



Home Nursing Agency

Community Services

201 CHESTNUT AVE.
P.O. BOX 352
ALTOONA, PA 16603-0352
814-946-5111
FAX 814-941-1648
1-800-345-6262

October 22, 2001

Mr. Robert Kearns
c/o Mr. Anthony J. Zanoni, Esq.
513 Allegheny Street
Hollidaysburg, PA 16648

Dear Mr. Kearns,

I would like to take this opportunity to introduce myself to you. I am the child, adolescent, and family therapist at the Children and Adolescent Partial Hospital (CAPH) program. I have been working with your daughter, Stephanie Kearns, since July of 2000.

Stephanie has expressed a desire to discuss her feelings with you regarding past and present issues. Generally, Stephanie has questions about her deceased grandmother and her past and present relationship with you. It is my goal to assist Stephanie with identifying and communicating her feelings to achieve a sense of resolution.

I am available to conduct a family session on Monday, November 5, 2001 at 7 p.m. at Zion Lutheran Church in Hollidaysburg, PA. If this appointment is convenient for you, please contact me at (814) 943-0414 to confirm. I look forward to making your acquaintance.

Sincerely,

Susan E. Friedenberger, M.Ed., C.R.C.
Child/Adolescent and Family Therapist

cc: Ms. Lou A. Frederick
Ms. Paula Aigner, Esq.
Ms. Beverly Myers, Esq.
Ms. Janice Meadows