

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2008 JAN 22 AM 11:19

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

ADDRESS (number and street) C00263483 121106 N 211
SHARON E O'NEIL
S&T BANK PAC
800 PHILADELPHIA STREET
PO BOX 190
INDIANA PA 15701

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 00263483

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

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'Neil

Signature of Treasurer *Sharon O'Neil* Date M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

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

28039593436

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

S&T Bank PAC

Report Covering the Period: From: / / To: / /

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, <input type="text" value="2007"/>	<input type="text" value="9,711.00"/>	<input type="text" value="9,711.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="7,211.00"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="7,211.00"/>	<input type="text" value="9,711.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3,050.00"/>	<input type="text" value="5,550.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="4,161.00"/>	<input type="text" value="4,161.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

28039593437

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

S&T Bank PAC

Report Covering the Period: From: MM / DD / YYYY
07 / 01 / 2007 To: MM / DD / YYYY
12 / 31 / 2007

I. 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) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....		
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶		
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶		
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶		

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DETAILED SUMMARY PAGE
of Disbursements

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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,150.00	1,150.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements	1,900.00	4,400.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3,050.00	5,550.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	3,050.00	5,550.00

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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

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**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 6 OF 9
	<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&T Bank PAC

A. Full Name (Last, First, Middle Initial)
CITIZENS FOR ARLEN SPECTER

Date of Disbursement
08 / 03 / 2007

Mailing Address
203 MARYLAND AVENUE, NE

City: WASHINGTON State: DC Zip Code: 20002

Purpose of Disbursement: CONTRIBUTION Category/Type: 011

Candidate Name: ARLEN SPECTER

Office Sought: U.S. SENATOR Disbursement For: Primary General Other (specify) House Senate President

State: District:

Amount of Each Disbursement this Period
500.00

B. Full Name (Last, First, Middle Initial)
BILL SHUSTER FOR CONGRESS

Date of Disbursement
11 / 05 / 2007

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: U.S. CONGRESS Disbursement For: Primary General Other (specify) House Senate President

State: District:

Amount of Each Disbursement this Period
650.00

C. Full Name (Last, First, Middle Initial)
BILL SHUSTER FOR CONGRESS

Date of Disbursement
12 / 17 / 2007

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: U.S. CONGRESS Disbursement For: Primary General Other (specify) House Senate President

State: District:

Amount of Each Disbursement this Period
-650.00
(CHECK #303, DATED 11-5-07, WAS REPORTED LOST)

SUBTOTAL of Disbursements This Page (optional)..... 500.00

TOTAL This Period (last page this line number only).....

28039593441

**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 9

<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

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

Full Name (Last, First, Middle Initial)

A.

BILL SHUSTER FOR CONGRESS

Date of Disbursement

MM	DD	YYYY
12	17	2007

Mailing Address
PO BOX 27

City State Zip Code
HOLLIDAYSBURG PA 16648

Purpose of Disbursement

CONTRIBUTION

011

Candidate Name

BILL SHUSTER

Category/
Type

Amount of Each Disbursement this Period

650.00

(RE-ISSUED CHECK-#304-BECAUSE
OF LOST CHECK #303)

Office Sought: House
U.S. Senate
CONGRESS President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

MM	DD	YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought: House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

C.

Date of Disbursement

MM	DD	YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought: House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

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1,150.00

28039593442

**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 9

<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 type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A.

FRIENDS OF DON WHITE

Mailing Address
PO BOX 363

City State Zip Code
INDIANA PA 15701

Purpose of Disbursement
CONTRIBUTION

Candidate Name
DON WHITE

Office Sought: House
SENATOR Senate
 President
State: PA District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B.

PEOPLE FOR PYLE

Mailing Address
PO BOX 227

City State Zip Code
FORD CITY PA 16226

Purpose of Disbursement
CONTRIBUTION

Candidate Name
JEFF PYLE

Office Sought: House
REPRESENTATIVE Senate
 President
State: PA District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2007

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

C.

FRIENDS OF JOE SCARNATI

Mailing Address
PO BOX 177

City State Zip Code
BROCKWAY PA 15824

Purpose of Disbursement
CONTRIBUTION

Candidate Name
JOE SCARNATI

Office Sought: House
SENATOR Senate
 President
State: PA District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2007

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional).....▶

1,450.00

TOTAL This Period (last page this line number only).....▶

28039593443

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

Date of Disbursement

A.

FRIENDS OF TOM BIANCO

MM	DD	YYYY
10	12	2007

Mailing Address
136 CRYSTAL DRIVE

City State Zip Code
INDIANA PA 15701

Purpose of Disbursement

CONTRIBUTION

Candidate Name

TOM BIANCO

Office Sought: House
DISTRICT Senate
ATTORNEY President
State: PA District:

Disbursement For:
 Primary General
 Other (specify) ▼

011

Category/
Type

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

Date of Disbursement

B.

FRIENDS OF BOB BELL

MM	DD	YYYY
10	12	2007

Mailing Address
70 ELLENBERGER ROAD

City State Zip Code
INDIANA PA 15701

Purpose of Disbursement

CONTRIBUTION

Candidate Name

BOB BELL

Office Sought: House
DISTRICT Senate
ATTORNEY President
State: PA District:

Disbursement For:
 Primary General
 Other (specify) ▼

011

Category/
Type

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

Date of Disbursement

C.

FRIENDS OF DAVE REED

MM	DD	YYYY
11	02	2007

Mailing Address
PO BOX 1440

City State Zip Code
INDIANA PA 15701

Purpose of Disbursement

CONTRIBUTION

Candidate Name

DAVE REED

Office Sought: House
REPRESENTATIVE Senate
 President
State: PA District:

Disbursement For:
 Primary General
 Other (specify) ▼

011

Category/
Type

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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1,900.00

28039593444

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
1/17/08

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

[Handwritten Signature]

1/22/08

PREPARER
(3/2005)

DATE PREPARED

28039593445