#### **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 :	on 200:	1154				eport led B		CAND	DATE		СОМ	<b>ITTEE</b>	<b>✓</b>	LOBI	BYIST	
Name of Filing C	Committee, Candid	late or L	obbyist:		GRI	EATE	R JOH	INSTOW	'N REG	IONA	L PAC					
Street Address:	111 MARKET	ST														
City:	JOHNSTOWN							State:	PA			Zip Cod	de: 1	5901		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	≣-	5. <b>X</b>	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	~
report type)	ANNUAL REPORT	7.	<b>Year</b> 2003					IG METH CHECK O				PAPER		$\overline{}$	DISKE	TTE
Name of Office S	Sought by Candida	ite:	-					DATE (	)F ELE	CTIC	N	District Number	Office Code	Par	ty Code	County Code
								МО	DAY	YI	AR	Number	Touc			Couc
								11		4	2003		(SEE IN	ISTRUCTI	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	Y	EAR	FC	R OFFI	CE USE	ONLY	
Expenditures	irom:		1 1		1	ı T	<u> </u>	10	)	20	2003					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			48,	572.89					
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 2,033										033.16						
C. Total Funds Available (Sum Of Lines A and B) \$ 50,606.									506.05							
D. Total Expenditures (From Schedule III) \$ 2,899.									399.37							
E. Ending Cash	Balance (Subtrac	t Line D	From Line C	)			\$			47,7	06.68					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Scl	hedu	le I	Ί)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			•		
				AFF	ID	AVI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere.	If th	his is	a Can	ndidate r	eport, e	andi	date sig	jn here.				
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	attached sche	edules	s file	ed on	paper (	or by elec	tronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , true
Sworn to and subs	cribed before me thi day of	s	20							S	Signature	of Perso	n Submit	ting Rep	ort	
	Signati	ıre					-					Prin	ted Nam	e		
My Commission Ex	cpires						_					Ema	il			
	мо	D	AY	YR					Ar	ea Cod	le	Daytim	e Telepi	none Nu	mber	
Part II- If this is	a report of a can	didate's	authorized C	Comn	nitte	ee, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and belief	f this	poli	itical	commi	ittee has ı	not viola	ted ar	y provis	ions of th	e act of J	une 3,1	937 (P.L.	1333,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate		
	day of						-					Printe	d Name			
	Signature						-									
My Commission Exp	ires											Ema	11			
	МО	D	AY	YR	1		•		Area	Code		D	aytime 1	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period		
GREATER JOHNSTOWN REGIONAL PAC	From:	To:	10/20/2003
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)		\$	2,000.00
TOTAL for the Reporting	Period (3)	\$	2,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	Period (4)	\$	33.16
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 Page 1, 2,3 and 4; also enter this amount on Page1, Report Cover Page 2, 2,3 and 4, 2,3 and 4, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 4,3 also enter this amount on Page 3, 2,3 and 3, 3,4 also enter this amount on Page 3, 3,4 also enter this enter this amount on Page 3, 3,4 also enter this		\$	2,033.16

#### **PART A**

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

\$50.01 TO \$250.00

Name of Filing Comm	Reporting Period						
		From:		То	:		
		I		DATE			AMOUNT
Full Name of Contribut	ing Committee		МО	DAY	YEAR		
Mailing Address						\$	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

## 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 Fining Committee of Candidate				Reporting Period From: To:					
			l		DATE			AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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.)

Name of Filing Committee or Candidate				Rep	orting Pe	riod			
GREATER JOHNSTOWN REGIONAL PAC	:			Fror	m:		To	<b>)</b> :	10/20/2003
					D/	ATE		AM	IOUNT
Full Name of Contributor ELMER C. LASLO					МО	DAY	YEAR		
Mailing 501 CORRIGAN DRIVI	<u> </u>							\$	1,000.00
City JOHNSTOWN	State	Zip	Code (Plus	<del>4</del> )	9	17	2003		
	PA	15	904						
Employer Name 1ST SUMMIT BANK					Occupat	tion	EO/PRE	ESIDENT	
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code	e (Plus 4)
125 DONALD LANE			JOHNSTO	NWO		PA		15904	
Full Name of Contributor RUSSELL GRAMLICH					МО	DAY	YEAR		
Mailing 101 LUNA LANE								\$	500.00
City JOHNSTOWN	State	Zip	Code (Plus	i 4)	9	17	2003		
	PA	15	904						
Employer Name GREATER JOHNSTOW	N REGIONAL PAC, II	NC.			Occupat	t <b>ion</b>	RESIDE	ENT	
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code	e (Plus 4)
111 MARKET STREET			JOHNSTO	OWN		PA		15901	
Full Name of Contributor					МО	DAY	YEAR		
RUSSELL GRAMLICH									
Mailing 101 LUNA LANE Address								\$	500.00
City JOHNSTOWN	State	Zip	Code (Plus	4)	10	20	2003		
	PA	15	904						
Employer Name GREATER JOHNSTOW	N REGIONAL PAC, II	NC.			Occupat	t <b>ion</b>	RESIDE	ENT	
Employer Mailing Address/Principal Plac Business	e of		City		-	State		Zip Code	e (Plus 4)
111 MARKET STREET			JOHNSTO	OWN		PA		15901	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL

2,000.00

\$

## 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 Candida	te		Report	ing Perio	d			
GREATER JOHNSTOWN REGIONAL P	AC		From:			To:		10/20/2003
				D	ATE			AMOUNT
Full Name  AMERISERV FINANCIAL				МО	DAY	YEAR		
Mailing Address 216 FRANKLIN S	State Zin Code (Plus 4)						\$	33.16
City JOHNSTOWN	<b>State</b> PA	<b>Zip Code (</b> 15907	Plus 4)	9	30	2003		
Receipt Description INTEREST I	NCOME	·					•	
Enter Grand Total of Part E on Sche	edule I. Detailed	d Summary Page.	Section	4.				PAGE TOTAL
	, <u>-</u>						\$	33.16

#### **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:	10/20/2003
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	<b>\$</b>	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)	<b>\$</b>	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			
			From:		То:	<b>)</b> :	
				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 Candidat	e				Re	porting P	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Car	ndidate		Reporti	ng Period			
GREATER JOHNSTOWN REGION	IAL PAC		From			То:	10/20/2003
				DATE			AMOUNT
To Whom Paid WESSEL & COMPANY			МО	DAY	YEAR		
Mailing Address 215 MAIN ST	REET		10	20	2003	\$	149.37
<b>City</b> JOHNSTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15901		otion of Exp NTING FEE			
To Whom Paid THE GLEASON AGENCY, INC.			мо	DAY	YEAR		
Mailing Address 551 MAIN ST	REET, SUITE 204		10	8	2003	\$	1,250.00
City JOHNSTOWN		otion of Exp					
To Whom Paid COMMITTEE TO ELECT KATHY HOLTZMAN			МО	DAY	YEAR		
Mailing Address			10	2	2003	\$	500.00
City	State	Zip Code (Plus 4)		otion of Exp IBUTION	penditure		
To Whom Paid FRIENDS OF P.J. STEVENS			мо	DAY	YEAR		
Mailing Address P.O. BOX 17	0		10	8	2003	\$	500.00
City CARROLLTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15722		otion of Exp IBUTION	penditure		
To Whom Paid FRIENDS OF MILAN GJURICH			мо	DAY	YEAR		
Mailing Address P.O. BOX 17	0		10	8	2003	\$	500.00
City CARROLLTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15722		tion of Exp IBUTION	enditure		
Enter Grand Total of Ever-	tures on Dage 1. Da	uport Cover Page There					PAGE TOTAL
Enter Grand Total of Expendi	tures on Page 1, Re	port Cover Page, Item L	<i>)</i> .			\$	2,899.37