#### **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :			port		CANDI	DATE		СОМ	<b>4ITTEE</b>	✓	LOBI	BYIST				
Name of Filing C	Committee, Cand	idate or L	obbyist:		GRE	EATE	R JOH	HNSTOWI	N REG	IONA	L PAC					
Street Address:	111 MARKE	T ST														
City:	JOHNSTOW	N						State:	PA			<b>Zip Code:</b> 15901				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	<b>~</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRI	E-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	<b>~</b>
report type)	ANNUAL REPOR	T 7. X	<b>Year</b> 2001					IG METHO						DISKE	TTE	
Name of Office S	Sought by Candid	late:						DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
	MO DAY YEAR							AR		1000	<u> </u>					
								11		6	2001		(SEE IN	ISTRUCTI	ONS FOR (	CODES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR			_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
			1 1		1		0	12		31	2001					
A. Amount Bro	ught Forward Fr	om Last F	Report				\$			16,2	91.30					
B. Total Monet	ary Contribution	s And Red	ceipts (Fron	Sche	dule	e I)	\$			7	'84.70					
C. Total Funds	Available (Sum	Of Lines A	A and B)				\$			17,0	76.00					
D. Total Expen	ditures (From So	hedule II	II)				\$			1,0	00.00					
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$			16,0	76.00					
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	chedu	le II	I)	\$				0.00					
G. Unpaid Debt	s And Obligation	s (From	Schedule IV	<b>/</b> )			\$				0.00			1		
				AFF	FID/	AVI	T SE	CTION								
PART I - If this is	s a Committee re	port, trea	asurer sign	here.	If th	nis is	a Can	ndidate re	port, c	andi	date sig	ın here.				
I swear (or affirm) correct and comple		cluding th	e attached sc	hedule	s file	d on	paper o	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true
Sworn to and subs	cribed before me t day of	nis	20							s	ignature	of Perso	n Submit	ting Rep	oort	
			_				- -					Prin	ted Name	e		
My Commission Ex	Signa opires	ture										Ema	il			
	мо	D	AY	YR			_		Are	ea Cod	e	Daytim	e Telepi	hone Nu	mber	
Part II- If this is	a report of a ca	ndidate's	authorized	Comr	nitte	ee, C	andida	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende		my knowl	edge and beli	ief this	s poli	itical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me th	is									s	ignature o	of Candid	late		
	day of						_					Drinto	d Name			
	Signatur	<u> </u>					-					Printe	u Name			
My Commission Exp	_	-										Ema	il			
	МО	D	PAY	YR	ł		-		Area	Code		Da	aytime T	elephor	e Numb	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period		
GREATER JOHNSTOWN REGIONAL PAC	From:	To:	12/31/2001
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	Period (1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)			
Contributions Received From Political Committees (Part A)		\$	0.00
All Other Contributions (Part B)		\$	0.00
TOTAL for the Reporting	Period (2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			
Contributions Received From Political Committees (Part C)		\$	0.00
All Other Contributions (Part D)		\$	750.00
TOTAL for the Reporting	Period (3)	\$	750.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	Period (4)	\$	34.70
		1	
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa		\$	784.70

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			•			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	•	•			•	•		PAGE TOTAL

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

0.00

## ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee of Candidate					Reporting Period From: To:					
					DATE		ı	AMOUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$	0	0.00	
City	State	Zip Code (Plus 4)	)							

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

**PAGE TOTAL \$** 0.00

#### **PART C**

### **Contributions Received From Political Committees**

**OVER \$250.00** 

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate Repor			ting Period					
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00	

## ALL OTHER CONTRIBUTIONS

**OVER \$250.00** 

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Reporting Period

Name of Filing Committee or Candidate

GREATER JOHNSTOWN REGIONAL	GREATER JOHNSTOWN REGIONAL PAC				n:		То	To: <u>12/31/200</u>	
					D/	ATE		АМС	UNT
Full Name of Contributor ELMER C LASLO					мо	DAY	YEAR		
Mailing 501 CORRIGAN DRIVE Address							\$	750.00	
City JOHNSTOWN State Zip Code (Plus 4) PA 15904			4)	12	17	2001			
Employer Name 1ST SUMMIT BAN	K	•			Occupat	ion P	RESIDE	NT/CEO	
Employer Mailing Address/Principal Business	Place of		City			State		Zip Code (	(Plus 4)
125 DONALD LANE			JOHNSTO	WN		PA		15904	
Enter Grand Total of Part C on So	chedule I, Detail	led Sumr	nary Page,	Section	on 3.		4		<b>750.00</b>

## OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	1		Report	ing Perio	d				
GREATER JOHNSTOWN REGIONAL PAGE	GREATER JOHNSTOWN REGIONAL PAC From					То:	12/31/2001		
				D	ATE		AMOUNT		
Full Name  AMERISERY FINANCIAL				МО	DAY	YEAR			
Mailing Address 216 FRANKLIN STR	REET						\$	34.70	
City JOHNSTOWN	<b>State</b> PA	<b>Zip Code (</b> 1 15907	Plus 4)	12	31	2001			
Receipt Description INTEREST INC	COME								

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

#### **SCHEDULE II**

#### **IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
GREATER JOHNSTOWN REGIONAL PAC	From:	To:	12/31/2001
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidat	:e		Reporting	g Period				
	Fr					То:	Го:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>\$</b>	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL	
Section 2.	iedule II, III-KII	ia Contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL	
						\$	0.00	

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate					Re	porting	Period					
					From:			То	То:			
					<u> </u>		DATE				AMOUNT	
Full Name of Contributor						мо	DAY	YEAR	1			
Mailing Address										\$		0.00
City	State		Zip Code(F	Plus 4)								
Employer of Contributor	•		•			Occupa	ation					
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	cripti	ion of (	Contributio	on
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOT	ΓAL
Summary Page, Section 3.								0.00				

1,000.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporti							
GREATER JOHNSTOWN REGIONAL PAC						То:	12/31/2001	
		AMOUNT						
To Whom Paid THE GLEASON AGENCY, INC.				DAY	YEAR			
Mailing Address 551 MAIN STREET,	SUITE 204		12	11	2001	\$	1,000.00	
City JOHNSTOWN State Zip Code (Plus 4) PA 15907				Description of Expenditure LIABILITY INSURANCE				
	•	•	•				PAGE TOTAL	

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.