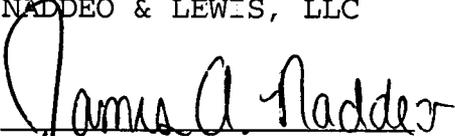
I, James A. Naddeo, Esquire, do hereby certify that a certified copy of Plaintiff's Supplemental Pre-Hearing Memorandum and Amended Inventory and Appraisement of Jennifer L. Kaiser, Plaintiff filed in the above-captioned action was served on the following person and in the following manner on the 15th 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

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.

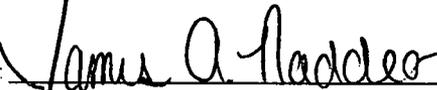
See inventory and appraisement.

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—

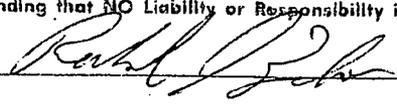
M Jennifer Kaiser

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

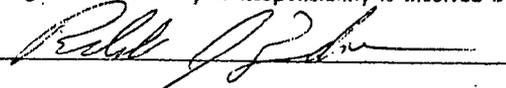
Address 420 N. 11th St. Philipsburg, PA 16866

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	APPRAISED 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



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 |
| _____ | 3. Stocks, bonds, securities and options |
| <u> </u> | 4. Certificates of deposit |
| _____ | 5. Checking accounts, cash |
| _____ | 6. Savings accounts, money market and savings certificates |
| _____ | 7. Contents of safe deposit boxes |
| _____ | 8. Trusts |
| _____ | 9. Life insurance policies (indicate face value, cash surrender value and current beneficiaries) |
| _____ | 10. Annuities |
| _____ | 11. Gifts |
| _____ | 12. Inheritances |
| _____ | 13. Patents, copyrights, inventions, royalties |
| _____ | 14. Personal property outside the home |
| _____ | 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 |
| _____ | 20. Disability payments |
| _____ | 21. Litigation claims (matured/unmatured) |
| _____ | 22. Military/VA benefits |
| _____ | 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) |
| _____ | 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

FILED
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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:

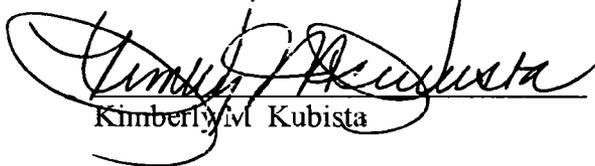
1. In order to effectuate a 50/50 split of the marital estate, Husband shall pay to Wife the sum of \$5,620.25 within ninety (90) days of the date of this Stipulation.

MISCELLANEOUS:

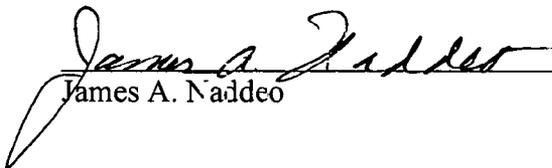
1. Husband and Wife shall cooperate in executing any and all documentation necessary to give effect to this agreement.

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. Naldeo


Jennifer L. Kaiser

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) SC Plaintiff(s) Attorney _____ Other _____
Special Instructions: _____

Defendant(s) Attorney _____ Other _____