

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2009 JAN 30 A 10 24

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) S&T BANK PAC		2. FEC IDENTIFICATION NUMBER C00263483
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 600 PHILADELPHIA STREET, PO BOX 190		
CITY, STATE and ZIP CODE INDIANA PA 15701		
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<u>7/1/99</u> through <u>12/31/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>			\$ 1,801.00
(b) Cash on Hand at Beginning of Reporting Period		\$ 901.00	
(c) Total Receipts (from Line 19)		\$ 8,780.00	\$ 8,780.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 9,681.00	\$ 10,581.00
7. Total Disbursements (from Line 20)		\$ 1,850.00	\$ 2,750.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 7,831.00	\$ 7,831.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0.00	For further information contact: Federal Election Commission 888 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer SHARON E. O'NEIL	Date 1/20/99
Signature of Treasurer <i>Sharon O'Neil</i>	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/7/91)

NAME OF COMMITTEE S&T BANK PAC.		REPORT COVERING PERIOD FROM 7/1/99 TO 12/31/99		
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
	a. Individual/Persons Other Than Political Committees:			
	i. Itemized (use Schedule A)	2,375.00	2,375.00	11(a)(i)
	ii. Unitemized	6,405.00	6,405.00	11(a)(ii)
	iii. Total	8,780.00	8,780.00	11(a)(iii)
	b. Political Party Committees			11(b)
	c. Other Political Committees (such as PACs)			11(c)
	d. Total Contributions	8,780.00	8,780.00	11(d)
12.	Transfers From Affiliated/Other Party Committees			12
13.	All Loans Received			13
14.	Loan Repayments Received			14
15.	Offsets To Operating Expenditures (Refunds, Reberies, etc.)			15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17.	Other Federal Receipts (Dividends, Interest, etc.)			17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts	8,780.00	8,780.00	19
20.	Total Federal Receipts	8,780.00	8,780.00	20
II. Disbursements				
21.	Operating Expenditures:			
	a. Shared Federal/Non-Federal Activity (from Schedule H4):			
	i. Federal Share			21(a)(i)
	ii. Non-Federal Share			21(a)(ii)
	b. Other Federal Operating Expenditures			21(b)
	c. Total Operating Expenditures			21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	150.00	650.00	23
24.	Independent Expenditures (use Schedule E)			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26.	Loan Repayments Made			26
27.	Loans Made			27
28.	Refunds of Contributions To:			
	a. Individual/Persons Other Than Political Committees			28(a)
	b. Political Party Committees			28(b)
	c. Other Political Committees (such as PACs)			28(c)
	d. Total Contribution Refunds	1,700.00	2,100.00	28(d)
29.	Other Disbursements	1,850.00	2,750.00	29
30.	Total Disbursements	1,850.00	2,750.00	30
31.	Total Federal Disbursements	1,850.00	2,750.00	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	8,780.00	8,780.00	32
33.	Total Contribution Refunds (from line 28d)	0.00	0.00	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	8,780.00	8,780.00	34
35.	Total Federal Operating Expenditures	0.00	0.00	35
36.	Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37.	Net Operating Expenditures	0.00	0.00	37

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 3 OF 6
FOR LINE NUMBER 11(a)(1)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

S&T BANK PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BRUCE SALOME 217 FOREST RIDGE ROAD INDIANA PA 15701	S&T BANK	9/7/99	\$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): CONTRIBUTION TO PAC	Occupation EVP & TRUST GROUP MANAGER	Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code JAMES C MILLER 207 CONCORD STREET INDIANA PA 15701	S&T BANK	8/30/99	\$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): CONTRIBUTION TO PAC	Occupation PRESIDENT & CEO	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code ROBERT E ROUT 136 CONCORD STREET INDIANA PA 15701	S&T BANK	8/30/99	\$325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): CONTRIBUTION TO PAC	Occupation EVP & CFO	Aggregate Year-to-Date > \$ 325.00	
D. Full Name, Mailing Address and ZIP Code J JEFFREY SHEAD 221 FOREST ROAD INDIANA PA 15701	S&T BANK	8/30/99	\$325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): CONTRIBUTION TO PAC	Occupation EVP & SR LOAN ADMIN OFFICER	Aggregate Year-to-Date > \$ 325.00	
E. Full Name, Mailing Address and ZIP Code JAMES G BARONE 117 TIMBERSPRINGS LANE INDIANA PA 15701	S&T BANK	9/7/99	\$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): CONTRIBUTION TO PAC	Occupation EVP & TREASURY/INVESTMENT GROUP MANAGER	Aggregate Year-to-Date > \$ 250.00	
F. Full Name, Mailing Address and ZIP Code TODD BRICE 124 NICOLA LANE INDIANA PA 15701	S&T BANK	9/20/99	\$325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): CONTRIBUTION TO PAC	Occupation SVP & COMMERCIAL LOAN OFFICER 5	Aggregate Year-to-Date > \$ 325.00	
G. Full Name, Mailing Address and ZIP Code EDWARD A ONDERICK 4 WHITE'S WOODS TRAIL INDIANA PA 15701	S&T BANK	9/20/99	\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): CONTRIBUTION TO PAC	Occupation SVP & RETAIL LENDING DIVISION MANAGER	Aggregate Year-to-Date > \$ 200.00	

SUBTOTAL of Receipts This Page (optional) **\$2,175.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE **4** OF **6**
FOR LINE NUMBER **11(a)(1)**

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NAME OF COMMITTEE (In Full)

S&T BANK PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ERNEST J DRAGANZA 33 COUNTRY FARM LANE HARRISON CITY PA 15636-1302	S&T BANK	9/10/99	\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): CONTRIBUTION TO PAC	Occupation VICE PRESIDENT		Aggregate Year-to-Date \$ 200.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-to-Date \$
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-to-Date \$
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-to-Date \$
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-to-Date \$
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-to-Date \$
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-to-Date \$

SUBTOTAL of Receipts This Page (optional) **\$ 200.00**

TOTAL This Period (last page this line number only) **\$2,375.00**

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.

NAME OF COMMITTEE (In Full)
S&T BANK PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CITIZENS FOR MCQUOWN 195 PHILADELPHIA STREET INDIANA PA 15701	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/27/99	\$200.00
CITIZENS TO ELECT RANDY DEGENKOLB 215 SEBRING ROAD MARION CENTER PA 15759	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/5/99	\$500.00
CITIZENS FOR MCQUOWN 195 PHILADELPHIA STREET INDIANA PA 15701	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/5/99	\$300.00
LINDA MOORE MACK FOR CLERK OF COURTS 74 ACORN STREET INDIANA PA 15701	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/99	\$200.00
BERNIE SMITH FOR COUNTY COMMISSIONER 4826 WARREN RD INDIANA PA 15701	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/99	\$500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	\$1,700.00
TOTAL This Period (last page this line number only)	\$1,700.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)

S&T BANK PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement CONTRIBUTION Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/6/99	Amount of Each Disbursement This Period \$150.00
SANTORUM 2000 RICK SANTORUM 8623 LEXINGTON PLACE WEXFORD PA 15090	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	\$150.00
TOTAL This Period (last page this line number only)	\$150.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 1-24-00
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>SMU</i> PREPARER	1-30-00 DATE PREPARED