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 2001 | 154 | | | | port ed B | | CANDI | DATE | | СОМ | 4ITTEE | ✓ | LOBI | BYIST | | |
|---|---------------------------------|------------|------------------------|--------|--------|--------------|----------------|-------------|----------|--------|------------|--------------------|----------------|----------|-----------|----------------|----|
| Name of Filing C | Committee, Candid | late or L | obbyist: | • | GRE | ATE | R JOH | HNSTOW | N REG | IONA | L PAC | | | | | | |
| Street Address: | 111 MARKET | ST | | | | | | | | | | | | | | | |
| City: | JOHNSTOWN | | | | | | | State: | PA | | | Zip Cod | le: 15 | 5901 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRIMARY | PRE- | - | 2. X | 30 DA PRIMA | | POST- | 3. | | AMENDM REPORT | | Yes | No | Y | |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY ELECTION | PRE | ≣- | 5. | 30 DA ELECT | • • | POST- | 6. | | TERMINA REPORT | | Yes | No | ٧ | |
| report type) | ANNUAL REPORT | 7. | Year 2004 | | | | | NG METHO | | | | PAPER | | \ | DISKE | TTE | |
| Name of Office S | Sought by Candida | ite: | • | | Ī | | | DATE O | F ELE | СТІО | N | District Number | Office Code | Par | ty Code | County Code | , |
| | мо | | | | | | | МО | DAY | YE | AR | - rumber | Todac | | | Couc | |
| | | | | | | | | 11 | | 2 | 2004 | | (SEE IN | STRUCTI | ONS FOR C | ODES) | _ |
| Summary of Expenditures | Receipts and | МО | DAY | /EAR | l | | _ | МО | DAY | YE | AR | FO | R OFFI | CE USE | ONLY | | |
| | | | 1 1 | | 1 | Т | 0 | 4 | | 12 | 2004 | | | | | | |
| A. Amount Bro | ught Forward Fro | m Last R | eport | | | | \$ | | | 49,0 | 76.36 | | | | | | |
| B. Total Monet | ary Contributions | And Rec | eipts (From S | Sche | dule | ı) | \$ | | | 7,1 | 10.18 | | | | | | |
| C. Total Funds | Available (Sum O | f Lines A | and B) | | | | \$ | | | 56,1 | .86.54 | | | | | | |
| D. Total Expen | ditures (From Sch | edule II | I) | | | | \$ | | | 1,3 | 13.75 | | | | | | |
| E. Ending Cash | Balance (Subtrac | t Line D | From Line C) |) | | | \$ | | | 54,8 | 72.79 | | | | | | |
| F. Value Of In- | Kind Contribution | s Receiv | ed (From Sch | nedu | le II | [) | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obligations | (From S | Schedule IV) | | | | \$ | | | | 0.00 | | | 1 | | | |
| | | | | AFF | IDA | ٩VI | T SE | CTION | | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign he | ere. 1 | If th | is is | a Can | ndidate r | eport, d | candi | date sig | ın here. | | | | | |
| I swear (or affirm) correct and comple |) that this report, inc ete. | luding the | attached sche | dules | s file | d on | paper (| or by elect | ronic m | edium | , are to t | he best o | f my kno | wledge | and belie | ef , true | Đ, |
| Sworn to and subs | cribed before me thi day of | s | 20 | | | | | | | S | ignature | of Perso | n Submit | ting Rep | oort | | |
| | Signatu | ıre | | | | | - | | | | | Prin | ted Nam | e | | | • |
| My Commission Ex | cpires | | | | | | _ | | | | | Ema | il | | | | |
| | мо | D | AY | YR | | | | | Arc | ea Cod | e | Daytim | e Telepi | none Nu | mber | | |
| Part II- If this is | a report of a can | didate's | authorized C | omn | nitte | e, C | andida | ate shall | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of ed. | ny knowl | edge and belief | this | polit | tical | commi | ittee has n | ot viola | ted an | y provis | ions of th | e act of J | une 3,1 | 937 (P.L. | 1333, | ١ |
| Sworn to and subso | ribed before me this | | | | | | | | | | S | ignature o | of Candid | ate | | | ۱ |
| | day of | | | | | | _ | | | | | Printe | d Name | | | | . |
| | Signature | | | | | | - | | | | | | | | | | . |
| My Commission Exp | pires | | | | | | | | | | | Ema | il | | | | |
| | МО | D | AY | YR | | | - | | Area | Code | | Da | aytime T | elephon | ie Numbe | er | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting Period | | |
|--|------------------|-----|-----------|
| GREATER JOHNSTOWN REGIONAL PAC | From: | To: | 4/12/2004 |
| 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) | | \$ | 7,000.00 |
| TOTAL for the Reporting | Period (3) | \$ | 7,000.00 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) | | | |
| TOTAL for the Reporting | Period (4) | \$ | 110.18 |
| | | Τ | |
| 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 | | \$ | 7,110.18 |

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

| | this Part to itemize onl with an aggregate val | | | | | | | |
|-------------------------|---|----------------|----|---------|--------|------|---------------|------------|
| Name of Filing Comm | nittee or Candidate | | Re | porting | Period | | | |
| | | | Fr | om: | | То | : | |
| | | • | | | DATE | | | AMOUNT |
| Full Name of Contributi | ing Committee | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus | 4) | | | | | |
| | • | • | | • | • | • | $\overline{}$ | PAGE TOTAL |

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: | | | | | |
|---------------------------------------|-------|-------------------|---|----|----------------------------|------|----|--------|--|--|
| | | | | | DATE | | | AMOUNT | | |
| Full Name of Contributor | | | | МО | DAY | YEAR | | | | |
| Mailing Address | | | | | | | \$ | 0.00 | | |
| City | State | Zip Code (Plus 4) | 1 | | | | | | | |

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 | lame of Filing Committee or Candidate | | | | Reporting 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 Scheo | dule I, Detailed Sum | 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.)

| Name of Filing Committee or Candidate | ame of Filing Committee or Candidate | | | | | riod | | | |
|--|--------------------------------------|----------|------------|--------------------------|----------------------|-------|---------|--------------|--------------|
| GREATER JOHNSTOWN REGIONAL PA | С | | | Fron | n: | | To |): | 4/12/2004 |
| | | | | | D/ | ATE | | , | AMOUNT |
| Full Name of Contributor M.E. PASQUERILLA | | | | | мо | DAY | YEAR | | |
| Mailing 945 MENOHER BOUL | EVARD | | | | | | | \$ | 2,000.00 |
| City JOHNSTOWN | State PA | | Code (Plus | : 4) | 4 | 7 | 2004 | | |
| Employer Name CROWN AMERICAN (| CORPORATION | | | | Occupat | tion | CEO/PRE | SIDEN | NT. |
| Employer Mailing Address/Principal Place of Business City | | | | | | State | | Zip Co | ode (Plus 4) |
| Full Name of Contributor FRED S. SUPPES | | | | | МО | DAY | YEAR | | |
| Mailing 101 MAIN STREET Address | | | | | | | | \$ | 2,000.00 |
| City JOHNSTOWN | State PA | | Code (Plus | · 4) | 4 | 7 | 2004 | | |
| Employer Name SUPPES MOTOR SAL | ES | <u>I</u> | | | Occupation PRESIDENT | | | | |
| Employer Mailing Address/Principal Pla Business | ce of | | City | | l | State | | Zip Co | ode (Plus 4) |
| Full Name of Contributor ELMER C. LASLO | | | | | МО | DAY | YEAR | | |
| Mailing 501 CORRIGAN DRIV | /E | | | | | | | \$ | 1,000.00 |
| City JOHNSTOWN | State PA | | Code (Plus | · 4) | 4 | 7 | 2004 | | |
| Employer Name 1ST SUMMIT BANK | | | | Occupation CEO/PRESIDENT | | | NT | | |
| Employer Mailing Address/Principal Place of Business City | | | | | State | | Zip Co | ode (Plus 4) | |

| Full Name of Contributor KIM KUNKLE | мо | DAY | YEAR | | | | |
|--|----------------------------------|-----|------|---------|-------------|--------|-------------------|
| Mailing Address 2221 CRABTREE LANE City 10 UNICTOWN State Zip Code (Plus 4) | | | | | 1 | 2004 | \$ 2,000.00 |
| City JOHNSTOWN | i p Code (Plus 4) 5905 | 4 | 1 | 2001 | | | |
| Employer Name LAUREL HOLDING | 5 | · | | Occupat | i on | RESIDE | NT |
| Employer Mailing Address/Principal Place of Business | | | City | | State | | Zip Code (Plus 4) |

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

| PAGE TOTAL |
|----------------|
| \$ 7,000.00 |

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 Candidate | Name of Filing Committee or Candidate Repor | | | | | | | | |
|---------------------------------------|---|-------------------------|---------|---|-----|------|------------------|--|--|
| GREATER JOHNSTOWN REGIONAL PAC | GREATER JOHNSTOWN REGIONAL PAC From: | | | | | To: | 4/12/2004 | | |
| | | | | D | ATE | | AMOUNT | | |
| Full Name AMERISERV FINANCIAL | МО | DAY | YEAR | | | | | | |
| Mailing Address 216 FRANKLIN STRE | ET | | | | | | \$ 110.18 | | |
| City JOHNSTOWN | State PA | Zip Code (15907 | Plus 4) | 3 | 31 | 2004 | | | |
| Receipt Description INTEREST INCOME | | | | | | | | | |

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

PAGE TOTAL \$ 110.18

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: | <u>4/12/2004</u> |
| 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 Candid | ate | | Reporting | g Period | | | |
|------------------------------------|--------------------|-----------------------|-----------|----------|------|-----------|------------|
| | | | From: | | | To: | |
| | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | |
| Description of Contribution: | | | | | | | |
| Enter Grand Total of Part F on S | chedule II, In-Kir | nd Contributions Deta | iled Sum | mary Pag | ge, | | PAGE TOTAL |
| Section 2. | | | | | | \$ | 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candida | Name of Filing Committee or Candidate | | | | | porting | Period | | | | |
|--|---------------------------------------|---------|------------|---------|----------|-----------|-----------|------|-------|---------|-------------|
| | | | | | Fro | m: | | 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 | ripti | on of C | ontribution |
| Enter Grand Total of Part G on S | chedule II, I | In-Kind | Contributi | ons De | taile | ed | | | | | PAGE TOTAL |
| Summary Page, Section 3. | | | | | | | 0.00 | | | | |

STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate GREATER JOHNSTOWN REGIONAL PAC | | | Reporting Period | | | | |
|---|--------------------|-----------------------------------|--|------|------|-----|------------|
| | | | From | | | То: | 4/12/2004 |
| | | | | DATE | | | AMOUNT |
| To Whom Paid WESSEL & COMPANY, CPAS | | | МО | DAY | YEAR | | |
| Mailing Address 215 MAIN STREET | | | 2 | 20 | 2004 | \$ | 313.75 |
| City JOHNSTOWN | State PA | Zip Code (Plus 4) 15901 | Description of Expenditure ACCOUNTING FEES | | | | |
| To Whom Paid GEIST FOR ASSEMBLY | | | мо | DAY | YEAR | | |
| Mailing Address | | | 3 | 23 | 2004 | \$ | 500.00 |
| City | State | Zip Code (Plus 4) | Description of Expenditure CONTRIBUTION | | | | |
| To Whom Paid HOUSE DEMOCRATIC CAMPAIGN COMMITTEE | | | мо | DAY | YEAR | | |
| Mailing Address | | | 3 | 23 | 2004 | \$ | 500.00 |
| City | State | Zip Code (Plus 4) | Description of Expenditure CONTRIBUTION | | | | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | | PAGE TOTAL |

1,313.75