

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Bill Shuster for Congress

ADDRESS (number and street) PO Box 27
 Check if different than previously reported. (ACC)
Hollidaysburg PA 16648

2. **FEC IDENTIFICATION NUMBER** C00364935
CITY STATE ZIP CODE STATE DISTRICT
PA 09
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)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 23 2010 through 12 31 2010

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 Frederick A Ciocca
Signature of Treasurer Electronically Filed by Frederick A Ciocca Date 01 28 2011

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 3 (Revised 02/2003)

Write or Type Committee Name

Bill Shuster for Congress

Report Covering the Period:

From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	6520.00	7520.00
(b) Total Contribution Refunds (from Line 20(d)).....		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	6520.00	7520.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	46158.53	79998.76
(b) Total Offsets to Operating Expenditures (from Line 14).....		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	46158.53	79998.76
8. Cash on Hand at Close of Reporting Period (from Line 27).....	93374.79	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	4045.26	

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 3 (Revised 12/2003)

Write or Type Committee Name
Bill Shuster for Congress

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

4250.00

5250.00

(ii) Unitemized.....

270.00

270.00

(iii) TOTAL of contributions

4520.00

5520.00

from individuals..... ▶

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

2000.00

2000.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans)

6520.00

7520.00

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

13. LOANS

(a) Made or Guaranteed by the Candidate.....

(b) All Other Loans.....

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

6520.00

7520.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	46158.53	79998.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of all Other Loans.....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. 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 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS.....	30.00	330.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	46188.53	80328.76

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	133043.32
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	6520.00
25. SUBTOTAL (add Line 23 and Line 24).....	139563.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	46188.53
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	93374.79

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 32
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Bill Shuster for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. John W Bowie</p> <p>Mailing Address 4479 Highway 311</p> <p>City State Zip Code Houma LA 70360</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: B & D Contracting Inc Occupation: Owner</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 29 / 2010</p> <p>Transaction ID: SA11Ai-CN7536</p> <p>Amount of Each Receipt this Period 500.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Mr. Art Daniel</p> <p>Mailing Address 601 Armadillo Ct</p> <p>City State Zip Code Cedar Hill TX 75104</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: A R Daniel Construction Occupation: Sales Executive</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 12 / 21 / 2010</p> <p>Transaction ID: SA11Ai-CN7544</p> <p>Amount of Each Receipt this Period 500.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Mr. Joseph E Forshage</p> <p>Mailing Address PO Box 29</p> <p>City State Zip Code Weslaco TX 78599</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Foremost Paving Occupation: Contractor</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt MM / DD / YYYY 12 / 21 / 2010</p> <p>Transaction ID: SA11Ai-CN7543</p> <p>Amount of Each Receipt this Period 250.00</p>
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SUBTOTAL of Receipts This Page (optional)	1250.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 32
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) Andrew J Giorgione		Date of Receipt
	Mailing Address 2911 2nd St N		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Harrisburg	PA	17110
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11Ai-CN7541
Name of Employer Buchanan Ingersoll & Rooney PC		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="500.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. Scott A. Harshman		Date of Receipt
	Mailing Address 217 Murdock Way		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Greensburg	PA	15601
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11Ai-CN7540
Name of Employer Harshman Consulting LLC		Occupation Lobbyist/Consultant	Amount of Each Receipt this Period
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="250.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Stan L Hasselbusch		Date of Receipt
	Mailing Address 108 Greenbriar Drive		<input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Wexford	PA	15090
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11Ai-CN7537
Name of Employer LB Foster		Occupation CEO/President	Amount of Each Receipt this Period
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="250.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 32
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) Ms. Sharon Leblanc Landry		Date of Receipt
	Mailing Address PO Box 13816		<input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	New Iberia	LA	70562
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Service Tool Company		Occupation Accounts Payable Clerk	Transaction ID: SA11Ai-CN7535
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

B.	Full Name (Last, First, Middle Initial) Mark W Szanca		Date of Receipt
	Mailing Address 123 Camelot Blvd		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Falling Waters	WV	25419
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Szanca Solutions Inc		Occupation President/CEO	Transaction ID: SA11Ai-CN7542
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="4250.00"/>

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 32
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Nalco Company PAC

Mailing Address 1601 W. Diehl Road

City Naperville State IL Zip Code 60563

FEC ID number of contributing federal political committee. **C** C00144063

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 9 / 2 0 1 0

Transaction ID: SA11C-CN7538

Amount of Each Receipt this Period
 1000.00

B.

Full Name (Last, First, Middle Initial)
Oneok Employees PAC

Mailing Address PO Box 871

City Tulsa State OK Zip Code 74102

FEC ID number of contributing federal political committee. **C** C00215384

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 4 / 2 0 1 0

Transaction ID: SA11C-CN7531

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	2000.00

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Ciocca Benton & Okonak P.C.

Transaction ID: SB17-EX7386
Date of Disbursement

Mailing Address 912 Pleasant Valley Blvd

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	1	0

City Altoona State PA Zip Code 16602

Amount of Each Disbursement this Period

9651.53

Purpose of Disbursement
Accounting services
Candidate Name

001
Category/ Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District: General 2010

Accounting services

B.

Full Name (Last, First, Middle Initial)
Verizon

Transaction ID: SB17-EX7376
Date of Disbursement

Mailing Address PO Box 15026

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	1	0

City Albany State NY Zip Code 12212

Amount of Each Disbursement this Period

216.16

Purpose of Disbursement
Telephone
Candidate Name

001
Category/ Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District: General 2010

Telephone

C.

Full Name (Last, First, Middle Initial)
Verizon

Transaction ID: SB17-EX7390
Date of Disbursement

Mailing Address PO Box 15026

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	7		2	0	1	0

City Albany State NY Zip Code 12212

Amount of Each Disbursement this Period

221.26

Purpose of Disbursement
Telephone
Candidate Name

001
Category/ Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District: General 2010

Telephone

SUBTOTAL of Disbursements This Page (optional)

10088.95

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
The Ben Franklin Society

Transaction ID: SB17-EX7384
Date of Disbursement

Mailing Address of Franklin County
293 South Gate Mall

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	1	0

City State Zip Code
Chambersburg PA 17201

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Annual Dues
Candidate Name

001
Category/ Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼
General 2010

Annual Dues

B.

Full Name (Last, First, Middle Initial)
O.K. Stuckey And Son

Transaction ID: SB17-EX7378
Date of Disbursement

Mailing Address 1800 Eighth Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	1	0

City State Zip Code
Altoona PA 16602

Amount of Each Disbursement this Period

444.27

Purpose of Disbursement
Letterhead/Envelopes
Candidate Name

001
Category/ Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼
General 2010

Letterhead/Envelopes

C.

Full Name (Last, First, Middle Initial)
Roger Osbaugh

Transaction ID: SB17-EX7374
Date of Disbursement

Mailing Address 1153 Leisure Drive

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	1	0

City State Zip Code
Chambersburg PA 17202

Amount of Each Disbursement this Period

79.10

Purpose of Disbursement
Mileage reimbursement
Candidate Name

001
Category/ Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼
General 2010

Mileage reimbursement

SUBTOTAL of Disbursements This Page (optional)

1023.37

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 11 / 32

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) Roger Osbaugh Mailing Address 1153 Leisure Drive City Chambersburg State PA Zip Code 17202 Purpose of Disbursement Mileage reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ General 2010	Transaction ID: SB17-EX7396 Date of Disbursement 12 / 15 / 2010 Amount of Each Disbursement this Period 154.35 Mileage reimbursement
B.	Full Name (Last, First, Middle Initial) Roger Osbaugh Mailing Address 1153 Leisure Drive City Chambersburg State PA Zip Code 17202 Purpose of Disbursement Mileage/Expense reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary	Transaction ID: SB17-EX7442 Date of Disbursement 12 / 31 / 2010 Amount of Each Disbursement this Period 171.10 Mileage/Expense reimburse- ment
C.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 25505 City Lehigh Valley State PA Zip Code 18002 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary	Transaction ID: SB17-EX7398 Date of Disbursement 12 / 21 / 2010 Amount of Each Disbursement this Period 1081.77 Telephone

SUBTOTAL of Disbursements This Page (optional) ▶

1407.22

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
e2c consulting Inc.

Mailing Address PO Box 29576

City Washington State DC Zip Code 20017

Purpose of Disbursement
Fundraising Consulting Fee - Jan 11

Candidate Name

003
Category/
Type

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District: 2012 Primary

Transaction ID: SB17-EX7438
Date of Disbursement

12 / 21 / 2010

Amount of Each Disbursement this Period

4000.00

Fundraising Consulting Fee - Jan 11

B.

Full Name (Last, First, Middle Initial)
Jennifer Mearkle

Mailing Address 3022 Broad Avenue

City Altoona State PA Zip Code 16601

Purpose of Disbursement
Notary fees reimbursed

Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District: General 2010

Transaction ID: SB17-EX7383
Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

92.02

Notary fees reimbursed

C.

Full Name (Last, First, Middle Initial)
Jennifer Mearkle

Mailing Address 3022 Broad Avenue

City Altoona State PA Zip Code 16601

Purpose of Disbursement
Payroll 12/01/2010 to 12/31/2010

Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District: 2012 Primary

Transaction ID: SB17-EX7440
Date of Disbursement

12 / 31 / 2010

Amount of Each Disbursement this Period

150.00

Payroll 12/01/2010 to 12/31/2010

SUBTOTAL of Disbursements This Page (optional) ▶

4242.02

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
S&T Bank - Payroll

Transaction ID: SB17-EX7388
Date of Disbursement

Mailing Address 1100 Logan Blvd

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	1	0

City Altoona State PA Zip Code 16602

Amount of Each Disbursement this Period

270.46

Purpose of Disbursement
VA Withholding - Nov 2010

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

VA Withholding - Nov 2010

State: District:

General 2010

B.

Full Name (Last, First, Middle Initial)
AT&T Mobility

Transaction ID: SB17-EX7441
Date of Disbursement

Mailing Address PO Box 6463

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

City Carol Stream State IL Zip Code 60197

Amount of Each Disbursement this Period

133.68

Purpose of Disbursement
Telephone

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Telephone

State: District:

2012 Primary

C.

Full Name (Last, First, Middle Initial)
Jeremy Shoemaker

Transaction ID: SB17-EX7392
Date of Disbursement

Mailing Address 4663 E Zana Ct

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	7		2	0	1	0

City Waynesboro State PA Zip Code 17268

Amount of Each Disbursement this Period

126.50

Purpose of Disbursement
Mileage reimbursement

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Mileage reimbursement

State: District:

General 2010

SUBTOTAL of Disbursements This Page (optional)

530.64

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Franklin County Reagan Coalition

Mailing Address PO Box 240

City Marion State PA Zip Code 17235

Purpose of Disbursement
Annual Dues
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2010
 Primary General
 Other (specify) ▼
General 2010

Transaction ID: SB17-EX7385
Date of Disbursement

12 / 03 / 2010

Amount of Each Disbursement this Period

300.00

Annual Dues

B.

Full Name (Last, First, Middle Initial)
StelTek Graphics Inc

Mailing Address One Corporate Drive
Suite 105

City Bedford State PA Zip Code 15522

Purpose of Disbursement
Print Ads - Calendar
Candidate Name

004
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2010
 Primary General
 Other (specify) ▼
General 2010

Transaction ID: SB17-EX7379
Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

846.33

Print Ads - Calendar

C.

Full Name (Last, First, Middle Initial)
American Express

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement
Credit Card Paid by American Express
Candidate Name

002
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2012
 Primary General
 Other (specify) ▼
2012 Primary

Transaction ID: SB17-EX7437
Date of Disbursement

12 / 21 / 2010

Amount of Each Disbursement this Period

16021.83

Credit Card Paid by American Express

SUBTOTAL of Disbursements This Page (optional)

17168.16

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) Denunzio's Italian Chophouse Mailing Address Arnold Palmer Drive City Latrobe State PA Zip Code 15650 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary	Transaction ID: SB17-EX7401 Date of Disbursement 11 / 09 / 2010 Amount of Each Disbursement this Period 31.00 [MEMO ITEM] Meals
B.	Full Name (Last, First, Middle Initial) Schneiders Of Capitol Hill Mailing Address 300 Massachusetts Avenue NE City Washington State DC Zip Code 20002 Purpose of Disbursement Fundraising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary	Transaction ID: SB17-EX7402 Date of Disbursement 11 / 15 / 2010 Amount of Each Disbursement this Period 92.47 [MEMO ITEM] Fundraising supplies
C.	Full Name (Last, First, Middle Initial) The Old Ebbitt Grill Mailing Address 675 15th Street NW City Washington State DC Zip Code 20005 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary	Transaction ID: SB17-EX7433 Date of Disbursement 11 / 15 / 2010 Amount of Each Disbursement this Period 102.07 [MEMO ITEM] Meals

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Exxon

Mailing Address 542 South Center Street

City Ebensburg State PA Zip Code 15931

Purpose of Disbursement
Vehicle Expenses

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼
2012 Primary

Transaction ID: SB17-EX7403
Date of Disbursement

11 / 16 / 2010

Amount of Each Disbursement this Period

28.33

[MEMO ITEM]
Gasoline

B.

Full Name (Last, First, Middle Initial)
Exxon

Mailing Address 542 South Center Street

City Ebensburg State PA Zip Code 15931

Purpose of Disbursement
Vehicle Expenses

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼
2012 Primary

Transaction ID: SB17-EX7404
Date of Disbursement

11 / 16 / 2010

Amount of Each Disbursement this Period

7.40

[MEMO ITEM]
Gasoline

C.

Full Name (Last, First, Middle Initial)
Extra Virgin - Modern Italian Cuisine

Mailing Address 4053 South 28th Street

City Arlington State VA Zip Code 22206

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼
2012 Primary

Transaction ID: SB17-EX7405
Date of Disbursement

11 / 16 / 2010

Amount of Each Disbursement this Period

134.78

[MEMO ITEM]
Meals

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) Bistro Bistro Mailing Address 4021 28th Street S. City Arlington State VA Zip Code 22206 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary	Transaction ID: SB17-EX7406 Date of Disbursement 11 / 18 / 2010 Amount of Each Disbursement this Period 90.00 [MEMO ITEM] Meals
B.	Full Name (Last, First, Middle Initial) Symantec Software Mailing Address 9625 W 76th Street City Eden Prairie State MN Zip Code 55344 Purpose of Disbursement Office Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary	Transaction ID: SB17-EX7435 Date of Disbursement 11 / 24 / 2010 Amount of Each Disbursement this Period 44.99 [MEMO ITEM] Norton Software
C.	Full Name (Last, First, Middle Initial) The Benjamin Hotel Mailing Address 125 East 50th Street City New York State NY Zip Code 10022 Purpose of Disbursement Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary	Transaction ID: SB17-EX7416 Date of Disbursement 11 / 30 / 2010 Amount of Each Disbursement this Period 7500.00 [MEMO ITEM] Lodging for Fundraiser

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Broadway Deli

Mailing Address 1237-A Lincoln Way East

City Chambersburg State PA Zip Code 17201

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

2012 Primary

Transaction ID: SB17-EX7431
Date of Disbursement

12 / 01 / 2010

Amount of Each Disbursement this Period

45.07

[MEMO ITEM]
Meals

B.

Full Name (Last, First, Middle Initial)
US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

2012 Primary

Transaction ID: SB17-EX7432
Date of Disbursement

12 / 06 / 2010

Amount of Each Disbursement this Period

88.00

[MEMO ITEM]
Postage

C.

Full Name (Last, First, Middle Initial)
Amtrak

Mailing Address 400 N Capitol Street NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Train

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

2012 Primary

Transaction ID: SB17-EX7407
Date of Disbursement

12 / 06 / 2010

Amount of Each Disbursement this Period

315.00

[MEMO ITEM]
Transportation

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) Amtrak Mailing Address 400 N Capitol Street NW City Washington State DC Zip Code 20001 Purpose of Disbursement Train Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary	Transaction ID: SB17-EX7408 Date of Disbursement 12 / 07 / 2010 Amount of Each Disbursement this Period 289.00 [MEMO ITEM] Transportation
B.	Full Name (Last, First, Middle Initial) Amtrak Mailing Address 400 N Capitol Street NW City Washington State DC Zip Code 20001 Purpose of Disbursement Train Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary	Transaction ID: SB17-EX7409 Date of Disbursement 12 / 07 / 2010 Amount of Each Disbursement this Period 38.00 [MEMO ITEM] Transportation
C.	Full Name (Last, First, Middle Initial) Amtrak Mailing Address 400 N Capitol Street NW City Washington State DC Zip Code 20001 Purpose of Disbursement Train Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary	Transaction ID: SB17-EX7410 Date of Disbursement 12 / 07 / 2010 Amount of Each Disbursement this Period 343.00 [MEMO ITEM] Transportation

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Amtrak</p> <p>Mailing Address 400 N Capitol Street NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Train</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>2012 Primary</p>	<p>Transaction ID: SB17-EX7411</p> <p>Date of Disbursement 12 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 158.00</p> <p>[MEMO ITEM] Transportation</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Amtrak</p> <p>Mailing Address 400 N Capitol Street NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Train</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>2012 Primary</p>	<p>Transaction ID: SB17-EX7412</p> <p>Date of Disbursement 12 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 70.00</p> <p>[MEMO ITEM] Transportation</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Amtrak</p> <p>Mailing Address 400 N Capitol Street NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Train</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>2012 Primary</p>	<p>Transaction ID: SB17-EX7413</p> <p>Date of Disbursement 12 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 270.00</p> <p>[MEMO ITEM] Transportation</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Amtrak Acela Cafe

Mailing Address 60 Massachusetts Avenue NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

2012 Primary

Transaction ID: SB17-EX7417
Date of Disbursement

12 / 09 / 2010

Amount of Each Disbursement this Period

16.75

[MEMO ITEM]
Meals

B.

Full Name (Last, First, Middle Initial)
Oasis Whiskey Blue

Mailing Address 541 Lexington Avenue

City New York State NY Zip Code 10017

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

2012 Primary

Transaction ID: SB17-EX7418
Date of Disbursement

12 / 09 / 2010

Amount of Each Disbursement this Period

63.00

[MEMO ITEM]
Meals

C.

Full Name (Last, First, Middle Initial)
Serafina Fabulous Grill

Mailing Address 29 East 61st Street

City New York State NY Zip Code 10065

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

2012 Primary

Transaction ID: SB17-EX7419
Date of Disbursement

12 / 09 / 2010

Amount of Each Disbursement this Period

40.02

[MEMO ITEM]
Meals

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

<p>A. Full Name (Last, First, Middle Initial) Il Cortile Restaurant</p> <p>Mailing Address 125 Mulberry Street</p> <p>City New York State NY Zip Code 10013</p> <p>Purpose of Disbursement Meals Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary</p>	<p>Transaction ID: SB17-EX7415 Date of Disbursement 12 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 440.00</p> <p>[MEMO ITEM] Meals</p>
<p>B. Full Name (Last, First, Middle Initial) Affina 50</p> <p>Mailing Address 155 East 50th Street</p> <p>City New York State NY Zip Code 10022</p> <p>Purpose of Disbursement Lodging Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary</p>	<p>Transaction ID: SB17-EX7422 Date of Disbursement 12 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 976.92</p> <p>[MEMO ITEM] Lodging</p>
<p>C. Full Name (Last, First, Middle Initial) Union Station Parking</p> <p>Mailing Address 30 Massachusetts Avenue NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Parking And Tolls Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary</p>	<p>Transaction ID: SB17-EX7423 Date of Disbursement 12 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 58.00</p> <p>[MEMO ITEM] Parking fee</p>

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) Amici II Mailing Address 165 Mulberry Street City New York State NY Zip Code 10013 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary	Transaction ID: SB17-EX7424 Date of Disbursement 12 / 12 / 2010 Amount of Each Disbursement this Period 93.00 [MEMO ITEM] Meals
B.	Full Name (Last, First, Middle Initial) NYC Taxi Mailing Address DbA Green Apple Management 3430 31st Street City Astoria State NY Zip Code 11106 Purpose of Disbursement Taxi/Car/Bus Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary	Transaction ID: SB17-EX7425 Date of Disbursement 12 / 13 / 2010 Amount of Each Disbursement this Period 12.30 [MEMO ITEM] Taxi expense
C.	Full Name (Last, First, Middle Initial) Charlie Chiang's Restaurant Mailing Address 4060 Campbell Avenue City Arlington State VA Zip Code 22206 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2012 Primary	Transaction ID: SB17-EX7426 Date of Disbursement 12 / 13 / 2010 Amount of Each Disbursement this Period 110.00 [MEMO ITEM] Meals

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
AJB Taxi Management Inc

Transaction ID: SB17-EX7427
Date of Disbursement

Mailing Address 662 Tenth Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	3		2	0	1	0

City State Zip Code
New York NY 10036

Amount of Each Disbursement this Period

9.80

Purpose of Disbursement
Taxi/Car/Bus Expense

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

[MEMO ITEM]
Taxi expense

State: District:

2012 Primary

B.

Full Name (Last, First, Middle Initial)
Shell Oil

Transaction ID: SB17-EX7428
Date of Disbursement

Mailing Address 10524 Sharpsburg Pike

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	3		2	0	1	0

City State Zip Code
Hagerstown MD 21740

Amount of Each Disbursement this Period

34.70

Purpose of Disbursement
Vehicle Expenses

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

[MEMO ITEM]
Gasoline

State: District:

2012 Primary

C.

Full Name (Last, First, Middle Initial)
New York Luncheonette

Transaction ID: SB17-EX7429
Date of Disbursement

Mailing Address 135 E 50th Street

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	3		2	0	1	0

City State Zip Code
New York NY 10022

Amount of Each Disbursement this Period

21.62

Purpose of Disbursement
Meals

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

[MEMO ITEM]
Meals

State: District:

2012 Primary

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Affina 50

Mailing Address 155 East 50th Street

City State Zip Code
New York NY 10022

Purpose of Disbursement
Lodging

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

2012 Primary

Transaction ID: SB17-EX7434
Date of Disbursement

1 2 / 1 3 / 2 0 1 0

Amount of Each Disbursement this Period

1557.11

[MEMO ITEM]
Lodging

B.

Full Name (Last, First, Middle Initial)
Dial 7 Car & Limousine Service

Mailing Address 4323 35th Street

City State Zip Code
Long Island City NY 11101

Purpose of Disbursement
Taxi/Car/Bus Expense

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

2012 Primary

Transaction ID: SB17-EX7436
Date of Disbursement

1 2 / 1 3 / 2 0 1 0

Amount of Each Disbursement this Period

350.00

[MEMO ITEM]
Limo expense

C.

Full Name (Last, First, Middle Initial)
The Benjamin Hotel

Mailing Address 125 East 50th Street

City State Zip Code
New York NY 10022

Purpose of Disbursement
Lodging

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

2012 Primary

Transaction ID: SB17-EX7430
Date of Disbursement

1 2 / 1 4 / 2 0 1 0

Amount of Each Disbursement this Period

2432.51

[MEMO ITEM]
Lodging

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 28 / 32

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Vandor Strategies LLC

Transaction ID: SB17-EX7400
Date of Disbursement

Mailing Address 1325 Pennsylvania Avenue NW
Suite 700

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	1		2	0	1	0

City Washington State DC Zip Code 20004

Amount of Each Disbursement this Period

10000.00

Purpose of Disbursement
Political Consulting

003
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Political Consulting

State: District:

2012 Primary

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

45156.61

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

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

FOR LINE NUMBER:
(check only one)

PAGE 29 / 32

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Altoona Area Jr High School News Club

Mailing Address 1400 Seventh Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Patron Box donation

Candidate Name

012
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼
General 2010

State: District:

Transaction ID: SB21-EX7377

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

30.00

Patron Box donation

SUBTOTAL of Disbursements This Page (optional)

30.00

TOTAL This Period (last page this line number only)

30.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon			Nature of Debt (Purpose): Invoice: Telephone Administrative/Salary
Mailing Address PO Box 15026			
City Albany	State NY	ZIP Code 12212	

Outstanding Balance Beginning This Period <input type="text" value="216.16"/>		Transaction ID: SD10-INV7215	
Amount Incurred This Period <input type="text" value=".00"/>	Payment This Period <input type="text" value="216.16"/>	Outstanding Balance at Close of This Period <input type="text" value=".00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ATLANTIC broadband			Nature of Debt (Purpose): Invoice: Internet Service Administrative
Mailing Address Box 371801			
City Pittsburgh	State PA	ZIP Code 15250	

Outstanding Balance Beginning This Period <input type="text" value="59.80"/>		Transaction ID: SD10-INV7214	
Amount Incurred This Period <input type="text" value=".00"/>	Payment This Period <input type="text" value="59.80"/>	Outstanding Balance at Close of This Period <input type="text" value=".00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor McIntyre's Candies			Nature of Debt (Purpose): Invoice: Gift Baskets Administrative/Sal
Mailing Address 1419 Eleventh Avenue			
City Altoona	State PA	ZIP Code 16601	

Outstanding Balance Beginning This Period <input type="text" value="135.00"/>		Transaction ID: SD10-INV7220	
Amount Incurred This Period <input type="text" value=".00"/>	Payment This Period <input type="text" value="135.00"/>	Outstanding Balance at Close of This Period <input type="text" value=".00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor StelTek Graphics Inc			Nature of Debt (Purpose): Invoice: Print Ads - Calendar Advertisin
Mailing Address One Corporate Drive Suite 105			
City Bedford	State PA	ZIP Code 15522	

Outstanding Balance Beginning This Period		Transaction ID: SD10-INV7218	
846.33			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
.00	846.33	.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor O.K. Stuckey And Son			Nature of Debt (Purpose): Invoice: Letterhead/Envelopes Administra
Mailing Address 1800 Eighth Avenue			
City Altoona	State PA	ZIP Code 16602	

Outstanding Balance Beginning This Period		Transaction ID: SD10-INV7217	
444.27			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
.00	444.27	.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T Mobility			Nature of Debt (Purpose): Invoice: Telephone Administrative/Salary
Mailing Address PO Box 6463			
City Carol Stream	State IL	ZIP Code 60197	

Outstanding Balance Beginning This Period		Transaction ID: SD10-INV7212	
135.98			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
.00	135.98	.00	

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon			Nature of Debt (Purpose): Invoice: Telephone Administrative/Salary
Mailing Address PO Box 15026			
City Albany	State NY	ZIP Code 12212	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>		Transaction ID: SD10-INV7290	
Amount Incurred This Period <input type="text" value="209.45"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="209.45"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Altoona Mirror			Nature of Debt (Purpose): Invoice: Print Ads Advertising Expenses
Mailing Address PO Box 2008 301 Cayuga Ave			
City Altoona	State PA	ZIP Code 16603	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>		Transaction ID: SD10-INV7296	
Amount Incurred This Period <input type="text" value="80.00"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="80.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Blairmont Club			Nature of Debt (Purpose): Invoice: Election Night Event Campaign E
Mailing Address 145 Larch Street			
City Hollidaysburg	State PA	ZIP Code 16648	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>		Transaction ID: SD10-INV7303	
Amount Incurred This Period <input type="text" value="3755.81"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="3755.81"/>	

1) SUBTOTALS This Period This Page (optional).....	4045.26
2) TOTALS This Period (last page this line number only).....	4045.26
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	4045.26