

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER

OCT 20 A 10:17 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. SHARON O'NEILL

S&I BANK FAC

ADDRESS (number and street) 800 PENNSYLVANIA STREET

PO BOX 190

Check if different than previously reported. (ACC) INDIANA PA 15791

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 00263483

3. IS THIS REPORT NEW OR AMENDED (X) (N) (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 07 03 2004 through 09 30 2004

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 O'NEILL

Signature of Treasurer Sharon O'Neill Date 10 15 2004

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

**SUMMARY PAGE**  
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

S&amp;T BANK PAC

Report Covering the Period: From: 07/01/2003 To: 09/30/2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2004		4,336.00
(b) Cash on Hand at Beginning of Reporting Period	2,086.00	
(c) Total Receipts (from Line 18)	0.00	0.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2,086.00	4,336.00
7. Total Disbursements (from Line 31)	825.00	3,075.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1,261.00	1,261.00
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a political candidate committee. (see FEC FORM 141)

**For further information contact:**

 Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

 Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 2X (Rev. 02/2003)

Page 3

Write or Type Committee Name

S&T BANK PAC

Report Covering the Period: From: 07 / 01 / 2004 To: 09 / 30 / 2004

1. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Nonzero (see Schedule A) .....	0.00	
(ii) Unitemized .....	0.00	
(ii) TOTAL (add Lines 11(a)(i) and (ii)) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 23, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b)) .....	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	0.00	0.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	0.00	0.00

## DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Cover Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	250.00	250.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. 5441a(9)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	-500.00	-500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	-500.00	-500.00
29. Other Disbursements	1,075.00	2,525.00
30. Federal Election Activity (2 U.S.C. 5431(20))		
(a) Allocated Federal Election Activity (from Schedule H8)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	825.00	3,075.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	825.00	3,075.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>(II) Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	-500.00	-500.00
35. Net Contributions (other than loans) (subtract Line 33 from Line 32) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 36 from Line 35) .....	0.00	0.00

**SCHEDULE B (FEC Form 3X)**

**ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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&Y BANK PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Shuster, Bill**

Date of Disbursement  
**07 / 28 / 2004**

Mailing Address  
**PO Box 27**

City: **Hollidaysburg** State: **PA** Zip Code: **16648**

Purpose of Disbursement  
**Contribution** Category/Type: **011**

Candidate Name  
**Bill Shuster**

Office Sought:  House  Senate  President  
**US** Disbursement For:  Primary  General  
 Other (specify) **▼**

Congress State: District:  
**PA** District: **1**

Amount of Each Disbursement this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City: State: Zip Code:

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  
 Other (specify) **▼**

State: District:

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City: State: Zip Code:

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  
 Other (specify) **▼**

State: District:

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) **250.00**

**TOTAL** This Period (last page this line number only) **250.00**

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 7 OF 8	
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (in Full)  
**S&T BANK PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**PABPAC**

Date of Disbursement  
06 / 09 / 2000

Mailing Address  
**BOX 345**

City  
**HARRISBURG** State  
**PA** Zip Code  
**17108**

Purpose of Disbursement  
**Contribution** Category/Type  
**011**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Amount of Each Disbursement this Period  
**500.00**

Check #180 dated 6-9-00 to PABPAC for \$500 was never cashed. We are adding this back to our register.

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)	-500.00
TOTAL This Period (last page this line number only)	-500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 8 OF 8

21b  22  23  24  25  26  
 27  28a  28b  28c  29  30b

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

**A.** Full Name (Last, First, Middle Initial): DOUGHERTY, OWEN  
 Date of Disbursement: 07 / 22 / 2004  
 Mailing Address: PO BOX 834  
 City: INDIANA State: PA Zip Code: 15701  
 Purpose of Disbursement: CONTRIBUTION Category/Type: 011  
 Candidate Name: OWEN DOUGHERTY  
 Office Sought: REPRESENTATIVE Disbursement For:  Primary  General  Other (specify)  House  Senate  President  
 State: PA District:   
 Amount of Each Disbursement this Period: 250.00

**B.** Full Name (Last, First, Middle Initial): SCARNATI, JOE  
 Date of Disbursement: 08 / 33 / 2004  
 Mailing Address: PO BOX 177  
 City: BROCKWAY State: PA Zip Code: 15824  
 Purpose of Disbursement: CONTRIBUTION Category/Type: 011  
 Candidate Name: JOE SCARNATI  
 Office Sought: SENATOR Disbursement For:  Primary  General  Other (specify)  House  Senate  President  
 State: PA District:   
 Amount of Each Disbursement this Period: 500.00

**C.** Full Name (Last, First, Middle Initial): WAGNER, JACK  
 Date of Disbursement: 08 / 18 / 2004  
 Mailing Address: 200 N 7TH STREET  
 City: INDIANA State: PA Zip Code: 15701  
 Purpose of Disbursement: CONTRIBUTION Category/Type: 011  
 Candidate Name: JACK WAGNER  
 Office Sought: GENERAL Disbursement For:  Primary  General  Other (specify)  House  Senate  President  
 State: PA District:   
 Amount of Each Disbursement this Period: 200.00

SUBTOTAL of Disbursements This Page (optional)	950.00
TOTAL This Period (last page this line number only)	950.00



Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
 FOR INCOMING DOCUMENTS**

The FEC 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"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 10-15-04
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>JG1</i> PREPARER	10-20-04 DATE PREPARED