

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: / / To: / /

	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))....	721988.62	2659242.26
(b) Total Contribution Refunds (from Line 20(d))	1900.00	3900.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	720088.62	2655342.26
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	722201.43	1556583.94
(b) Total Offsets to Operating Expenditures (from Line 14).....	19.11	3223.98
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	722182.32	1553359.96
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1372160.66	
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	

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: / / To: / /

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).....	371700.00	1093903.64
(ii) Unitemized	8359.47	15719.47
(iii) TOTAL of contributions from individuals	380059.47	1109623.11
(b) Political Party Committees.....	0.00	250.00
(c) Other Political Committees (such as PACs).....	341929.15	1549369.15
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	721988.62	2659242.26
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	7083.33
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	19.11	3223.98
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	722007.73	2669549.57

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	722201.43	1556583.94
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1900.00	2900.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1900.00	3900.00
21. OTHER DISBURSEMENTS	100.00	204751.75
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	724201.43	1765235.69

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1374354.36
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	722007.73
25. SUBTOTAL (add Line 23 and Line 24).....	2096362.09
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	724201.43
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1372160.66

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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

A. Full Name (Last, First, Middle Initial)
JANE A. ADAMS

Mailing Address **PO BOX 62**

City **GLENBROOK** State **NV** Zip Code **89413**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112008

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HECTOR E ADLER

Mailing Address **3831 TURTLE CREEK BLVD.
APT. 12E**

City **DALLAS** State **TX** Zip Code **75219**

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

Name of Employer **AMERICAN AIRLINES** Occupation **VICE PRESIDENT - FLIGHT SERVICES**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.112143

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TIMOTHY J AHERN

Mailing Address **20 W 64TH ST.
APT. 32RS**

City **NEW YORK** State **NY** Zip Code **10023**

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

Name of Employer **AMERICAN AIRLINES** Occupation **VICE PRESIDENT - GATEWAYS AND HUB C**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.112141

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
WILLIAM P. AINSWORTH

Mailing Address 775 SIGNAL POINT RD

City State Zip Code
GUNTERSVILLE AL 35976

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.111971

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ROBERT L. ALBRITTON

Mailing Address 7471 BENBROOK PKWY

City State Zip Code
BENBROOK TX 76126

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

Name of Employer Occupation
MAYFAIR INVESTMENTS CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112038

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ESPERANZA ANDRADE

Mailing Address 8031 COLONIAL WOODS

City State Zip Code
BOERNE TX 78015

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

Name of Employer Occupation
TEXAS WORKFORCE COMMISSION COMMISSIONER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112028

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
GREGORY ANDRICOS

Mailing Address 1117 WYNDHAM DR

City YORK State PA Zip Code 17403

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

Name of Employer WAGMAN CO Occupation ENGINEER, PRESIDENT, AND COO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112221

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MICHAEL R. ANNIS

Mailing Address 4410 EATON CIR

City COLLEYVILLE State TX Zip Code 76034

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

Name of Employer BNSF Occupation VP TAXES

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112036

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MRS. MADELEINE ARISON

Mailing Address 9999 COLLINS AVENUE APT 15G

City BAL HARBOUR State FL Zip Code 33154

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112330

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MR. MICKY ARISON

Mailing Address 3655 NW 87TH AVENUE

City MIAMI State FL Zip Code 33178

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

Name of Employer CARNIVAL CORPORATION Occupation CHAIRMAN & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112329

Amount of Each Receipt this Period
1200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GREG L. ARMSTRONG

Mailing Address 11511 MEMORIAL DR

City HOUSTON State TX Zip Code 77024

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

Name of Employer PLAINES ALL AMERICAN PIPELINE Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112034

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ROBERT B ASHER

Mailing Address 1307 TOWNSHIP LINE RD

City GWYNEDD VALLEY State PA Zip Code 19437

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

Name of Employer ASHER CHOCOLATES Occupation EXECUTIVE/MANUFACTURER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112679

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SHARAM ASKARPOUR

Mailing Address 720 PENNSYLVANIA DR

City State Zip Code
EXTON PA 19341

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112687

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
VINCENT J BARBERA

Mailing Address PO BOX 775

City State Zip Code
SOMERSET PA 15501

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

Name of Employer Occupation
BARBERA, CLAPPER, BEENER, ET AL ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112385

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RICHARD C BARNETT

Mailing Address 3504 CUMMINGS LN

City State Zip Code
CHEVY CHASE MD 20815

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

Name of Employer Occupation
SAVILLS STUDLEY EXECUTIVE MANAGING DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11AI.112470

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JULIE E BARNES

Mailing Address 7810 ABBEY OAKS CT

City State Zip Code
MANASSAS VA 20112

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

Name of Employer Occupation
INTEGRA MANAGEMENT GROUP PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 08 / 2016

Transaction ID : SA11AI.112302

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
COLLEEN C. BARRETT

Mailing Address 4307 WILLIAMSBURG

City State Zip Code
DALLAS TX 75220

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

Name of Employer Occupation
SOUTHWEST AIR PREISENT EMERITUS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112016

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ANTHONY S. BARTOLOMEO P.E.

Mailing Address 7 MANSOR COURT

City State Zip Code
SEWELL NJ 08080

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

Name of Employer Occupation
PENNONI ASSOCIATES INC PRESIDENT & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SA11AI.112677

Amount of Each Receipt this Period
700.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
KENNETH BEAM

Mailing Address 306 AIRLINE DR, SUITE 100

City State Zip Code
COPPELL TX 75019

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

Name of Employer Occupation
PEGASUS LOGISTICS GROUP OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 11 / 2016

Transaction ID : SA11AI.111834

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NICHOLAS BECKWITH III

Mailing Address 1 LITTLE LN.

City State Zip Code
PITTSBURGH PA 15215

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

Name of Employer Occupation
ARCH STREET MANAGEMENT, LLC BUSINESS EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112225

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BARRY J. BENTLEY

Mailing Address 281 GROVE RD.

City State Zip Code
ELVERSON PA 19520

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

Name of Employer Occupation
BENTLEY SYSTEMS EXECUTIVE VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112689

Amount of Each Receipt this Period
 1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANN M BENZEL

Mailing Address **PO BOX 86**

City **HOLLIDAYSBURG** State **PA** Zip Code **16648**

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

Name of Employer **BENZELS BRETZEL BAKERY** Occupation **VICE PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2016

Transaction ID : SA11AI.112451

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MICHAEL K BERRY

Mailing Address **6217 GENOA RD.**

City **FORT WORTH** State **TX** Zip Code **76116**

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

Name of Employer **HILLWOOD PROPERTIES** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **4700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112039

Amount of Each Receipt this Period
700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MICHAEL K BERRY

Mailing Address **6217 GENOA RD.**

City **FORT WORTH** State **TX** Zip Code **76116**

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

Name of Employer **HILLWOOD PROPERTIES** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **4700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112040

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
PAUL BISCHLER

Mailing Address 2100 DURANGO CT

City SOUTHLAKE State TX Zip Code 76092

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

Name of Employer BNSF RAILWAY Occupation FINANCE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112044

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LORAL R. BLINDE

Mailing Address 6064 MASTERS BLVD

City ORLANDO State FL Zip Code 32819

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

Name of Employer AMERICAN AIRLINES Occupation EVP, PEOPLE AND COMMUNICATIONS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112139

Amount of Each Receipt this Period
300.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LAURENCE E. BLOW

Mailing Address 2554 N. GREENBRIER ST.

City ARLINGTON State VA Zip Code 22207

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

Name of Employer MAGLER TRANSPORT Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112783

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEVAN BOBB

Mailing Address 1813 KINSALE DRIVE

City ROANOKE State TX Zip Code 76262

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

Name of Employer BNSF Occupation MARKETING

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 18 / 2016

Transaction ID : SA11AI.111845

Amount of Each Receipt this Period
 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HENRY BONILLA

Mailing Address 215 N CENTER ST

City SAN ANTONIO State TX Zip Code 78202

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

Name of Employer NORMANDY GROUP Occupation PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.112305

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN A BONYA

Mailing Address 134 S 6TH STREET

City INDIANA State PA Zip Code 15701

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

Name of Employer BONYA GAZZA & DEGORY, LLP Occupation ATTORNEY/PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112353

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JAMES G BOONE

Mailing Address 169 BOONE LANE

City State Zip Code
ALTOONA PA 16601

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

Name of Employer Occupation
LYTLES TRANSFER & STORAGE, INC. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.112319

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DONALD M BOWMAN

Mailing Address 10702 HOPEWELL RD

City State Zip Code
WILLIAMSPORT MD 21795

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

Name of Employer Occupation
BOWMAN GROUP PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112781

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DENNIS C BOYER

Mailing Address 643 MOURNING DOVE DR

City State Zip Code
SARASOTA FL 34236

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

Name of Employer Occupation
US ENERGY ENERGY PRODUCTION

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112406

Amount of Each Receipt this Period
 2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
J. CHRISTOPHER BRADY

Mailing Address 1800 DRURY LANE

City State Zip Code
ALEXANDRIA VA 22307

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

Name of Employer Occupation
CRA, LLC PRINCIPAL

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112739

Amount of Each Receipt this Period
700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
J. CHRISTOPHER BRADY

Mailing Address 1800 DRURY LANE

City State Zip Code
ALEXANDRIA VA 22307

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

Name of Employer Occupation
CRA, LLC PRINCIPAL

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112740

Amount of Each Receipt this Period
1900.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DOLORES K BRAKE

Mailing Address 224 RHONDEL DR
PO BOX 275

City State Zip Code
SAINT THOMAS PA 17252

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

Name of Employer Occupation
REMAX REALTY AGENCY REALTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.112761

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5300.00

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

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

FOR LINE NUMBER: PAGE 17 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DOLORES K BRAKE

Mailing Address 224 RHONDEL DR
PO BOX 275

City SAINT THOMAS State PA Zip Code 17252

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

Name of Employer REMAX REALTY AGENCY Occupation REALTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.112762

Amount of Each Receipt this Period
1900.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HAROLD L BRAKE

Mailing Address 224 RHONDEL DR
PO BOX 275

City SAINT THOMAS State PA Zip Code 17252

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

Name of Employer CHARLES E BRAKE CO INC Occupation CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.112759

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HAROLD L BRAKE

Mailing Address 224 RHONDEL DR
PO BOX 275

City SAINT THOMAS State PA Zip Code 17252

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

Name of Employer CHARLES E BRAKE CO INC Occupation CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.112760

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

7300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ROLLIN BREDENBERG

Mailing Address 225 E BOB JONES RD

City SOUTHLAKE State TX Zip Code 76092

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

Name of Employer BNSF RAILWAY Occupation VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112050

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JED A BROWN

Mailing Address 106 ELKINGTON LOOP

City LAREDO State TX Zip Code 78045

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

Name of Employer BROWNSTONE AFFORDABLE HOUSING, LTI Occupation VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111979

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ART G BRUAW JR.

Mailing Address PO BOX 277
1042 MERCERSBURG ROAD

City SAINT THOMAS State PA Zip Code 17252

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

Name of Employer E. C. BARNES, INC Occupation PRESIDENT/DISTRIBUTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.112752

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MELINDA J. BUCCI

Mailing Address 2500 COUNTRY CLUB DR.

City State Zip Code
PITTSBURGH PA 15205

FEC ID number of contributing federal political committee.

Name of Employer Occupation
GOLDEN TRIANGLE CONSTRUCTION PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112588

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
STEPHANIE BUCHANAN

Mailing Address 5208 GRAND LAKE

City State Zip Code
BELLAIRE TX 77401

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UNITED AIRLINES AIRLINE EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.111801

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
MATTHEW J BURNS

Mailing Address 940 LOWER PINE CREEK RD

City State Zip Code
CHESTER SPRINGS PA 19425

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BURNS ENGINEERING CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112676

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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: (check only one)	PAGE 20 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
KEITH A BUSH

Mailing Address 1832 KENWOOD PKWY.

City State Zip Code
MINNEAPOLIS MN 55405

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

Name of Employer Occupation
AMERICAN AIRLINES SENIOR VICE PRESIDENT - FINANCE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112131

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JAMES W. BUTLER

Mailing Address 2911 MERLIN DR

City State Zip Code
LEWISVILLE TX 75056

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

Name of Employer Occupation
AMERICAN AIRLINES CARGO PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112140

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WILLIAM R BYRD

Mailing Address 35 S ROYAL FERN DR.

City State Zip Code
THE WOODLANDS TX 77380

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

Name of Employer Occupation
RCP, INC. ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.112062

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

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

FOR LINE NUMBER: PAGE 21 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. PAUL J CALANDRA

Mailing Address PO BOX 187

City CRESSON State PA Zip Code 16630

FEC ID number of contributing federal political committee. C

Name of Employer JENNMAR CORP Occupation GENERAL MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.112324

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ARTHUR E CAMERON

Mailing Address 224 FALCON RIDGE RD

City GREAT FALLS State VA Zip Code 22066

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : SA11AI.112295

Amount of Each Receipt this Period
 700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ARTHUR E CAMERON

Mailing Address 224 FALCON RIDGE RD

City GREAT FALLS State VA Zip Code 22066

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : SA11AI.112296

Amount of Each Receipt this Period
 300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NANCY P CAMPBELL

Mailing Address 167 MOUNTAIN VIEW DR

City State Zip Code
HOLLIDAYSBURG PA 16648

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

Name of Employer Occupation
HOSS'S STEAK & SEA HOUSES FOUNDER/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112708

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TIMOTHY P CAMPBELL

Mailing Address 643 BROOKSTONE DR

City State Zip Code
IRVING TX 75039

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

Name of Employer Occupation
AMERICAN AIRLINES SENIOR VICE PRESIDENT - AIR OPERATION

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112128

Amount of Each Receipt this Period
750.00

Memo Item

C. Full Name (Last, First, Middle Initial)
THOMAS A CARAMANICO

Mailing Address 2001 MARKET ST
TENTH FLOOR

City State Zip Code
PHILADELPHIA PA 19103

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

Name of Employer Occupation
MCCORMICK TAYLOR, INC ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112674

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
A. BRADFORD CARD

Mailing Address 896 HELGA PLACE

City State Zip Code
MC LEAN VA 22102

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

Name of Employer Occupation
CARD AND ASSOCIATES LOBBYIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 06 / 2016

Transaction ID : SA11AI.112277

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MICHAEL R. CARREON

Mailing Address 12120 E WELSH TRL

City State Zip Code
SCOTTSDALE AZ 85259

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

Name of Employer Occupation
AMERICAN AIRLINES VP AND CORPORATE CONTROLLER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.112146

Amount of Each Receipt this Period
350.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER B CARSON

Mailing Address 17 SUNNYHILL DR

City State Zip Code
PITTSBURGH PA 15228

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

Name of Employer Occupation
CONEN & GRISBY PRESIDENT AND CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112411

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DON B CASEY

Mailing Address 626 FAIRWAY VIEW TERRACE

City SOUTHLAKE State TX Zip Code 76092

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

Name of Employer AMERICAN AIRLINES Occupation VICE PRESIDENT - REVENUE MANAGEMEN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112019

Amount of Each Receipt this Period
750.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LORNE W. CASS

Mailing Address 701 PENNSYLVANIA AVE NW #1014

City WASHINGTON State DC Zip Code 20004

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

Name of Employer AMERICAN AIRLINES Occupation VICE PRESIDENT, INTEGRATED OPERATIO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112125

Amount of Each Receipt this Period
300.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MS. JUDITH R CAVALANCIA

Mailing Address 2 WHITES WOODS TRAIL

City INDIANA State PA Zip Code 15701

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112361

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1300.00

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

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

FOR LINE NUMBER: PAGE 25 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIE CHIANG

Mailing Address 411 PINEY POINT RD

City State Zip Code
HOUSTON TX 77024

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

Name of Employer Occupation
PLAINS ALL AMERICAN EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.112063

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CHIMICLES & TIKELLIS, LLP

Mailing Address 361 W LANCASTER AVE

City State Zip Code
HAVERFORD PA 19041

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112670

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DAVOD MASER

Mailing Address 361 HAVERFORD CENTRE

City State Zip Code
HAVERFORD PA 19041

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

Name of Employer Occupation
CHIMICLES AND TIKELLIS LLP PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112695

Amount of Each Receipt this Period
1000.00

Memo Item

PARTNERSHIP CHIMICLES & TIKELLIS, LLP

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JULIE CHLOPECKI

Mailing Address 1547 EVERS DR

City State Zip Code
MC LEAN VA 22101

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

Name of Employer Occupation
XENOPHON STRATEGIES PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1153.64

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 08 / 2016

Transaction ID : SA11AI.112301

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
THOMAS C CLEMONS

Mailing Address 18008 FAWNS CROSSING

City State Zip Code
DRIPPING SPRINGS TX 78620

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SA11AI.112683

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN E CLINTON

Mailing Address 3339 ST ANDREWS DR

City State Zip Code
CHAMBERSBURG PA 17202

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

Name of Employer Occupation
SHIPPENSBURG UNIVERSITY FOUNDATION PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.112768

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
LYNDA COFFMAN

Mailing Address 68 WOODBERRY RD

City State Zip Code
DEER PARK IL 60010

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

Name of Employer Occupation
UNITED AIRLINES VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11AI.111905

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WILLIAM R COLLINS III

Mailing Address 250 BRISTOL LANE

City State Zip Code
HOLLIDAYSBURG PA 16648

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

Name of Employer Occupation
COURTESY MOTOR SALES MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.112317

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SARAH E COOK

Mailing Address 821 W RACE ST.

City State Zip Code
SOMERSET PA 15501

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

Name of Employer Occupation
NONE HOME MAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112405

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
DAVID T COVARRUBIAS

Mailing Address 8507 MEAGHAN MIST

City State Zip Code
HELOTES TX 78023

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

Name of Employer Occupation
SEA SENIOR PROJECT MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111990

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JEFFREY W COY

Mailing Address 9620 FOREST RIDGE DR

City State Zip Code
SHIPPENSBURG PA 17257

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.112744

Amount of Each Receipt this Period
400.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LISA CRUTCHFIELD

Mailing Address 2 HUDSON WAY

City State Zip Code
GARNET VALLEY PA 19060

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112690

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JEFFREY D CUTCHALL

Mailing Address 2495 HAFER RD

City State Zip Code
FAYETTEVILLE PA 17222

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.112753

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DAVID DADOLY

Mailing Address 201 WINDGATE DR.

City State Zip Code
CHESTER SPRINGS PA 19425

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SA11AI.112686

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MR JESSE DANIEL

Mailing Address 335 CHESTNUT ST.

City State Zip Code
INDIANA PA 15701

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

Name of Employer Occupation
INDIANA GOP STATE PARTY CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112363

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JAMES D DANNENBAUM

Mailing Address 3100 W ALABAMA ST.

City HOUSTON State TX Zip Code 77098

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

Name of Employer DANNENBAUM ENGINEERING CORP. Occupation CHAIRMAN AND CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111977

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BARBARA W DAVIES

Mailing Address 169 OXFORD HEIGHTS RD.

City SOMERSET State PA Zip Code 15501

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112263

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SAM DAWSON

Mailing Address 129 TURNBERRY WAY

City SAN ANTONIO State TX Zip Code 78230

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

Name of Employer PAPE-DAWSON ENGINEERS Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112027

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
NICHOLAS DEBENEDICTIS

Mailing Address 231 GOLF VIEW RD

City ARDMORE State PA Zip Code 19003

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11AI.112655

Amount of Each Receipt this Period
700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
RONALD J. DEFEO

Mailing Address 3752 PARKLAND DR

City ORLANDO State FL Zip Code 32814

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

Name of Employer AMERICAN AIRLINES Occupation VICE PRESIDENT, COMMUNICATIONS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112130

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BRUNO DEGOL JR.

Mailing Address 351 DEGOL DRIVE

City TYRONE State PA Zip Code 16686

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

Name of Employer DEGOL ORGANIZATION Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112719

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
BRUNO DEGOL JR.

Mailing Address 351 DEGOL DRIVE

City TYRONE State PA Zip Code 16686

FEC ID number of contributing federal political committee.

Name of Employer DEGOL ORGANIZATION Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112720

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
DAVID A DEGOL

Mailing Address 2249 SCOTCH VALLEY ROAD

City HOLLIDAYSBURG State PA Zip Code 16648

FEC ID number of contributing federal political committee.

Name of Employer DEGOL ORGANIZATION Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112722

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
DENNIS W DEGOL

Mailing Address 3229 PLEASANT VALLEY BLVD

City ALTOONA State PA Zip Code 16602

FEC ID number of contributing federal political committee.

Name of Employer DEGOL ORGANIZATION Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112721

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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: (check only one)	PAGE 33 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
POLLY DEGOL

Mailing Address 351 DEGOL DRIVE

City TYRONE State PA Zip Code 16686

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11AI.112498

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DONALD DEGOL

Mailing Address 3229 PLEASANT VALLEY BLVD

City ALTOONA State PA Zip Code 16602

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112718

Amount of Each Receipt this Period
 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ANTHONY J. DEPAUL

Mailing Address 1070 BLYTH CT.

City BLUE BELL State PA Zip Code 19422

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

Name of Employer THE DEPAUL GROUP Occupation GENERAL MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112428

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
PAUL I DETWILER III

Mailing Address 5029 PENNKOLL HEIGHTS

City State Zip Code
EVERETT PA 15537

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

Name of Employer Occupation
NEW ENTERPRISE STONE AND LIME EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112223

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DONALD L DETWILER

Mailing Address 233 STONEHEDGE RD

City State Zip Code
HOLLIDAYSBURG PA 16648

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

Name of Employer Occupation
NEW ENTERPRISE STONE AND LIME EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112883

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SANDRA K DETWILER

Mailing Address 5029 PENNKOLL HTS

City State Zip Code
EVERETT PA 15537

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112252

Amount of Each Receipt this Period
800.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
SANDRA K DETWILER

Mailing Address 5029 PENNKOLL HTS

City State Zip Code
EVERETT PA 15537

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : SA11AI.112460

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PAUL I DETWILER JR.

Mailing Address 186 ARANDALE ST

City State Zip Code
BEDFORD PA 15522

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

Name of Employer Occupation
NEW ENTERPRISE STONE AND LIME CHAIRMAN OF THE BOARD

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.112584

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LYNNEA K DETWILER

Mailing Address 233 STONEHEDGE RD.

City State Zip Code
HOLLIDAYSBURG PA 16648

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112884

Amount of Each Receipt this Period
800.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
DONALD DEVORRIS

Mailing Address 304 WARD AVE E

City State Zip Code
ALTOONA PA 16602

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

Name of Employer Occupation
BLAIR ELECTRIC SERVICES PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 18 / 2016

Transaction ID : SA11AI.112461

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DILWORTH PAXSON LLP

Mailing Address 3200 MELLON BANK CENTER
1735 MARKET STREET

City State Zip Code
PHILADELPHIA PA 19103

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SA11AI.112668

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TIMOTHY J CARSON

Mailing Address 1500 MARKET ST 38TH FLOOR

City State Zip Code
PHILADELPHIA PA 19102

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

Name of Employer Occupation
DILWORTH PAXSON PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SA11AI.112669

Amount of Each Receipt this Period
1000.00

Memo Item

PARTNERSHIP DILWORTH PAXSON LLP

SUBTOTAL of Receipts This Page (optional).....

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
BRIAN T DINGES

Mailing Address 125 ALLEGHENY DR

City State Zip Code
HOLLIDAYSBURG PA 16648

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11AI.112876

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SANDRA DISTEFANO-BARTOLOMEO

Mailing Address 7 MANSOR CT.

City State Zip Code
SEWELL NJ 08080

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SA11AI.112678

Amount of Each Receipt this Period
300.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DONALD DEVORRIS REALTY

Mailing Address PO BOX 2566

City State Zip Code
ALTOONA PA 16603

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11AI.112697

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
DONLAD DEVORRIS

Mailing Address **PO BOX 2566**

City **ALTOONA** State **PA** Zip Code **16603**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11AI.112698

Amount of Each Receipt this Period
1000.00

Memo Item

PARTNERSHIP DONALD DEVORRIS REALTY

B. Full Name (Last, First, Middle Initial)
MICHAEL J DONNELLY

Mailing Address **118 GREENVIEW DR**

City **INDIANA** State **PA** Zip Code **15701**

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

Name of Employer **INDIANA PRINTING & PUBLISHING** Occupation **PRESIDENT & PUBLISHER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112422

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FREDERICK DRAPER

Mailing Address **2650 LOU MENK DR**

City **FORT WORTH** State **TX** Zip Code **76131**

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

Name of Employer **BNSF RAILWAY** Occupation **VICE PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112048

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JOHN CRAIG DREW

Mailing Address 5352 NORTSHORE DR

City State Zip Code
FRISCO TX 75034

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

Name of Employer Occupation
SOUTHWEST AIR SENIOR VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112010

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LAWRENCE J DREYFUSS

Mailing Address 11A S WEST OAK DR.

City State Zip Code
HOUSTON TX 77056

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

Name of Employer Occupation
PLAINS ALL AMERICAN GENERAL COUNSEL

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112037

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MR. BRIAN L DURBIN

Mailing Address 3209 GRANADA WAY

City State Zip Code
ALTOONA PA 16601

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

Name of Employer Occupation
DURBIN COMPANIES/PBA OWNER/DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11AI.112880

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ELISE EBERWEIN

Mailing Address 13828 N 106TH WAY

City State Zip Code
SCOTTSDALE AZ 85255

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

Name of Employer Occupation
AMERICAN AIRLINES EXECUTIVE VICE PRESIDENT - COMMUNIC

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.112138

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JEFFREY W EMBLY

Mailing Address 214 PHOENIX DR

City State Zip Code
CHAMBERSBURG PA 17201

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

Name of Employer Occupation
OFFICE ADMINISTRATOR SALZMANN HUGHES

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.112748

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SAUL EWING

Mailing Address 1500 MARKET ST 38TH FL

City State Zip Code
PHILADELPHIA PA 19102

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

Name of Employer Occupation
SAUL EWING LLP ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : SA11AI.112601

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MR. ROBERT J EYER

Mailing Address 129 FOREST CIRCLE

City PORTAGE State PA Zip Code 15946

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

Name of Employer WESSEL & COMPANY Occupation CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112381

Amount of Each Receipt this Period
 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MR. ROBERT J EYER

Mailing Address 129 FOREST CIRCLE

City PORTAGE State PA Zip Code 15946

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

Name of Employer WESSEL & COMPANY Occupation CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.112827

Amount of Each Receipt this Period
 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RICHARD FAIN

Mailing Address 700 ARVIDA PKWY

City CORAL GABLES State FL Zip Code 33156

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

Name of Employer ROYAL CARIBBEAN INTERNATIONAL Occupation CHAIRMAN & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112328

Amount of Each Receipt this Period
 1300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KATHRYN FARMER

Mailing Address 5100 CLIFFROSE LN

City State Zip Code
FORT WORTH TX 76109

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

Name of Employer Occupation
BNSF RAILWAY GROUP SALES VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112045

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FASKEN MANAGEMENT, LLC

Mailing Address 6101 HOLIDAY HILL RD.

City State Zip Code
MIDLAND TX 79707

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

Name of Employer Occupation
FASKEN MANAGEMENT LLC PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.112060

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RAUL PERALES

Mailing Address 6101 HOLIDAY HILL RD.

City State Zip Code
MIDLAND TX 79707

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

Name of Employer Occupation
FASKEN MANAGEMENT LLC PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.112061

Amount of Each Receipt this Period
 1000.00

Memo Item

PARTNERSHIP FASKEN MANAGEMENT, LLC

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MRS. LINDA K FETTEROLF

Mailing Address 627 NEW CENTERVILLE RD

City SOMERSET State PA Zip Code 15501

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112386

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DION J FLANNERY

Mailing Address 1100 RUNNYMEDE RD.

City OAKWOOD State OH Zip Code 45419

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

Name of Employer AMERICAN AIRLINES Occupation VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111999

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JUAN ANTONIO FLORES

Mailing Address 348 REDWOOD

City SAN ANTONIO State TX Zip Code 78209

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

Name of Employer PORT SAN ANTONIO Occupation GOVERNMENT AFFAIRS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112055

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRYAN FORCE

Mailing Address 83 KIMMEL RD.

City HOME State PA Zip Code 15747

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

Name of Employer FORCE, INC. Occupation PRESIDENT/OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112348

Amount of Each Receipt this Period
 700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BRITTNEI FORCE

Mailing Address 83 KIMMEL RD

City HOME State PA Zip Code 15747

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112349

Amount of Each Receipt this Period
 550.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SHAWN T FOX

Mailing Address 807 BREEZEWOOD DR

City GLENSHAW State PA Zip Code 15116

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112414

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
STEPHEN C FROBUCK

Mailing Address 18 OVERLOOK DR

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
ANDERSON GROUP PRIVATE EQUITY/PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112407

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BRIAN S. FUNKHOUSER

Mailing Address 6221 CELINE DR.

City State Zip Code
DOVER PA 17315

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

Name of Employer Occupation
BUCHART BASCO HORN PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112392

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WILLIAM A FURMAN

Mailing Address 1 CENTERPOINTE DR. STE. 200

City State Zip Code
LAKE OSWEGO OR 97035

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

Name of Employer Occupation
GREENBRIAR COMPANIES CHAIRMAN OF THE BOARD & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112007

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
HAROLD C GABLER JR.

Mailing Address 691 MONTGOMERY AVE

City State Zip Code
CHAMBERSBURG PA 17201

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

Name of Employer Occupation
GS&G PROPERTIES PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.112765

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LINDA G GABLER

Mailing Address 3718 EUCALYPTUS CT

City State Zip Code
CHAMBERSBURG PA 17202

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.112757

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MAURICE J. GALLAGHER

Mailing Address 8350 S. DURANGO DR. STE. 210

City State Zip Code
LAS VEGAS NV 89113

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

Name of Employer Occupation
ALLEGIANT TRAVEL CO. CEO & CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11AI.112741

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JOSEPH A. GALLO

Mailing Address 609 GEORGIAN PL

City SOMERSET State PA Zip Code 15501

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

Name of Employer CORSA COAL Occupation VP OPERATIONS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.112592

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DAVID L. GARIN

Mailing Address 1225 CASTLE COVE LANE

City ROANOKE State TX Zip Code 76262

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

Name of Employer BNSF Occupation GROUP VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111973

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ANNIE R GARZA

Mailing Address 1522 DEMARET CT.

City LAREDO State TX Zip Code 78045

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

Name of Employer CRANE ENGINEERING Occupation OFFICE MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111989

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
FELICIA J GAUDELLI

Mailing Address 1407 WEBSTER ST

City State Zip Code
BALTIMORE MD 21230

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

Name of Employer Occupation
PARKING LOT PAINTING CO PRESIDENT & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112427

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHN R GEBO

Mailing Address 3707 N MAGNOLIA AVE.

City State Zip Code
CHICAGO IL 60613

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

Name of Employer Occupation
UNITED AIRLINES SENIOR VICE PRESIDENT, FINANCIAL PLAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2016

Transaction ID : SA11AI.111924

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MR. CORY GEHRET

Mailing Address 4102 3RD AVE

City State Zip Code
ALTOONA PA 16602

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

Name of Employer Occupation
STIFFLER MCGRAW CIVIL ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112867

Amount of Each Receipt this Period
 200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
LEE W. GEISINGER

Mailing Address 2646 ST. PAUL RD.
LUTHER RIDGE RETIREMENT COMMUNITY

City State Zip Code
CHAMBERSBURG PA 17202

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.112568

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
RICHARD A. GEIST

Mailing Address 1100 27TH AVE.

City State Zip Code
ALTOONA PA 16601

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

Name of Employer Occupation
GEIST CONSTRUCTING CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : SA11AI.112449

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOSEPH H. GIBSON

Mailing Address 5040 GLENBROOK TERR NW

City State Zip Code
WASHINGTON DC 20016

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

Name of Employer Occupation
THE GIBSON GROUP PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112142

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
GILPIN ENGINEERING

Mailing Address 101 W HILLSIDE #8

City LAREDO State TX Zip Code 78041

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111980

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JUDD GILPIN

Mailing Address 101 W HILLSIDE #8

City LAREDO State TX Zip Code 78041

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

Name of Employer Occupation
 GILPIN ENGINEERING OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111981

Amount of Each Receipt this Period
 1000.00

Memo Item

PARTNERSHIP GILPIN ENGINEERING

C. Full Name (Last, First, Middle Initial)
MAXINE L GINDLESPERGER

Mailing Address 165 HIGHFIELD LN N

City CHAMBERSBURG State PA Zip Code 17201

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

Name of Employer Occupation
 E-LYNXX CORPORATION PRINT PROCUREMENT SERVICE PROVIDER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.112743

Amount of Each Receipt this Period
 2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MAXINE L GINDLESPERGER

Mailing Address 165 HIGHFIELD LN N

City State Zip Code
CHAMBERSBURG PA 17201

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

Name of Employer Occupation
E-LYNXX CORPORATION PRINT PROCUREMENT SERVICE PROVIDER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.112755

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ANDREW J GIORGIONE

Mailing Address 2911 2ND ST N

City State Zip Code
HARRISBURG PA 17110

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

Name of Employer Occupation
BUCHANAN INGERSOLL & ROONEY, PC ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112423

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MARK V GLENN

Mailing Address 2230 CEDAR ST

City State Zip Code
HOLLIDAYSBURG PA 16648

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

Name of Employer Occupation
GWIN DOBSON AND FOREMAN INC PRESIDENT & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11AI.112210

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
LISA W GLEZER

Mailing Address **2784 FARNHAM LANE**

City **YORK** State **PA** Zip Code **17408**

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

Name of Employer **WAGMAN COMPANIES** Occupation **PARTNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11AI.112219

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MARK J GORMAN

Mailing Address **5000 MONTROSE BLVD.
UNIT 15F**

City **HOUSTON** State **TX** Zip Code **77006**

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

Name of Employer **PLAINS ALL AMERICAN** Occupation **EXECUTIVE VICE PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112031

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SEAN W. GORMLEY

Mailing Address **2 S PEMBROKE AVE**

City **MARGATE CITY** State **NJ** Zip Code **08402**

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

Name of Employer **INNOVATIVE RISK SOLUTIONS** Occupation **INSURANCE BROKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.112771

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
BEVERLY K GOULET

Mailing Address 3831 TURTLE CREEK BLVD.
APT. 18F

City State Zip Code
DALLAS TX 75219

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

Name of Employer Occupation
AMERICAN AIRLINES CHIEF INTEGRATION OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.112144

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ARACELY G. GRANADOS

Mailing Address 21 ANCIENT BEND

City State Zip Code
SAN ANTONIO TX 78248

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

Name of Employer Occupation
MEXICAN AMERICANS THINKING TOGETHER EXECUTIVE DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112029

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DAWN GREEN

Mailing Address 16615 SNELL MEADOW

City State Zip Code
SAN ANTONIO TX 78247

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

Name of Employer Occupation
CIVIL ENGINEERING CONSULTANTS EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112024

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
GREENLEE PARTNERS, LLC

Mailing Address PO BOX 291

City HARRISBURG State PA Zip Code 17108

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112231

Amount of Each Receipt this Period
 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MR. STANLEY I RAPP

Mailing Address 230 STATE STREET

City HARRISBURG State PA Zip Code 17101

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

Name of Employer Occupation
 GREENLEE PARTNERS, LLC SENIOR PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112233

Amount of Each Receipt this Period
 500.00

Memo Item

PARTNERSHIP GREENLEE PARTNERS, LLC

C. Full Name (Last, First, Middle Initial)
RODNEY D GRETTLER

Mailing Address PO BOX 1022

City INDIANA State PA Zip Code 15701

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

Name of Employer Occupation
 WACHOVIA SECURITIES BROKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112350

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

750.00

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

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

FOR LINE NUMBER: PAGE 55 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL P GRIMM

Mailing Address 249 FOX CHASE DR

City State Zip Code
DUNCANSVILLE PA 16635

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

Name of Employer Occupation
AMERICAN EAGLE PAPER MILLS PRESIDENT AND CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112704

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DR. ANDREW W GURMAN

Mailing Address 219 BRUSHMEADE RD

City State Zip Code
HOLIDAYSBURG PA 16648

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

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.112308

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
EUGENE HALE

Mailing Address 13235 RUTHELEN ST

City State Zip Code
GARDENA CA +035+

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

Name of Employer Occupation
CONSTRUCTION EQUIPMENT MATERIALS A PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : SA11AI.112293

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1450.00

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

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

FOR LINE NUMBER: PAGE 56 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RYAN E HARCAR

Mailing Address 3322 S PARKSIDE DR.

City State Zip Code
NEW CASTLE PA 16105

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

Name of Employer Occupation
LINDY PAVING CONSTRUCTION

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112442

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WILLIAM G HARRIS

Mailing Address 502 CHERRY LANE

City State Zip Code
JOHNSTOWN PA 15904

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

Name of Employer Occupation
HARRIS FUNERAL HOME INC FUNERAL DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112396

Amount of Each Receipt this Period
 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GREGORY L HART

Mailing Address 43 KENILWORTH AVE.

City State Zip Code
KENILWORTH IL 60043

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

Name of Employer Occupation
UNITED AIRLINES SENIOR VICE PRESIDENT, TECHNICAL OPE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2016

Transaction ID : SA11AI.111844

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
DANIEL R HAWBAKER

Mailing Address 5881 BUFFALO RUN RD W

City State Zip Code
PORT MATILDA PA 16870

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

Name of Employer Occupation
GLENN O HAWBAKER INC CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : SA11AI.112458

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JASON F. HAWKINS

Mailing Address 922 BLAIRS HILL RD.

City State Zip Code
NEEDMORE PA 17238

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

Name of Employer Occupation
FULTON COUNTY MEDICAL CENTER CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112379

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GEOFFREY S HEDRICK

Mailing Address 12 HUNT CLUB LANE

City State Zip Code
MALVERN PA 19355

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112685

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JANET HELSEL

Mailing Address 112 BRUBAKER LN

City State Zip Code
ALTOONA PA 16601

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

Name of Employer Occupation
THE EADS GROUP VP AND MARKETING DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112702

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SEAN M HENDERSON

Mailing Address 216 NEBRASKA DR

City State Zip Code
LOWER BURRELL PA 15068

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

Name of Employer Occupation
PENNSYLVANIA TRANSPORTATION PRACTICE LEADER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112213

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MR. JAMES D HENSLER

Mailing Address 2521 C SOUTH WALTER REED DR

City State Zip Code
ARLINGTON VA 22206

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

Name of Employer Occupation
HORSEHEAD HOLDING CO CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11AI.112469

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
PATRICIA ANN HERRING

Mailing Address 4253 GLADES PIKE

City SOMERSET State PA Zip Code 15501

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

Name of Employer J E HERRING MOTOR COMPANY Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112270

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TERRENCE HEUBERT

Mailing Address 6 W WALNUT ST

City ALEXANDRIA State VA Zip Code 22301

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

Name of Employer BUCHANAN INGERSOIL AND ROONEY Occupation GOVERNMENT RELATIONS CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 06 / 2016

Transaction ID : SA11AI.112279

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CHARNELLE L HICKS

Mailing Address PO BOX 226

City GREEN LANE State PA Zip Code 18054

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112682

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
DAVID HILFMAN

Mailing Address 3033 WESTBERRY DR. NE

City State Zip Code
IOWA CITY IA 52240

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

Name of Employer Occupation
UNITED AIRLINES SENIOR VICE PRESIDENT, SALES

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 13 / 2016

Transaction ID : SA11AI.111839

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NOE HINOJOSA JR

Mailing Address 6038 WOODLAND DR

City State Zip Code
DALLAS TX 75225

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

Name of Employer Occupation
ESTRADE HINOJOSA PRESIDENT AND CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : SA11AI.112292

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
VAN D HIPPI JR.

Mailing Address 809 N. QUAKER LANE

City State Zip Code
ALEXANDRIA VA 22302

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

Name of Employer Occupation
AMERICAN DEFENSE INTERNATIONAL CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112331

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
R LEE HITE

Mailing Address 501 BEAUMONT DR

City State Zip Code
ALTOONA PA 16602

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

Name of Employer Occupation
THE HITE COMPANY PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112707

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CHRIS M HOLUTA

Mailing Address 153 VALLEY RD

City State Zip Code
INDIANA PA 15701

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

Name of Employer Occupation
THE RESCHINI GROUP EXECUTIVE VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.112572

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN L HOPKINS

Mailing Address 107 IVYSIDE ESTATES LN.

City State Zip Code
ALTOONA PA 16601

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.112309

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
BRUCE G HOTTLE

Mailing Address 186 CASEBEER CHURCH RD

City SOMERSET	State PA	Zip Code 15501
------------------	-------------	-------------------

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

Name of Employer EAGLE CONCRETE PRODUCTS	Occupation CEO
---	-------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112395

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DEAN M HOTTLE

Mailing Address 755 HUSBAND RD.

City SOMERSET	State PA	Zip Code 15501
------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112267

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JAMES D. HUGHES

Mailing Address 354 ALEXANDER SPRING RD. STE. 1

City CARLISLE	State PA	Zip Code 17015
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.112749

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MICHAEL L HUMPHREY

Mailing Address 112 SANDSTONE DR.

City State Zip Code
HOLLIDAYSBURG PA 16648

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

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112691

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HUNTER FAMILY REALTY

Mailing Address 480 PITTSBURGH RD

City State Zip Code
BUTLER PA 16002

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

Name of Employer Occupation
Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112436

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RALPH FISCHER

Mailing Address 480 PITTSBURGH RD

City State Zip Code
BUTLER PA 16002

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

Name of Employer Occupation
HUNTER FAMILY REALTY PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112437

Amount of Each Receipt this Period
1000.00

Memo Item

PARTNERSHIP HUNTER FAMILY REALTY

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

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

FOR LINE NUMBER: PAGE 64 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HUNTLEY & HUNTLEY ENERGY EXPLORATION

Mailing Address 2660 MONROEVILLE BLVD

City State Zip Code
MONROEVILLE PA 15146

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112439

Amount of Each Receipt this Period
 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KEITH MANGINI

Mailing Address 2660 MONROEVILLE BLVD

City State Zip Code
MONROEVILLE PA 15146

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

Name of Employer Occupation
HUNTLEY & HUNTLEY ENERGY EXPLORATI K PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112440

Amount of Each Receipt this Period
 1000.00

Memo Item

PARTNERSHIP HUNTLEY & HUNTLEY ENERGY EXPLORATION

C. Full Name (Last, First, Middle Initial)
PAUL BURKE

Mailing Address 2660 MONROEVILLE BLVD

City State Zip Code
MONROEVILLE PA 15146

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

Name of Employer Occupation
HUNTLEY & HUNTLEY ENERGY EXPLORATI K VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112441

Amount of Each Receipt this Period
 1000.00

Memo Item

PARTNERSHIP HUNTLEY & HUNTLEY ENERGY EXPLORATION

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
CARL R ICE

Mailing Address 2206 CEDAR ELM TER.

City WESTLAKE State TX Zip Code 76262

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

Name of Employer BNSF RAILWAY COMPANY Occupation PRESIDENT & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111974

Amount of Each Receipt this Period
 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MATTHEW JOHN IGOE

Mailing Address 2 HEATHER GLEN DRIVE

City TROPHY CLUB State TX Zip Code 76262

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

Name of Employer BNSF Occupation MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2016

Transaction ID : SA11AI.111925

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FRED N IMLER II

Mailing Address PO BOX 836

City DUNCANSVILLE State PA Zip Code 16635

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

Name of Employer IMLERS POULTRY LLP Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : SA11AI.112453

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ROBERT D ISOM JR.

Mailing Address 8129 N 74TH PL.

City State Zip Code
SCOTTSDALE AZ 85258

FEC ID number of contributing federal political committee.

Name of Employer Occupation
AMERICAN AIRLINES EXECUTIVE VICE PRESIDENT & COO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112133

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHN W JACOB

Mailing Address 952 SHADY LN

City State Zip Code
SOMERSET PA 15501

FEC ID number of contributing federal political committee.

Name of Employer Occupation
HIGHLAND TANK VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112271

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN W JACOB

Mailing Address 952 SHADY LN

City State Zip Code
SOMERSET PA 15501

FEC ID number of contributing federal political committee.

Name of Employer Occupation
HIGHLAND TANK VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112272

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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: (check only one)	PAGE 67 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
KEVIN L JOHNSON

Mailing Address 1759 HAMILTON DR

City State Zip Code
PHOENIXVILLE PA 19460

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

Name of Employer Occupation
TRAFFIC PLANNING & DESIGN INC. TRANSPORTATION ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 29 2016

Transaction ID : SA11AI.112212

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KEVIN L JOHNSON

Mailing Address 1759 HAMILTON DR

City State Zip Code
PHOENIXVILLE PA 19460

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

Name of Employer Occupation
TRAFFIC PLANNING & DESIGN INC. TRANSPORTATION ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 24 2016

Transaction ID : SA11AI.112576

Amount of Each Receipt this Period
700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MATTHEW W JOHNSON

Mailing Address 132 SOUTH DR.

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
RUSSELL STANDARD CORP. CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 14 2016

Transaction ID : SA11AI.112431

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
STEPHEN L JOHNSON

Mailing Address 1918 N OLIVE ST.
APT. 3901

City DALLAS State TX Zip Code 75201

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

Name of Employer AMERICAN AIRLINES Occupation EXECUTIVE VICE PRESIDENT - CORPORAT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112147

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
STEPHEN L JOHNSON

Mailing Address 1918 N OLIVE ST.
APT. 3901

City DALLAS State TX Zip Code 75201

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

Name of Employer AMERICAN AIRLINES Occupation EXECUTIVE VICE PRESIDENT - CORPORAT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112149

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMY F. JOHNSON

Mailing Address 1759 HAMILTON DR

City PHOENIXVILLE State PA Zip Code 19460

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.112578

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
DARLENE P JOHNSTON

Mailing Address 1207 BACK RUN RD

City State Zip Code
MC CONNELLSBURG PA 17233

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

Name of Employer Occupation
H. D. JOHNSTON, D.O. PHYSICIAN ASSISTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.112764

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PAUL D JONES

Mailing Address 111 W RIO SALADO PKWY.

City State Zip Code
TEMPE AZ 85281

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

Name of Employer Occupation
AMERICAN AIRLINES SENIOR VICE PRESIDENT & GENERAL COU

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.112132

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RICHARD E JORDAN II

Mailing Address 4 FOXTAIL CT.

City State Zip Code
MECHANICSBURG PA 17050

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

Name of Employer Occupation
SMITH LAND IMPROVEMENT CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.112767

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ROBERT E. JORDAN

Mailing Address 3509 CHIMNEY ROCK DR

City State Zip Code
FLOWER MOUND TX 75022

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

Name of Employer Occupation
SOUTHWEST AIR EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112006

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NANCY JORGENSEN FLETCHER

Mailing Address 4125 PARKGLEN CT NW

City State Zip Code
WASHINGTON DC 20007

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

Name of Employer Occupation
OUTDOOR ADVERTISING ASSOC PRESIDENT & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112253

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DR. JOHN P JOYCE

Mailing Address 1101 LOGAN BLVD.

City State Zip Code
ALTOONA PA 16602

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

Name of Employer Occupation
SELF EMPLOYED DERMATOLOGIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.112310

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MR. JAMES SCOTT JUNKIN

Mailing Address **PO BOX 229**

City **WILLOW HILL** State **PA** Zip Code **17271**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.112754

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ROBERT E KANE

Mailing Address **200 N 7TH ST.**

City **INDIANA** State **PA** Zip Code **15701**

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

Name of Employer **RELIANT HOLDINGS** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112421

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ROBERT E KANE

Mailing Address **200 N 7TH ST.**

City **INDIANA** State **PA** Zip Code **15701**

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

Name of Employer **RELIANT HOLDINGS** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112435

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ROBERT KAROV

Mailing Address 908 CREEK HOLLOW LANE

City State Zip Code
FT. WORTH TX 76131

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

Name of Employer Occupation
BNSF RAIL VP LABOR RELATIONS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SA11AI.111972

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HOWARD KASS

Mailing Address 9220 BENTRIDGE AVE.

City State Zip Code
POTOMAC MD 20854

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

Name of Employer Occupation
AMERICAN AIRLINES VICE PRESIDENT - REGULATORY AFFAIRS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SA11AI.112122

Amount of Each Receipt this Period
400.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HERBERT D. KELLEHER

Mailing Address PO BOX 36611

City State Zip Code
DALLAS TX 75235

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

Name of Employer Occupation
SOUTHWEST AIR FOUNDER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SA11AI.112017

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JOSEPH G KELLER

Mailing Address 120 CLOVER CIRCLE

City HOLLIDAYSBURG State PA Zip Code 16648

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

Name of Employer KELLER ENGINEERING INC Occupation CIVIL ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11AI.112489

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MR. GARY C. KELLY

Mailing Address 3232 BRETON DR.

City PLANO State TX Zip Code 75025

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

Name of Employer SOUTHWEST AIRLINES Occupation CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112003

Amount of Each Receipt this Period
700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CAROL G. KELLY

Mailing Address 3232 BRETON DR

City PLANO State TX Zip Code 75025

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112004

Amount of Each Receipt this Period
1800.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
DEREK J KERR

Mailing Address 10919 E GOLD DUST AVE.

City State Zip Code
SCOTTSDALE AZ 85259

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

Name of Employer Occupation
AMERICAN AIRLINES CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112134

Amount of Each Receipt this Period
 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KILLAM DEVELOPMENT, LTD.

Mailing Address PO BOX 499

City State Zip Code
LAREDO TX 78042

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111993

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RADCLIFFE KILLAM II

Mailing Address PO BOX 499

City State Zip Code
LAREDO TX 78042

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

Name of Employer Occupation
KILLAM DEVELOPMENT PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111994

Amount of Each Receipt this Period
 1000.00

Memo Item

PARTNERSHIP KILLAM DEVELOPMENT, LTD.

SUBTOTAL of Receipts This Page (optional).....

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SCOTT KIRBY		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2016	
Mailing Address 1800 DUAL HWY. #303		Transaction ID : SA11AI.112137	
City HAGERSTOWN	State MD	Zip Code 21740	Amount of Each Receipt this Period _____ 2700.00 <input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Name of Employer AMERICAN AIRLINES	
Occupation PRESIDENT		Election Cycle-to-Date _____ 2700.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. MR. ROBERT H KIRST		Date of Receipt M M / D D / Y Y Y Y 02 / 29 / 2016	
Mailing Address 268 SHADY HOLLOW RD		Transaction ID : SA11AI.112269	
City SOMERSET	State PA	Zip Code 15501	Amount of Each Receipt this Period _____ 1000.00 <input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Name of Employer GLOBAL/SFC VALVE CORP	
Occupation PRESIDENT		Election Cycle-to-Date _____ 1500.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. KIT BOND STRATEGIES LLC		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2016	
Mailing Address 7733 FORSYTH BLVD STE 2300		Transaction ID : SA11AI.112166	
City ST. LOUIS	State MO	Zip Code 63105	Amount of Each Receipt this Period _____ 1000.00 <input type="checkbox"/> Memo Item SEE MEMOS BELOW
FEC ID number of contributing federal political committee. C		Name of Employer	
Occupation		Election Cycle-to-Date _____ 1000.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	_____ 4700.00
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: (check only one)	PAGE 76 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
CHRISTOPHER S. BOND

Mailing Address 555 BARNES RD

City State Zip Code
ST LOUIS MO 63124

FEC ID number of contributing federal political committee.

Name of Employer Occupation
KIT BOND STRATEGIES PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112167

Amount of Each Receipt this Period

Memo Item

PARTNERSHIP KIT BOND STRATEGIES LLC

B. Full Name (Last, First, Middle Initial)
KENNY C HULSHOF

Mailing Address 24 BINGHAM RD.

City State Zip Code
COLUMBIA MO 65203

FEC ID number of contributing federal political committee.

Name of Employer Occupation
KIT BOND STRATEGIES PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112169

Amount of Each Receipt this Period

Memo Item

PARTNERSHIP KIT BOND STRATEGIES LLC

C. Full Name (Last, First, Middle Initial)
MATTHEW L. RONEY

Mailing Address 1010 WILLOW RIDGE DR

City State Zip Code
BLUE SPRINGS MO 64014

FEC ID number of contributing federal political committee.

Name of Employer Occupation
KIT BOND STRATEGIES PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112170

Amount of Each Receipt this Period

Memo Item

PARTNERSHIP KIT BOND STRATEGIES LLC

SUBTOTAL of Receipts This Page (optional).....

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: (check only one)	PAGE 77 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
LINDA A. BOND

Mailing Address 555 BARNES RD

City ST LOUIS State MO Zip Code 63124

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

Name of Employer KIT BOND STRATEGIES Occupation PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112171

Amount of Each Receipt this Period
 100.00

Memo Item

PARTNERSHIP KIT BOND STRATEGIES LLC

B. Full Name (Last, First, Middle Initial)
WALTER P KITONIS III

Mailing Address 9760 TICO LN

City BRISTOW State VA Zip Code 20136

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

Name of Employer PROGENY SYSTEMS Occupation ENGINEERING

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : SA11AI.112303

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DR. ALAN J KIVITZ

Mailing Address 514 WOODLAWN TER

City HOLLIDAYSBURG State PA Zip Code 16648

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

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : SA11AI.112457

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
LEROY D KLINE JR.

Mailing Address 1709 OLMSTED WAY W

City State Zip Code
CAMP HILL PA 17011

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

Name of Employer Occupation
DELTA DEVELOPMENT GROUP, INC PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112222

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GLADYS W KNOX

Mailing Address PO BOX 79

City State Zip Code
ARMAGH PA 15920

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

Name of Employer Occupation
SELF EMPLOYED WRIGHT MANAGEMENT TEAM, INC.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112347

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOE KOVALCHICK

Mailing Address PO BOX 279

City State Zip Code
INDIANA PA 15701

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

Name of Employer Occupation
KOVALCHICK COMPANIES PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112434

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
KAREN KOVALCHICK

Mailing Address 475 EDGEWOOD AVE

City: INDIANA State: PA Zip Code: 15701

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 14 / 2016

Transaction ID : SA11AI.112356

Amount of Each Receipt this Period: 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
RICHARD L KRAMER

Mailing Address 1280 MARYLAND AVE SW

City: WASHINGTON State: DC Zip Code: 20024

FEC ID number of contributing federal political committee: C

Name of Employer: REPUBLIC PROPERTIES CORPORATION Occupation: REAL ESTATE DEVELOPER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 03 / 08 / 2016

Transaction ID : SA11AI.112300

Amount of Each Receipt this Period: 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DALE N KRAPP

Mailing Address 220 HUNTING HILL LN

City: WEST CHESTER State: PA Zip Code: 19380

FEC ID number of contributing federal political committee: C

Name of Employer: KRAPP BUS COMPANIES Occupation: CHAIRMAN OF THE BOARD

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 03 / 08 / 2016

Transaction ID : SA11AI.112299

Amount of Each Receipt this Period: 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
WILLIAM C KREITZ

Mailing Address 1164 WHEATON DR.

City State Zip Code
BETHLEHEM PA 18017

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

Name of Employer Occupation
HAMPSON MOWRER KREITZ AGENCY INSURANCE SALES

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112684

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
S. M. KRENTZMAN

Mailing Address PO BOX 508

City State Zip Code
LEWISTOWN PA 17044

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

Name of Employer Occupation
JOE KRENTZMAN AND SON INC. CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112711

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOSEPH R. KRIER

Mailing Address 15060 CADILLAC DR

City State Zip Code
SAN ANTONIO TX 78248

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

Name of Employer Occupation
SAN ANONIO CITY COUNCIL COUNCILMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112026

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
D. SCOTT KROH

Mailing Address 809 WELDON ST

City LATROBE State PA Zip Code 15650

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

Name of Employer ROBINDALE ENERGY SERVICES, INC. Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112224

Amount of Each Receipt this Period
 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JACQUELINE D. KULBACK

Mailing Address 248 STARDUST DR

City JOHNSTOWN State PA Zip Code 15904

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

Name of Employer GAUTIER STEEL Occupation CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112393

Amount of Each Receipt this Period
 1950.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JACQUELINE D. KULBACK

Mailing Address 248 STARDUST DR

City JOHNSTOWN State PA Zip Code 15904

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

Name of Employer GAUTIER STEEL Occupation CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112394

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JAMES J KUTZ

Mailing Address 312 MEADOW DRIVE

City State Zip Code
MECHANICSBURG PA 17055

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

Name of Employer Occupation
POST & SCHELL PC ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
02 / 29 / 2016

Transaction ID : SA11AI.112216

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LAKE RAYSTOWN RESORT & LODGE

Mailing Address 100 CHIPMUNK CROSSING

City State Zip Code
ENTRIKEN PA 16638

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2016

Transaction ID : SA11AI.112325

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOSHUA R PATT

Mailing Address 342 BEL AIR ROAD

City State Zip Code
HOLLIDAYSBURG PA 16648

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

Name of Employer Occupation
LAKE RAYSTOWN RESORT PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2016

Transaction ID : SA11AI.112326

Amount of Each Receipt this Period
250.00

Memo Item

PARTNERSHIP LAKE RAYSTOWN RESORT & LODGE

SUBTOTAL of Receipts This Page (optional).....

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
STEPHEN L. LAMANTIA

Mailing Address 410 CROSSROADS

City State Zip Code
LAREDO TX 78045

FEC ID number of contributing federal political committee.

Name of Employer Occupation
L&F DISTRIBUTORS OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.111978

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
JEFF LAMB

Mailing Address 499 HIDDEN VALLEY DR

City State Zip Code
COPPELL TX 75019

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SOUTHWEST AIR EXECUTIVE VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112011

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
P JOSEPH LEHMAN JR.

Mailing Address 315 QUINCE CT

City State Zip Code
HOLLIDAYSBURG PA 16648

FEC ID number of contributing federal political committee.

Name of Employer Occupation
P JOSEPH LEHMAN INC PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112692

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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 84 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MAYA LEIBMAN

Mailing Address 4661 LIVINGSTON AVE.

City State Zip Code
DALLAS TX 75209

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

Name of Employer Occupation
AMERICAN AIRLINES CHIEF INFORMATION OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112145

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LEISS TOOL & DIE

Mailing Address 801 N PLEASANT AVE.

City State Zip Code
SOMERSET PA 15501

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112265

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PETER LEISS

Mailing Address 633 GILMORE RD

City State Zip Code
SOMERSET PA 15501

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

Name of Employer Occupation
LEISS TOOL & DIE OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112266

Amount of Each Receipt this Period
500.00

Memo Item

PARTNERSHIP LEISS TOOL & DIE

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
STEVEN D. LEIST

Mailing Address 1902 IVYGREEN CT

City PANTEGO State TX Zip Code 76013

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

Name of Employer AMERICAN AIRLINES Occupation VICE PRESIDENT, TECHNOLOGY INFRASTR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112126

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HUGH DEAN LEMLEY

Mailing Address 5285 FORBES RD

City BEDFORD State PA Zip Code 15522

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

Name of Employer OLDE TOWNE REALTY Occupation REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112713

Amount of Each Receipt this Period
 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MRS. SUSAN H. LENT

Mailing Address 3529 MALVERN CT.

City ALEXANDRIA State VA Zip Code 22304

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

Name of Employer AKIN GUMP STRAUSS HAUER & FELD LLP Occupation PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112784

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
DAN S LEYENDECKER

Mailing Address 801 NAVIGATION BLVD.
STE. 300

City State Zip Code
CORPUS CHRISTI TX 78408

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

Name of Employer Occupation
LNV, INC. PRINCIPAL

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2016

Transaction ID : SA11AI.111902

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WILLIAM K. LIEBERMAN

Mailing Address 201 GLADSTONE RD.

City State Zip Code
PITTSBURGH PA 15217

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

Name of Employer Occupation
TH LIEBERMAN COMPANIES PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112408

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TIM M LINDEMANN

Mailing Address 4618 E ORANGE DR

City State Zip Code
PHOENIX AZ 85018

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

Name of Employer Occupation
AMERICAN AIRLINES SVP TECHNICAL OPERATION

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112001

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
SHAWN M LONG

Mailing Address 110 WELLINGTON WAY

City JOHNSTOWN State PA Zip Code 15904

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

Name of Employer MEDCOMSOFT Occupation CEO/OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112343

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SHAWN M LONG

Mailing Address 110 WELLINGTON WAY

City JOHNSTOWN State PA Zip Code 15904

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

Name of Employer MEDCOMSOFT Occupation CEO/OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112412

Amount of Each Receipt this Period
950.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MRS. CATHY LONG

Mailing Address 110 WELLINGTON WAY

City JOHNSTOWN State PR Zip Code 15904

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112870

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
SANDRA LOY BELL

Mailing Address 3903 CHIPPENHAM RD

City State Zip Code
MECHANICSBURG PA 17050

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

Name of Employer Occupation
SKULY AND LOY CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11AI.112220

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MR. JONATHAN B MACK

Mailing Address 57 SOUTH SIXTH STREET

City State Zip Code
INDIANA PA 15701

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

Name of Employer Occupation
MARCUS & MACK ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112358

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MR. CLIFF MADISON

Mailing Address 601 PENNSYLVANIA AVE NW APT 906

City State Zip Code
WASHINGTON DC 20004

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

Name of Employer Occupation
CLIFF MADISON GOVERNMENT AFFAIRS PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 08 / 2016

Transaction ID : SA11AI.112294

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ROBERT L MAHER P.D

Mailing Address 207 JAMES AVE

City State Zip Code
PATTON PA 16668

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

Name of Employer Occupation
PATTON PHARMACY CONSULTANT PHARMACIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112709

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FREDERICK R. MAIESA

Mailing Address 6946 MESA DR

City State Zip Code
FT WORTH TX 76132

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

Name of Employer Occupation
BNSF VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.112059

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LORAIN M MANGINE

Mailing Address 4412 NEW CASTLE RD.

City State Zip Code
LOWELLVILLE OH 44436

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112447

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ROBERT S MARCUS

Mailing Address 67 SOUTH SIXTH STREET

City State Zip Code
INDIANA PA 15701

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

Name of Employer Occupation
MARCUS & MACK ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.112586

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ADAM M MARINO

Mailing Address 4738 LORIGAN ST

City State Zip Code
PITTSBURGH PA 15224

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

Name of Employer Occupation
CASTLE BUILDERS SUPPLY EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112446

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JAMES C. MARKER

Mailing Address 840 PIONEER RD

City State Zip Code
ROCKWOOD PA 15557

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112398

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MICHAEL MARSO

Mailing Address 1408 ROUND HILL RD

City HARRISBURG State PA Zip Code 17110

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

Name of Employer STHAL SHEAFER ENGINEERING LLC Occupation DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112217

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ROBERTO P MARTINEZ JR.

Mailing Address PO BOX 450583

City LAREDO State TX Zip Code 78045

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

Name of Employer HOWLAND ENGINEERING Occupation PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111984

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DAVID G. MATESIC

Mailing Address 3447 E. CARSON ST.

City PITTSBURGH State PA Zip Code 15203

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

Name of Employer MATCON DIAMOND Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.112587

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
DEVON E MAY

Mailing Address 317 OAK POINTE LN.

City SOUTHLAKE State TX Zip Code 76092

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

Name of Employer AMERICAN AIRLINES Occupation VICE PRESIDENT - FINANCIAL PLANNING &

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112124

Amount of Each Receipt this Period
400.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JANET L MCCLYMONDS

Mailing Address PO BOX 296

City PORTERSVILLE State PA Zip Code 16051

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112232

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GEORGE MCELWEE

Mailing Address 2547 S KENMORE CT

City ARLINGTON State VA Zip Code 22206

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

Name of Employer COMMONWEALTH STRATEGIC PARTNERS Occupation GOVERNMENT AFFAIRS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.112304

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
TIMOTHY MCGIVERN

Mailing Address 13365 R STREET NW #2

City WASHINGTON State DC Zip Code 20009

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

Name of Employer OGILVY GOVERNMENT RELATIONS Occupation LOBBYIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 06 / 2016

Transaction ID : SA11AI.112275

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MR. ROBERT M MCGOWAN JR

Mailing Address 245 TALL TIMBER DR

City JOHNSTOWN State PA Zip Code 15904

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

Name of Employer MISSION CRITICAL SOLUTIONS, LLC Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112875

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SUE E MCLAUGHLIN

Mailing Address 1306 EDGAR AVE.

City CHAMBERSBURG State PA Zip Code 17201

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.112758

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ROBERT D. MCNEIL

Mailing Address 301 FIVE POINT RD.

City State Zip Code
COATESVILLE PA 19320

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

Name of Employer Occupation
PENGUIN REAL ESTATE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112673

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PETER V MERRITTS

Mailing Address 128 ODINWOOD CT

City State Zip Code
GREENSBURG PA 15601

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

Name of Employer Occupation
CORSA COAL PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.112597

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ROSS E. MILLOY

Mailing Address PO BOX 1618

City State Zip Code
SAN MARCOS TX 78666

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

Name of Employer Occupation
GREATER AUSTIN-SAN ANTONIO CORRIDOR PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112053

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MICHAEL J MINERVA

Mailing Address 1008 INDEPENDENCE AVE. SE

City WASHINGTON State DC Zip Code 20003

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

Name of Employer AMERICAN AIRLINES Occupation VICE PRESIDENT - GOVERNMENT AFFAIRS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112000

Amount of Each Receipt this Period
750.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MLR PARTNERSHIP

Mailing Address 5506 6TH AVE REAR

City ALTOONA State PA Zip Code 16602

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.112579

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MICHAEL A FIORE

Mailing Address 2591 RESERVOIR ROAD

City HOLLIDAYSBURG State PA Zip Code 16648

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

Name of Employer FIORE BROTHERS INC Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2583.34**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.112909

Amount of Each Receipt this Period
83.34

Memo Item

PARTNERSHIP MLR PARTNERSHIP

SUBTOTAL of Receipts This Page (optional).....

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
LEONARD S FIORE JR.

Mailing Address 5506 6TH AVE. REAR

City ALTOONA State PA Zip Code 16602

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

Name of Employer LEONARD S FIORE INC. Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **83.33**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.112910

Amount of Each Receipt this Period
 83.33

Memo Item

PARTNERSHIP MLR PARTNERSHIP

B. Full Name (Last, First, Middle Initial)
RICHARD F FIORE SR.

Mailing Address 19 RUSKIN DR

City ALTOONA State PA Zip Code 16602

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

Name of Employer LEONARD S FIORE INC Occupation EXECUTIVE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **83.33**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.112911

Amount of Each Receipt this Period
 83.33

Memo Item

PARTNERSHIP MLR PARTNERSHIP

C. Full Name (Last, First, Middle Initial)
TELISSA A. MOLANO

Mailing Address 2502 IRWIN DR

City LAREDO State TX Zip Code 78045

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

Name of Employer REDLINE ARCHITECTS Occupation ARCHITECT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111987

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
GLAFIRO E. MONTEMAYOR III

Mailing Address 5610 MANN RD

City State Zip Code
LAREDO TX 78041

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

Name of Employer Occupation
GEMCO CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.111991

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SUSAN E MONTLER

Mailing Address PO BOX 688

City State Zip Code
PHILIPSBURG PA 16866

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 18 / 2016

Transaction ID : SA11AI.112465

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MATTHEW T MOROUN

Mailing Address 160 PROVENCAL

City State Zip Code
GROSSE POINTE FARM MI 48236

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

Name of Employer Occupation
CENTRA, INC. VICE CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.112174

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3950.00

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

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

FOR LINE NUMBER: PAGE 98 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MATTHEW T MOROUN

Mailing Address 160 PROVENCAL

City State Zip Code
GROSSE POINTE FARM MI 48236

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

Name of Employer Occupation
CENTRA, INC. VICE CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112176

Amount of Each Receipt this Period
 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ROLAND C MOWER

Mailing Address 233 FLORIDA ST

City State Zip Code
SAN ANTONIO TX 78210

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

Name of Employer Occupation
PORT SAN ANTONIO CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111995

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN P MURPHY

Mailing Address 1406 CRESTWOOD DR

City State Zip Code
ALEXANDRIA VA 22302

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

Name of Employer Occupation
FEDERAL HILL GROUP, LLC GOVERNMENT RELATIONS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112121

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
DENNIS E MURRAY

Mailing Address 219 STONEHEDGE RD.

City State Zip Code
HOLLIDAYSBURG PA 16648

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 31 2016

Transaction ID : SA11AI.112703

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MYSTIC BROOKE DEVELOPMENT LP

Mailing Address PO BOX 515

City State Zip Code
INDIANA PA 15701

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 14 2016

Transaction ID : SA11AI.112355

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER J EVANS

Mailing Address 5450 FERGUSON RD.

City State Zip Code
INDIANA PA 15701

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

Name of Employer Occupation
SELF EMPLOYED BRITT RESOURCES, INC.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 14 2016

Transaction ID : SA11AI.112657

Amount of Each Receipt this Period
1000.00

Memo Item

PARTNERSHIP MYSTIC BROOKE DEVELOPMENT LP

SUBTOTAL of Receipts This Page (optional).....

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
NEALON GROUP, LLC

Mailing Address 6139 PARK LANE

City State Zip Code
DALLAS TX 75225

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111970

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
THOMAS NEALON

Mailing Address 6139 PARK LANE

City State Zip Code
DALLAS TX 75225

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

Name of Employer Occupation
NEALON GROUP LLC PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112975

Amount of Each Receipt this Period
1000.00

Memo Item

PARTNERSHIP NEALON GROUP, LLC

C. Full Name (Last, First, Middle Initial)
KYLE NEVINS

Mailing Address 1325 D STREET NE

City State Zip Code
WASHINGTON DC 20002

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

Name of Employer Occupation
HARBINGER STRATEGIES LLC CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112822

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
WILLIAM K NITTERHOUSE

Mailing Address 1130 CIDER PRESS RD

City State Zip Code
CHAMBERSBURG PA 17201

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

Name of Employer Occupation
NITTERHOUSE CONCRETE PRODUCTS PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.112756

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CRAIG J NITTERHOUSE

Mailing Address 1785 FALLING SPG RD

City State Zip Code
CHAMBERSBURG PA 17201

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

Name of Employer Occupation
FRANKLIN STORAGE INC. PARTNER/OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.112745

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MR. ROGER NOBER

Mailing Address 3301 MOSS HOLLOW

City State Zip Code
FORT WORTH TX 76109

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

Name of Employer Occupation
BNSF RAILWAY EXECUTIVE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 12 / 2016

Transaction ID : SA11AI.111836

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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 P NOCELLA

Mailing Address 3837 N 59TH PL.

City State Zip Code
PHOENIX AZ 85018

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

Name of Employer Occupation
AMERICAN AIRLINES SENIOR VICE PRESIDENT - CHIEF MARKET

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112136

Amount of Each Receipt this Period
900.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WAYNE NORRIS

Mailing Address PO BOX 518

City State Zip Code
EXPORT PA 15632

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

Name of Employer Occupation
DURA BOND INDUSTRIES PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112738

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOSEPH L O'NEIL

Mailing Address 70 W. LAUER LANE

City State Zip Code
CAMP HILL PA 17011

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

Name of Employer Occupation
WBCM SENIOR VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112214

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JO-ANN OLSOVSKY

Mailing Address **2400 WESTERN CENTER**

City **FORT WORTH** State **TX** Zip Code **76131**

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

Name of Employer **BNSF RAILWAY** Occupation **VP**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112049

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PAUL D ORANGE

Mailing Address **4225 LINCOLN WAY EAST**

City **FAYETTEVILLE** State **PA** Zip Code **17222**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.112769

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DONNA E.G. PALADINI

Mailing Address **4517 S RANGER TRL.**

City **GILBERT** State **AZ** Zip Code **85297**

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

Name of Employer **AMERICAN AIRLINES** Occupation **VICE PRESIDENT - AIRPORT CUSTOMER SI**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.112129

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

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

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

FOR LINE NUMBER: PAGE 104 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LISA LAWRENCE PANARO

Mailing Address 224 BUCK RD

City EBENSBURG State PA Zip Code 15931

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

Name of Employer ROBINDALE ENERGY SERVICES Occupation EXECUTIVE VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112359

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
VITO S PANTILIONE

Mailing Address 210 MILL BRIDGE CT.

City PORT REPUBLIC State NJ Zip Code 08241

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

Name of Employer PARKE BANK Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112672

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MR. DOUG PARKER

Mailing Address 3517 LEXINGTON AVE.

City DALLAS State TX Zip Code 75205

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

Name of Employer AMERICAN AIRLINES Occupation CHAIRMAN AND CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112177

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MR. DOUG PARKER

Mailing Address 3517 LEXINGTON AVE.

City State Zip Code
DALLAS TX 75205

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

Name of Employer Occupation
AMERICAN AIRLINES CHAIRMAN AND CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.112179

Amount of Each Receipt this Period
2700.00

Memo Item
REATTRIBUTION REQUESTED

B. Full Name (Last, First, Middle Initial)
HARRY N PEFANIS

Mailing Address 4103 UNIVERSITY BLVD.

City State Zip Code
HOUSTON TX 77005

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

Name of Employer Occupation
PLAINS ALL AMERICAN PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112035

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MANUEL PELAEZ

Mailing Address 22211 INTERSTATE-10 W
#1206

City State Zip Code
SAN ANTONIO TX 78257

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2016

Transaction ID : SA11AI.111903

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
KEITH J. PEMRICK

Mailing Address 1758 U ST NW #1

City State Zip Code
WASHINGTON DC 20009

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

Name of Employer Occupation
COMMONWEALTH STRATEGIC PARTNERS PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 06 / 2016

Transaction ID : SA11AI.112278

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MARIO A. PENA

Mailing Address 919 VICTORIA STREET

City State Zip Code
LAREDO TX 78040

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

Name of Employer Occupation
HICKEY PENA ARCHITECTS PRINCIPAL

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112051

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CHARLES R PENNONI

Mailing Address 411 VALLEY GLEN DR.

City State Zip Code
BRYN MAWR PA 19010

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

Name of Employer Occupation
PENNONI & ASSOCIATES CIVIL ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112667

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
RICARDO H. PEREZ

Mailing Address 959 W VILLARET BLVD

City SAN ANTONIO State TX Zip Code 78224

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

Name of Employer SAN ANTONIO CHAMBER Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112025

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
H. R. PEROT JR.

Mailing Address PO BOX 269014

City PLANO State TX Zip Code 75026

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

Name of Employer PEROT SYSTEMS Occupation CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112023

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DAREN PETROSKI

Mailing Address 3525 CHURCH RD

City CHERRY HILL State NJ Zip Code 08002

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112680

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
KAREN E PFEFFER

Mailing Address 160 STONEHEDGE RD

City State Zip Code
HOLLIDAYSBURG PA 16648

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 09 / 2016

Transaction ID : SA11AI.112315

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KERRY F PHILIPOVITCH

Mailing Address 3601 SPRINGBROOK ST.

City State Zip Code
DALLAS TX 75205

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

Name of Employer Occupation
AMERICAN AIRLINES SENIOR VICE PRESIDENT - CUSTOMER EXI

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.112135

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JULIE A PIGGOTT

Mailing Address 703 GREYMOOR PL.

City State Zip Code
SOUTHLAKE TX 76092

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

Name of Employer Occupation
BNSF RAILWAY COMPANY VICE PRESIDENT & CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 15 / 2016

Transaction ID : SA11AI.111841

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
SANDRA PINEAU-BODDISON

Mailing Address 25W SHADOW CREEK VILLAS LOOP

City SPRING State TX Zip Code 77389

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

Name of Employer UNITED AIRLINES Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 06 / 2016

Transaction ID : SA11AI.111803

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM C POLACEK

Mailing Address 437 LEVENTRY ROAD

City JOHNSTOWN State PA Zip Code 15904

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

Name of Employer JWF INDUSTRIES Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112383

Amount of Each Receipt this Period
 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MR. JOHN J POLACEK JR

Mailing Address 221 CURTIS DRIVE

City JOHNSTOWN State PA Zip Code 15904

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.112573

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
SANDRA L POOLE

Mailing Address 720 NIXON RD N

City State Zip Code
STATE COLLEGE PA 16803

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

Name of Employer Occupation
S/A HOMES DESIGN CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112888

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CATHERINE K POORBAUGH

Mailing Address PO BOX 967

City State Zip Code
SOMERSET PA 15501

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112264

Amount of Each Receipt this Period
 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TIMOTHY M. POTTS

Mailing Address 222 S. 2ND ST.

City State Zip Code
CLEARFIELD PA 16830

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

Name of Employer Occupation
RJ CORMAN RAILROAD CO. GENERAL MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11AI.112500

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ROBERT B PRIEST

Mailing Address 562 PEWTER DR.

City State Zip Code
EXTON PA 19341

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112218

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
RICARDO RAMOS

Mailing Address 1241 WHISPER HILL

City State Zip Code
LAREDO TX 77804

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

Name of Employer Occupation
AZBA ENGINEERING PROJECT ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111982

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BALTAZAR RAMOS

Mailing Address 3302 WINSOME CT

City State Zip Code
LAREDO TX 78045

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

Name of Employer Occupation
AZAR CONSTRUCTION OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111983

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
RANCE RANDLE

Mailing Address 5604 REATTA PL

City State Zip Code
COLLEYVILLE TX 76034

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BNSF REGIONAL VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.111923

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
SCOTT W REED

Mailing Address 5822 LAKEHURST AVE.

City State Zip Code
DALLAS TX 75230

FEC ID number of contributing federal political committee.

Name of Employer Occupation
CHESAPEAKE ENTERPRISES CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112057

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
JEFFREY N REEDER

Mailing Address 10970 MCFARLAND RD

City State Zip Code
MERCERSBURG PA 17236

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UNIVERSAL PROJECTS INC BUSINESSMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112751

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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: (check only one)	PAGE 113 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ROB REILLY

Mailing Address 1712 SHERBURNE DR

City State Zip Code
KELLER TX 76262

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

Name of Employer Occupation
BNSF RAILWAY VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112041

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JOSEPH RESCHINI

Mailing Address 6333 HOWE STREET

City State Zip Code
PITTSBURGH PA 15206

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

Name of Employer Occupation
THE RESCHINI GROUP COO/INSURANCE AGENCY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112420

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FERNANDO REYES

Mailing Address 2 DAVENPORT LANE

City State Zip Code
SAN ANTONIO TX 78257

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

Name of Employer Occupation
REYES AUTOMOTIVE GROUP CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112030

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
RON RICKS

Mailing Address 7700 GREENWAY BLVD #104F

City DALLAS	State TX	Zip Code 75209
----------------	-------------	-------------------

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

Name of Employer SOUTHWEST AIR	Occupation VICE CHAIR
-----------------------------------	--------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112009

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MARY ANN H RIDDLE

Mailing Address 20375 RUPERT ISLAND PL.

City STERLING	State VA	Zip Code 20165
------------------	-------------	-------------------

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

Name of Employer BENTLEY SYSTEMS, INC.	Occupation SENIOR VICE PRESIDENT - NORTH AMERIC
---	--

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.112770

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
THOMAS A RILEY JR.

Mailing Address PO BOX 1265

City EXTON	State PA	Zip Code 19341
---------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112688

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
PHILIP L. RINALDI

Mailing Address 1097 WESTBROOK RD

City State Zip Code
BRIDGEWATER NJ 08807

FEC ID number of contributing federal political committee.

Name of Employer Occupation
PHILADELPHIA ENERGY SOLUTIONS CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112574

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
SAM RISOLI

Mailing Address 445 E. NORTH WATER ST., UNITE 703E

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UNITED AIRLINES MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.111838

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
TODD N ROADMAN

Mailing Address 121 DIEHL FIELD RD

City State Zip Code
BEDFORD PA 15522

FEC ID number of contributing federal political committee.

Name of Employer Occupation
REED WERTZ AND ROADMAN INSURANCE & FINANCIAL PLANNING

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.112384

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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: (check only one)	PAGE 116 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JOHN A ROBERTS JR.

Mailing Address 320 POND STREET

City State Zip Code
HOLLIDAYSBURG PA 16648

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

Name of Employer Occupation
ALLEGHENY ORTHOTICS/PROSTHETICS OWNER/PROSTHETIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.112581

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JACK ROCCO

Mailing Address 605 NELSON RD.

City State Zip Code
ALTOONA PA 16601

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

Name of Employer Occupation
ALTOONA HOSPITAL PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112881

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MICHAEL A ROCK

Mailing Address 1331 CASSIA ST

City State Zip Code
HERNDON VA 20170

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

Name of Employer Occupation
UNION PACIFIC CORPORATION LOBBYIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 06 / 2016

Transaction ID : SA11AI.111802

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MICHAEL A ROCK

Mailing Address 1331 CASSIA ST

City State Zip Code
HERNDON VA 20170

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

Name of Employer Occupation
UNION PACIFIC CORPORATION LOBBYIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 06 / 2016

Transaction ID : SA11AI.111804

Amount of Each Receipt this Period
700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TAMMY N ROMO

Mailing Address 3240 STANFORD AVE

City State Zip Code
DALLAS TX 75225

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

Name of Employer Occupation
SOUTHWEST AIR EXECUTIVE VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112012

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MATTHEW ROSE

Mailing Address 1110 POST OAK PLACE

City State Zip Code
WESTLAKE TX 76262

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

Name of Employer Occupation
BNSF RAILWAY EXECUTIVE CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.112046

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3700.00

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

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

FOR LINE NUMBER: PAGE 118 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EDWARD P. ROSKI JR.

Mailing Address 13191 CROSSROADS PARKWAY N
SIXTH FLOOR

City State Zip Code
CITY OF INDUSTRY CA 91746

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

Name of Employer Occupation
MRC PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.112155

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FRANK ROTNOFSKY

Mailing Address 503 GUADALUPE ST

City State Zip Code
LAREDO TX 78040

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.112157

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DIANE D ROWE

Mailing Address 707 AMBERSON AVE.

City State Zip Code
PITTSBURGH PA 15232

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

Name of Employer Occupation
SELF EMPLOYED INTERIOR DECORATOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112433

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
DANIEL W RULLO

Mailing Address 116 PEACOCK LN

City SOMERSET State PA Zip Code 15501

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

Name of Employer BARBERA, CLAPPER, BEANER, RULLLO ET / Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112382

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LINDA B. RUTHERFORD

Mailing Address 1714 PECAN GROVE

City CARROLLTON State TX Zip Code 75007

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

Name of Employer SOUTHWEST AIR Occupation VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112013

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RAYMOND A RYAN

Mailing Address 1155 SAINT AUGUSTINE RD

City DYSART State PA Zip Code 16636

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112859

Amount of Each Receipt this Period
 2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
G. BRYAN SALZMANN

Mailing Address **4 SEBASTIAN WAY**

City **CARLISLE** State **PA** Zip Code **17013**

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

Name of Employer **SALZMANN HUGHES, PC** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.112750

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ADAM R SCHELLHASE

Mailing Address **3296 MUIRFIELD DR.**

City **CHAMBERSBURG** State **PA** Zip Code **17202**

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

Name of Employer **SALZMAN HUGHES, PC** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.112747

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JAMES SCHULTZ

Mailing Address **1650 MARKET STREET**

City **PHILADELPHIA** State **PA** Zip Code **19103**

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

Name of Employer **COZEN O'CONNOR** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 06 / 2016

Transaction ID : SA11AI.112830

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MARK SCHULZE

Mailing Address 8150 STEEPLE CHASE CIRCLE

City ARGYLE State TX Zip Code 76226

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

Name of Employer BNSF RAILWAY Occupation MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : SA11AI.111835

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ARTHUR C SCHWOTZER

Mailing Address 145 ROCKINGHAM LANE

City MCMURRAY State PA Zip Code 15317

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112409

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CLYDE A SELLECK III

Mailing Address 501 CHAMBLEE BLVD.

City GREENVILLE State SC Zip Code 29615

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

Name of Employer MICHELIN NORTH AMERICA, INC. Occupation CHAIRMAN & PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : SA11AI.112297

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
AMY B SELTZER

Mailing Address 306 WARD AVE E

City State Zip Code
ALTOONA PA 16602

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

Name of Employer Occupation
SELTZER FINANCIAL STRATEGIES FINANCIAL PLANNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.112321

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BALTAZAR R SERNA JR.

Mailing Address 126 VILLITA

City State Zip Code
SAN ANTONIO TX 78205

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112015

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DAVID G SEYMOUR

Mailing Address 6230 PRESTONSHIRE LN

City State Zip Code
DALLAS TX 75225

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

Name of Employer Occupation
AMERICAN AIRLINES SENIOR VICE PRESIDENT - OPERATIONS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112123

Amount of Each Receipt this Period
750.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
NELSON J SHAFFER

Mailing Address 608 N BARFIELD DR

City MARCO ISLAND State FL Zip Code 34145

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112681

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
RANDY F SHAW

Mailing Address 2256 ROCKHILL CHURCH RD

City EVERETT State PA Zip Code 15537

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

Name of Employer EVERETT CASH MUTUTAL INSURANCE GRC Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : SA11AI.112450

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MARK R. SHAW

Mailing Address 220 DRIFTWOOD DR

City COPPELL State TX Zip Code 75019

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

Name of Employer SOUTHWEST AIR Occupation SENIOR VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112014

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

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

FOR LINE NUMBER: PAGE 124 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STANTON R SHEETZ

Mailing Address 5700 6TH AVE

City State Zip Code
ALTOONA PA 16602

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

Name of Employer Occupation
SHEETZ CORPORATION EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112782

Amount of Each Receipt this Period
 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JOSEPH S SHEETZ

Mailing Address 221 LINBROOK LN

City State Zip Code
ALTOONA PA 16601

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

Name of Employer Occupation
SHEETZ, INC. EXECUTIVE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112857

Amount of Each Receipt this Period
 2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NANCY LEA SHEETZ

Mailing Address 5700 SIXTH AVE

City State Zip Code
ALTOONA PA 16602

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112785

Amount of Each Receipt this Period
 2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
EDWARD L SHERFEY JR.

Mailing Address 506 MCPHERSON DR.

City LAREDO State TX Zip Code 78041

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

Name of Employer SHERFEY ENGINEERING CO, LLC Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112159

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CHARLES SHEWMAKE

Mailing Address 4928 WEST BRIER

City FORT WORTH State TX Zip Code 76109

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

Name of Employer BNSF RAILWAY Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112047

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CHRIS SHIELDS

Mailing Address 1005 CONGRESS STE 480

City AUSTIN State TX Zip Code 78701

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

Name of Employer CHRISTOPHER S SHIELDS PC Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112056

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
LAURENCE J. SILVI II

Mailing Address 355 NEWBOLD RD

City State Zip Code
FAIRLESSS HILLS PA 19030

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

Name of Employer Occupation
THE SILVI GROUP CO CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.112569

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TIMOTHY K SKIPWORTH

Mailing Address 6815 LORNA LN.

City State Zip Code
DALLAS TX 75214

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

Name of Employer Occupation
AMERICAN AIRLINES VICE PRESIDENT - AIRPORT AFFAIRS & FAI

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111997

Amount of Each Receipt this Period
 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BARRY F SMITH

Mailing Address 153 SMITH TRANSPORT ROAD

City State Zip Code
ROARING SPRING PA 16673

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

Name of Employer Occupation
SMITH TRANSPORT INC. PRESIDENT & OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.112311

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
F. RANDALL SMITH

Mailing Address 325 EAST 53RD STREET
NUMBER 3

City State Zip Code
NEW YORK NY 10022

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

Name of Employer Occupation
CAPITAL COUNSEL, LLC INVESTMENT ADVISOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 06 / 2016

Transaction ID : SA11AI.112901

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JUDITH G SMITH

Mailing Address 325 EAST 53RD ST.
#3

City State Zip Code
NEW YORK NY 10022

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 06 / 2016

Transaction ID : SA11AI.112900

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DANIEL P SMITH

Mailing Address 229 LYNN HAVEN DR.

City State Zip Code
PITTSBURGH PA 15228

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

Name of Employer Occupation
JAMES L. SMITH INSURANCE AGENCY, INC. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112416

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
BARBARA C. SMITH

Mailing Address 366 TYNEBRIDGE LN

City HOUSTON State TX Zip Code

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

Name of Employer BUCKEYE PARTNERS Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112327

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
RICHARD SMULOVITZ

Mailing Address 1705 BOGGS ROAD

City FOREST HILL State MD Zip Code 21050

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

Name of Employer JOHNSON, MIRMIRAN, THOMPSON INC Occupation EXECUTIVE VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112211

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MR. MARK A. SNYDER

Mailing Address PO BOX 1022

City KITTANNING State PA Zip Code 16201

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

Name of Employer SNYDER ASSOCIATED COMPANIES, INC Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112417

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
RUBEN SOTO JR.

Mailing Address 7917 MCPHERSON RD STE 203

City LAREDO	State TX	Zip Code 78045
----------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation CPA
-----------------------------------	-------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111985

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KURT STACHE

Mailing Address 6514 BROOKSHIRE DR.

City DALLAS	State TX	Zip Code 75230
----------------	-------------	-------------------

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

Name of Employer AMERICAN AIRLINES	Occupation SENIOR VICE PRESIDENT - ALLIANCES & P.
---------------------------------------	--

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.112127

Amount of Each Receipt this Period
 600.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CLAYTON J. STAHL

Mailing Address 1321 WOODBRIDGE DR.

City LATROBE	State PA	Zip Code 15650
-----------------	-------------	-------------------

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

Name of Employer GULISER CONSTRUCTION	Occupation CIVIL ENGINEER
--	------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112430

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MANUEL N. STAMATAKIS

Mailing Address 1111 W. DEKALB PIKE

City State Zip Code
WAYNE PA 19087

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

Name of Employer Occupation
CAPITAL MANAGEMENT ENTERPRISES CHAIRMAN AND CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 15 / 2016

Transaction ID : SA11AI.112466

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PETER H STEPHAICH

Mailing Address 906 AMBERSON AVE

City State Zip Code
PITTSBURGH PA 15232

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

Name of Employer Occupation
BLUE DANUBE CHAIRMAN & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112410

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JON STEVENS

Mailing Address 11813 BLUE CREEK DR

City State Zip Code
ALEDO TX 76008

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

Name of Employer Occupation
BNSF RAILWAY ACCOUNTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 12 / 2016

Transaction ID : SA11AI.111837

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4700.00

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

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

FOR LINE NUMBER: PAGE 131 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN STEWART

Mailing Address 69 DARTMOUTH AVE

City JOHNSTOWN State PA Zip Code 15905

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

Name of Employer NOT EMPLOYED Occupation NOT EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 06 / 2016

Transaction ID : SA11AI.112274

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHN M STILLEY

Mailing Address 131 BLACKTHORN DR.

City BUTLER State PA Zip Code 16002

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

Name of Employer AMERIKOHL MINING Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112228

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN STOCKER

Mailing Address PO BOX 119

City SANTA CLAUS State IN Zip Code 47579

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

Name of Employer LYNNTech Occupation SENIOR VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.112242

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
STEVE STOMBRES

Mailing Address 10092 DANIELS RUN WAY

City State Zip Code
FAIRFAX VA 22030

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

Name of Employer Occupation
HARBINGER STRATEGIES PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 31 2016

Transaction ID : SA11AI.112823

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ELIZABETH A STONER

Mailing Address 7714 RENNINGER RD

City State Zip Code
MERCERSBURG PA 17236

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 04 2016

Transaction ID : SA11AI.112763

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
KENNETH C STOVER

Mailing Address 817 NEW ST

City State Zip Code
ROARING SPRING PA 16673

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

Name of Employer Occupation
KENNETH C. STOVER INC OWNER/INSURANCE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 09 2016

Transaction ID : SA11AI.112306

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

900.00

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

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

FOR LINE NUMBER: PAGE 133 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STRADLEY RONON STEVENS & YOUNG LLP

Mailing Address 2005 MARKET STREET
SUITE 2600

City State Zip Code
PHILADELPHIA PA 19103

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112671

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WILLIAM R SASSO

Mailing Address 2005 MARKET STREET
SUITE 2600

City State Zip Code
PHILADELPHIA PA 19103

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

Name of Employer Occupation
STRADLEY RONON STEVENS & YOUNG LLP CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112976

Amount of Each Receipt this Period
2700.00

Memo Item

PARTNERSHIP STRADLEY RONON STEVENS & YOUNG LLP

C. Full Name (Last, First, Middle Initial)
RAYMOND C SULLIVAN

Mailing Address 4029 TEXAS WILDLIFE TRAIL

City State Zip Code
AUSTIN TX 78735

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

Name of Employer Occupation
SULLIVAN PUBLIC AFFAIRS OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112052

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2950.00

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

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

FOR LINE NUMBER: PAGE 134 OF 323
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL SUPINKA

Mailing Address 85 PINE CREST DR

City State Zip Code
INDIANA PA 15701

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

Name of Employer Occupation
SUPINKA & SUPINKA, PC ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112418

Amount of Each Receipt this Period
700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
VIVIAN F SUPINKA

Mailing Address 85 PINE CREST DR

City State Zip Code
INDIANA PA 15701

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112419

Amount of Each Receipt this Period
1300.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN L SWEET

Mailing Address 10 RIDGEVIEW DR.

City State Zip Code
UNIONTOWN PA 15401

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

Name of Employer Occupation
BOEING CORPORATION DIRECTOR, STRATEGIC PLANNING

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 22 / 2016

Transaction ID : SA11AI.112200

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
TRACY D TAYLOR

Mailing Address 121 WEST MAPLE STREET

City State Zip Code
ALEXANDRIA VA 22301

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

Name of Employer Occupation
WILLIAMS & JENSEN PLLC ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112737

Amount of Each Receipt this Period
 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TECENG SOLUTIONS, LLC

Mailing Address 336 E MAIN ST

City State Zip Code
UNIONTOWN PA 15401

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

Name of Employer Occupation
Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112424

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BRIAN BOYLE

Mailing Address 336 E MAIN ST

City State Zip Code
UNIONTOWN PA 15401

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

Name of Employer Occupation
TECENG SOLUTIONS, LLC PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112425

Amount of Each Receipt this Period
 1000.00

Memo Item

PARTNERSHIP TECENG SOLUTIONS, LLC

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
PHYLLIS THALER

Mailing Address 132 TWIN OAKS LN

City State Zip Code
HOLLIDAYSBURG PA 16648

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

Name of Employer Occupation
GILCOM ASSOCIATES MEDIA CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112694

Amount of Each Receipt this Period
800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BRUCE J THALER

Mailing Address 116 UNION AVE.

City State Zip Code
ALTOONA PA 16602

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

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE DEVELOPMENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112693

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RONNIE THOMPSON

Mailing Address 996 STILES RD

City State Zip Code
HOMER CITY PA 15748

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

Name of Employer Occupation
HIGHLAND DESIGN SOLUTIONS INC OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112898

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
CRAIG J TIMONEY

Mailing Address 936 JULIANA ST S

City State Zip Code
BEDFORD PA 15522

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

Name of Employer Occupation
TIMONEY MANAGEMENT INC PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112712

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BRUCE E TOLL

Mailing Address 754 S COUNTY RD

City State Zip Code
PALM BEACH FL 33480

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

Name of Employer Occupation
TOLL BROTHERS INC BUILDER/DEVELOPER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112365

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ROBERTO L TREVINO

Mailing Address 1422 WINGFOOT LOOP

City State Zip Code
LAREDO TX 78045

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

Name of Employer Occupation
SOUTHERN SANITATION PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111986

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3250.00

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

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

FOR LINE NUMBER: PAGE 138 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GUILLERMO F. TREVINO

Mailing Address 2322 MIDDLECOFF

City State Zip Code
LAREDO TX 78045

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

Name of Employer Occupation
SOUTHERN DISTRIBUTING OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111988

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MALISSA R TUTINO

Mailing Address 3031 WILMINGTON RD.

City State Zip Code
NEW CASTLE PA 16105

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112443

Amount of Each Receipt this Period
 800.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MALISSA R TUTINO

Mailing Address 3031 WILMINGTON RD.

City State Zip Code
NEW CASTLE PA 16105

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112444

Amount of Each Receipt this Period
 1900.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
SAM F. VALE

Mailing Address **PO BOX 156**

City **RIO GRANDE CITY** State **TX** Zip Code **78582**

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

Name of Employer **STARR-CAMARGO** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.111992

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JAMES W VAN BUREN

Mailing Address **155 STRATFORD CT**

City **HOLLIDAYSBURG** State **PA** Zip Code **16648**

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

Name of Employer **NEW ENTERPRISE STONE AND LIME** Occupation **CONTRACTOR/COO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112438

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JAMES W VAN BUREN

Mailing Address **155 STRATFORD CT**

City **HOLLIDAYSBURG** State **PA** Zip Code **16648**

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

Name of Employer **NEW ENTERPRISE STONE AND LIME** Occupation **CONTRACTOR/COO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : SA11AI.112580

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MICHAEL VAN DE VEN

Mailing Address 2513 BEACON CREST DR

City PLANO State TX Zip Code 75093

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

Name of Employer SOUTHWEST AIR Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112005

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JASON VAN EATON

Mailing Address 4702 WINDING WOOD CT

City COLUMBIA State MD Zip Code 26520

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

Name of Employer SOUTHWEST AIR Occupation MANAGING DIRECTOR GOVERNMENT AFF/

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112021

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN VENTURA

Mailing Address 243 LINDEN ST

City HOLLIDAYSBURG State PA Zip Code 16648

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

Name of Employer COURTESY MOTORS Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.112320

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JOHN WALKER

Mailing Address 1603 NACOGDOCHES RD.

City SAN ANTONIO State TX Zip Code 78209

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

Name of Employer STAR SHUTTLE, INC. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112054

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WILLIAM T WARD

Mailing Address 3521 SYLVAN HEIGHTS DR

City HOLLIDAYSBURG State PA Zip Code 16648

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

Name of Employer WARD TRANSPORT & LOGISTICS Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.112313

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ROBERT BRUCE WARK

Mailing Address 3080 HIGH RIDGE DR

City GRAPEVINE State TX Zip Code 76051

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

Name of Employer AMERICAN AIRLINES Occupation VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111998

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
PETER M WARLICK

Mailing Address 5107 TREMONT ST.

City	State	Zip Code
DALLAS	TX	75214

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

Name of Employer	Occupation
AMERICAN AIRLINES	VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112018

Amount of Each Receipt this Period
 _____ 350.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MR. RICHARD B WEBB

Mailing Address 315 WEST THIRD STREET

City	State	Zip Code
PITTSBURG	KS	66762

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

Name of Employer	Occupation
WATCO COMPANIES	PRESIDENT & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112032

Amount of Each Receipt this Period
 _____ 1700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
STACEY L. WEBB

Mailing Address 315 W 3RD

City	State	Zip Code
PITTSBURG	KS	66762

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

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112033

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

_____ 3050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
THOMAS T WEIR

Mailing Address 5065 E CHOLLA ST.

City State Zip Code
SCOTTSDALE AZ 85254

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

Name of Employer Occupation
AMERICAN AIRLINES VICE PRESIDENT & TREASURER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11AI.112467

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GREG WELLS

Mailing Address 1033 INDEPENDENT DR

City State Zip Code
COPPELL TX 75019

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

Name of Employer Occupation
SOUTHWEST AIR SVP OPERATIONAL PERFORMANCE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112020

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOAN WHEELER

Mailing Address 198 PINNACLE CIRCLE

City State Zip Code
SOMERSET PA 15501

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112387

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
DON WHITE

Mailing Address 25 MAIDSTONE DRIVE

City State Zip Code
INDIANA PA 15701

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

Name of Employer Occupation
COMMONWEALTH OF PA STATE SENATOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112346

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CAROLANN D. WICKS

Mailing Address 208 GREEN GIANT ROAD

City State Zip Code
TOWNSEND DE 19734

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

Name of Employer Occupation
RK&K DIRECTOR, PLANNING & TRANSPORTATIO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11AI.112209

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN WIITALA

Mailing Address 1160 CHATFIELD RD

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
UNITED AIRLINES VP TECHNICAL SERVICE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 13 / 2016

Transaction ID : SA11AI.111840

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
THOMAS WILLIAMS

Mailing Address 6205 EQUESTRIAN CT

City State Zip Code
COLLEYVILLE TX 76034

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

Name of Employer Occupation
BNSF RAILWAY MARKETING

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112042

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KURT E WILLIAMS

Mailing Address 725 CARTREF RD

City State Zip Code
ETTERS PA 17319

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.112746

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
KENNETH W WIMBERLY

Mailing Address 6921 BAXTERSHIRE DR.

City State Zip Code
DALLAS TX 75230

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

Name of Employer Occupation
AMERICAN AIRLINES CORPORATE SECRETARY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112002

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
TERRENCE L WIRGINIS

Mailing Address 101 OLD PINE LN.

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
GATEWAY CLIPPER FLEET PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112415

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ROBERT C WONDERLING

Mailing Address PO BOX 397

City State Zip Code
LEDERACH PA 19450

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

Name of Employer Occupation
GREATER PHILADELPHIA CHAMBER OF COI PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.112675

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HAROLD D. WOOD

Mailing Address 5220 PARKWOOD RD

City State Zip Code
SHELOCTA PA 15774

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112357

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
DAVID J WOODLEY

Mailing Address 122 EMERALD DR

City EBENSBURG State PA Zip Code 15931

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

Name of Employer 8144726075 Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.112861

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
V THOMAS WORRALL IV

Mailing Address 6118 WOODMONT RD

City ALEXANDRIA State VA Zip Code 22307

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

Name of Employer WHITMER & WORRALL Occupation PRINCIPAL/GOVERNMENT CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 06 / 2016

Transaction ID : SA11AI.112276

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DONALD WRIGHT

Mailing Address 46 GOVERNOR DR

City BASKING RIDGE State NJ Zip Code 7920

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

Name of Employer UNITED AIRLINES Occupation VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2016

Transaction ID : SA11AI.111843

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JEFFREY B, WRIGHT

Mailing Address 8908 BROOK HILL LN

City State Zip Code
FT WORTH TX 76244

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

Name of Employer Occupation
BNSF RAILWAY VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.112043

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PAUL YAROSSO

Mailing Address 71 WILD PASTURE RD.

City State Zip Code
KENSINGTON NH 03833

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

Name of Employer Occupation
HNTB ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.112742

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CLARA M YODER

Mailing Address 228 EMERT RD

City State Zip Code
SOMERSET PA 15501

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.112403

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ROBERT YOUNG

Mailing Address 271 POND STREET

City State Zip Code
HOLLIDAYSBURG PA 16648

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

Name of Employer Occupation
SAINT FRANCIS UNIVERSITY HIGHER EDUCATION ADMINISTRATOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.112312

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DAVID S. ZACHRY

Mailing Address PO BOX 33240

City State Zip Code
SAN ANTONIO TX 78265

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

Name of Employer Occupation
ZACHRY CORPORATION CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.111996

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ROBERT B ZEIGLER

Mailing Address 13153 DUNNINGS HWY

City State Zip Code
CLAYSBURG PA 16625

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

Name of Employer Occupation
ZEIGLER CHEVROLET DR. OF TRANSPORTATION

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : SA11AI.112463

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JOAN ZILNER

Mailing Address 2254 LAZOR ST

City State Zip Code
INDIANA PA 15701

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

Name of Employer Occupation
DIAMOND DRUGS PHARMACIST/OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112364

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MARK J ZILNER

Mailing Address 531 EDGEWOOD AVE.

City State Zip Code
INDIANA PA 15701

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

Name of Employer Occupation
DIAMOND PHARMACY SERVICES PHARMACIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112344

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LEROY S ZIMMERMAN

Mailing Address PO BOX 789

City State Zip Code
HARRISBURG PA 17108

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

Name of Employer Occupation
ECKERT SEAMANS ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11AI.112426

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1000.00

371700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ABX AIR INC PAC

Mailing Address 145 HUNTER DRIVE

City State Zip Code
WILMINGTON OH 45177

FEC ID number of contributing federal political committee. **C C00238311**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11C.111968

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ADAMS OUTDOOR ADVERTISING INC PAC AKA: ADAMSPAC

Mailing Address 500 COLONIAL CENTER PARKWAY
SUITE 120

City State Zip Code
ROSWELL GA 30076

FEC ID number of contributing federal political committee. **C C00413930**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112372

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AES CORPORATION POLITICAL ACTION COMMITTEE; THE

Mailing Address 4300 WILSON BOULEVARD 11TH FLOOR

City State Zip Code
ARLINGTON VA 22203

FEC ID number of contributing federal political committee. **C C00507962**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11C.112185

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
AES CORPORATION POLITICAL ACTION COMMITTEE; THE

Mailing Address 4300 WILSON BOULEVARD 11TH FLOOR

City	State	Zip Code
ARLINGTON	VA	22203

FEC ID number of contributing federal political committee. **C** C00507962

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.112238

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AES CORPORATION POLITICAL ACTION COMMITTEE; THE

Mailing Address 4300 WILSON BOULEVARD 11TH FLOOR

City	State	Zip Code
ARLINGTON	VA	22203

FEC ID number of contributing federal political committee. **C** C00507962

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : SA11C.112285

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AES CORPORATION POLITICAL ACTION COMMITTEE; THE

Mailing Address 4300 WILSON BOULEVARD 11TH FLOOR

City	State	Zip Code
ARLINGTON	VA	22203

FEC ID number of contributing federal political committee. **C** C00507962

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 8000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11C.112723

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

_____ 3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
AIRCRAFT OWNERS PILOTS ASSOCIATION PAC

Mailing Address 421 AVIATION WAY

City State Zip Code
FREDERICK MD 21701

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112811

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AKIN GUMP STRAUSS HAUER & FELD LLP CIVIC ACTION COMMITTEE

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00104901

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112805

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AKIN GUMP STRAUSS HAUER & FELD LLP CIVIC ACTION COMMITTEE

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00104901

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112806

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ALLIANT TECHSYSTEMS INC. EMPLOYEE CITIZENSHIP FUND

Mailing Address 1300 WILSON BLVD
SUITE 400

City ROSSLYN State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00250209

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11C.112814

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN AIRLINES PAC

Mailing Address 1101 17TH ST NW NO 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00107300

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11C.111962

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN CONCRETE PAVEMENT ASSOC PAC

Mailing Address 9450 W BRYN MAWR AVE.
STE. 150

City ROSEMONT State IL Zip Code 60018

FEC ID number of contributing federal political committee. **C** C00322727

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11C.112368

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
AMERICAN COUNCIL OF ENGINEERING PAC

Mailing Address 1015 15TH ST NW SUITE 802

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112373

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN ELECTRIC POWER

Mailing Address 801 PENNSYLVANIA AVENUE NW SUITE 320

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00096842

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112787

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN GAS ASSOCIATION PAC

Mailing Address 400 N CAPITOL ST NW STE 450

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.112248

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
AMERICAN HOSPITAL ASSOCIATION

Mailing Address 325 7TH ST NW
LIBERTY PLACE SUITE 700

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11C.112342

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN INSTITUTE OF STEEL CONSTRUCTION PAC

Mailing Address ONE EAST WACKER DRIVE SUITE 700

City CHICAGO State IL Zip Code 60601

FEC ID number of contributing federal political committee. **C C00542308**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11C.112796

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN IRON AND STEEL INSTITUTE POLITICAL ACTION COMMITTEE (STEEL PAC)

Mailing Address 1140 CONNECTICUT AVENUE, NW
SUITE 705

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00295097**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 08 / 2016

Transaction ID : SA11C.112290

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5000.00

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

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

FOR LINE NUMBER: PAGE 157 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN MEDICAL ASSOCIATION PAC

Mailing Address 25 MASSACHUSETTS AVE NW
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11C.112894

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1505 PRINCE STREET
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11C.112800

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN SHIPPING AND LOGISTICS GROUP FREEDOM PAC/ASL FREEDOM PAC

Mailing Address 1 MAYNARD DRIVE

City PARK RIDGE State NJ Zip Code 07656

FEC ID number of contributing federal political committee. **C** C00432963

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11C.112795

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ANALYTICAL GRAPHICS INC PAC (AGI PAC)

Mailing Address 220 VALLEY CREEK BLVD.

City EXTON State PA Zip Code 19341

FEC ID number of contributing federal political committee. **C C00370023**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11C.112665

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ARCELORMITTAL USA LLC GOOD GOVERNMENT COMMITTEE

Mailing Address 1808 EYE STREET NW
5TH FLOOR

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00104109**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11C.112475

Amount of Each Receipt this Period
 2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ARCH COAL INC. PAC

Mailing Address CITYPLACE ONE

City ST. LOUIS State MO Zip Code 63141

FEC ID number of contributing federal political committee. **C C00167668**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11C.112734

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ASPLUNDH TREE EXPERT CO POLITICAL ACTION COMMITTEE (ATE PAC)

Mailing Address **BLAIR MILL ROAD**

City **WILLOW GROVE** State **PA** Zip Code **19090**

FEC ID number of contributing federal political committee. **C C00177741**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11C.112736

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ASSOCIATED GENERAL CONTRACTORS PAC (AGC PAC)

Mailing Address **2300 WILSON BLVD, SUITE 400**

City **ARLINGTON** State **VA** Zip Code **22201**

FEC ID number of contributing federal political committee. **C C00082917**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **9000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11C.112776

Amount of Each Receipt this Period
4000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)

Mailing Address **11921 FREEDOM DRIVE
SUITE 1100**

City **RESTON** State **VA** Zip Code **20190**

FEC ID number of contributing federal political committee. **C C00447565**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 21 / 2016

Transaction ID : SA11C.112482

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
ASSOCIATION OF AMERICAN RAILROADS

Mailing Address 425 THIRD STREET SW
SUITE 1000

City WASHINGTON State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C C00280743**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : SA11C.112202

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ASSOCIATION OF OIL PIPE LINES PAC

Mailing Address 1808 EYE STREET NW
SUITE 300

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00486779**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5112.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11C.112726

Amount of Each Receipt this Period
2412.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BAE SYSTEMS USA PAC

Mailing Address 1300 17TH ST N
SUITE 1400

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00281212**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112810

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4412.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
BAKER, DONELSON, BEARMAN, CALDWELL & BERKOWITZ, PC PAC

Mailing Address 901 K ST. NW
City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00431072**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **6000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 08 / 2016

Transaction ID : SA11C.112283

Amount of Each Receipt this Period
1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
BAKER, DONELSON, BEARMAN, CALDWELL & BERKOWITZ, PC PAC

Mailing Address 901 K ST. NW
City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00431072**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **6000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 08 / 2016

Transaction ID : SA11C.112284

Amount of Each Receipt this Period
1500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
BENTLEY SYSTEMS, INCORPORATED FEDERAL PAC

Mailing Address 685 STOCKTON DRIVE
City EXTON State PA Zip Code 19341

FEC ID number of contributing federal political committee. **C C00408138**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SA11C.112663

Amount of Each Receipt this Period
5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **7500.00**

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 162 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BNSF RAILPAC

Mailing Address 500 NEW JERSEY AVE NW
SUITE 550

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00235739**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11C.112191

Amount of Each Receipt this Period
 3000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BOSTON SCIENTIFIC CORPORATION POLITICAL ACTION COMMITTEE ('BSC PAC')

Mailing Address ONE BOSTON SCIENTIFIC PLACE

City NATICK State MA Zip Code 01760

FEC ID number of contributing federal political committee. **C C00357863**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11C.112725

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BRACEWELL & PATTERSON

Mailing Address 2000 K ST NW SUITE 500

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00021295**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.112243

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
BRIDGEPOINT EDUCATION INC. PAC

Mailing Address 13500 EVENING CREEK DR. NORTH
SUITE 600

City State Zip Code
SAN DIEGO CA 92128

FEC ID number of contributing federal political committee. **C C00478404**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11C.112207

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BUCHANAN INGERSOLL & ROONEY PAC

Mailing Address 1 OXFORD CENTER 20TH FLOOR
301 GRANT STREET

City State Zip Code
PITTSBURGH PA 15219

FEC ID number of contributing federal political committee. **C C00195388**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112367

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BUILD PAC

Mailing Address 1201 15TH ST NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C00000901**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11C.112189

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
CALGON CARBON CORPORATION PAC INC DBA CCC PAC OR CALGON CARBON PAC

Mailing Address 400 CALGON CARBON DRIVE

City State Zip Code
PITTSBURGH PA 15205

FEC ID number of contributing federal political committee. **C** C00543876

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112371

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CH2M HILL COMPANIES LTD PAC

Mailing Address 9191 S JAMAICA STREET

City State Zip Code
ENGLEWOOD CO 80112

FEC ID number of contributing federal political committee. **C** C00143305

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11C.112829

Amount of Each Receipt this Period
 1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CHEVRON EMPLOYEES PAC

Mailing Address PO BOX 6016

City State Zip Code
SAN RAMON CA 94583

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.112244

Amount of Each Receipt this Period
 2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5000.00

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

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

FOR LINE NUMBER: PAGE 165 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CITIZENS FOR RUDDOCK COMMITTEE

Mailing Address 465 EDGEWOOD AVENUE

City State Zip Code
INDIANA PA 15701

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112345

Amount of Each Receipt this Period
500.00

Memo Item
PERMISSIBLE FUNDS

B. Full Name (Last, First, Middle Initial)
CLEAR CHANNEL COMMUNICATIONS INC. PAC

Mailing Address 200 E. BASSE ROAD

City State Zip Code
SAN ANTONIO TX 78209

FEC ID number of contributing federal political committee. **C** C00279216

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112376

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CLEAR CHANNEL COMMUNICATIONS INC. PAC

Mailing Address 200 E. BASSE ROAD

City State Zip Code
SAN ANTONIO TX 78209

FEC ID number of contributing federal political committee. **C** C00279216

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11C.112473

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4000.00

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

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

FOR LINE NUMBER: PAGE 166 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
COMCAST CORPORATION PAC

Mailing Address **ONE COMCAST CENTER**
1701 JFK BOULEVARD

City **PHILADELPHIA** State **PA** Zip Code **19103**

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **6500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11C.112813

Amount of Each Receipt this Period
 Memo Item
1500.00

B. Full Name (Last, First, Middle Initial)
COMMITTEE ON PIPE AND TUBE IMPORTS FEDERAL PAC

Mailing Address **900 SEVENTH STREET NW SUITE 500**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00436485**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11C.112791

Amount of Each Receipt this Period
 Memo Item
500.00

C. Full Name (Last, First, Middle Initial)
CONSOL ENERGY INC PAC

Mailing Address **1000 CONSOL ENERGY DR**

City **CANONSBURG** State **PA** Zip Code **15317**

FEC ID number of contributing federal political committee. **C C00279331**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : SA11C.112570

Amount of Each Receipt this Period
 Memo Item
5000.00

SUBTOTAL of Receipts This Page (optional).....

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

7000.00

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

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

FOR LINE NUMBER: PAGE 167 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CONSTRUCTORS ASSOC OF WESTERN PA

Mailing Address 1201 BANKSVILLE RD

City State Zip Code
PITTSBURGH PA 15216

FEC ID number of contributing federal political committee. **C C00341016**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112378

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CROWLEY MARITIME CORPORATION FEDERAL PAC

Mailing Address 9487 REGENCY SQUARE BLVD.

City State Zip Code
JACKSONVILLE FL 32225

FEC ID number of contributing federal political committee. **C C00147231**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11C.112731

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CROWLEY MARITIME CORPORATION FEDERAL PAC

Mailing Address 9487 REGENCY SQUARE BLVD.

City State Zip Code
JACKSONVILLE FL 32225

FEC ID number of contributing federal political committee. **C C00147231**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11C.112732

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
CRUISE LINES INTERNATIONAL ASSOC PAC

Mailing Address 2111 WILSON BLVD
8TH FLOOR

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00432393

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112334

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CRUISE LINES INTERNATIONAL ASSOC PAC

Mailing Address 2111 WILSON BLVD
8TH FLOOR

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00432393

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112335

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CSX CORP GOOD GOVT FUND

Mailing Address 1331 PENNSYLVANIA AVE NW
SUITE 560 NATIONAL PLACE

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11C.112064

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
CUMMINS INC. POLITICAL ACTION COMMITTEE (CIPAC)

Mailing Address 601 PENNSYLVANIA AVENUE, NW
NORTH BUILDING, SUITE 625

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00377952

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112788

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
D.R.I.V.E. - DEMOCRAT, REPUBLICAN, INDEPENDENT VOTER EDUCATION PAC

Mailing Address 25 LOUISIANA AVE., NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112789

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DAY & ZIMMERMAN INC FEDERAL

Mailing Address 1655 FORT MYER DR N
SUITE 520

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00341271

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11C.112774

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
DTE ENERGY

Mailing Address 2000 2ND AVE

City State Zip Code
DETROIT MI 48226

FEC ID number of contributing federal political committee. **C C00081547**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.112249

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DUANE MORRIS LLP GOVERNMENT COMMITTEE

Mailing Address 30 17TH ST S

City State Zip Code
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C C00364133**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112374

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DUANE MORRIS LLP GOVERNMENT COMMITTEE

Mailing Address 30 17TH ST S

City State Zip Code
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C C00364133**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11C.112664

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
DYNCORP INTERNATIONAL PAC

Mailing Address 3190 FAIRVIEW PARK DRIVE
SUITE 700

City State Zip Code
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C C00409979**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11C.112786

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ENTERPRISE HOLDINGS INC. PAC

Mailing Address 600 CORPORATE PARK DR

City State Zip Code
SAINT LOUIS MO 63105

FEC ID number of contributing federal political committee. **C C00219642**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11C.112192

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ENTERPRISE PRODUCTS PARTNERS L.P. POLITICAL ACTION COMMITTEE

Mailing Address 1100 LOUISIANA STREET

City State Zip Code
HOUSTON TX 77002

FEC ID number of contributing federal political committee. **C C00496752**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11C.112068

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5000.00

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

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

FOR LINE NUMBER: PAGE 172 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ERDMAN, ANTHONY AND ASSOCIATES, INC. PAC

Mailing Address **ONE STERLING PLACE**

City **MECHANICSBURG** State **PA** Zip Code **17050**

FEC ID number of contributing federal political committee. **C C00333542**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11C.112766

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
EXELON CORPORATION PAC

Mailing Address **101 CONSTITUTION AVENUE, NW
SUITE 400 EAST**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00141218**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 21 / 2016

Transaction ID : SA11C.112472

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
EXXON MOBIL CORPORATION PAC

Mailing Address **5959 LAS COLINAS BLVD**

City **IRVING** State **TX** Zip Code **75039**

FEC ID number of contributing federal political committee. **C C00121368**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **6000.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11C.112239

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
FAEGREBD PAC

Mailing Address 300 N. MERIDIAN STREET
SUITE 2700

City INDIANAPOLIS State IN Zip Code 46204

FEC ID number of contributing federal political committee. **C C00386904**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : SA11C.112286

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FAEGREBD PAC

Mailing Address 300 N. MERIDIAN STREET
SUITE 2700

City INDIANAPOLIS State IN Zip Code 46204

FEC ID number of contributing federal political committee. **C C00386904**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11C.112480

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FARM CREDIT COUNCIL

Mailing Address 50 F ST NW SUITE 900

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00193631**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11C.112193

Amount of Each Receipt this Period
 1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3500.00

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

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

FOR LINE NUMBER: PAGE 174 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FEDERAL EXPRESS PAC

Mailing Address 942 SHADY GROVE RD S

City MEMPHIS State TN Zip Code 38120

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112797

Amount of Each Receipt this Period
 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FINANCIAL SERVICES POLITICAL

Mailing Address ATTN: J CHRISTOPHER DONAHUE
1001 LIBERTY AVENUE

City PITTSBURGH State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C** C00162735

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11C.112773

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FIRST COMMONWEALTH FINANCIAL CORP PAC

Mailing Address 22 6TH ST N
PO BOX 400

City INDIANA State PA Zip Code 15701

FEC ID number of contributing federal political committee. **C** C00348185

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112362

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
FRIENDS AND NEIGHBORS OR BRUCE ERB

Mailing Address 109 ARG COURT

City State Zip Code
DUNCANSVILLE PA 16642

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11C.112700

Amount of Each Receipt this Period
200.00

Memo Item
PERMISSIBLE FUNDS

B. Full Name (Last, First, Middle Initial)
FRIENDS OF SENATOR JUBELIRER

Mailing Address 12 SHERATON DR

City State Zip Code
ALTOONA PA 16601

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11C.112710

Amount of Each Receipt this Period
200.00

Memo Item
PERMISSIBLE FUNDS

C. Full Name (Last, First, Middle Initial)
GANNETT FLEMING INC. PAC

Mailing Address PO BOX 67100

City State Zip Code
HARRISBURG PA 17106

FEC ID number of contributing federal political committee. **C** C00141382

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.112227

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2400.00

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

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

FOR LINE NUMBER: PAGE 176 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GANNETT FLEMING INC. PAC

Mailing Address **PO BOX 67100**

City **HARRISBURG** State **PA** Zip Code **17106**

FEC ID number of contributing federal political committee. **C C00141382**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11C.112230

Amount of Each Receipt this Period
 Memo Item
500.00

B. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY PAC

Mailing Address **1299 PENNSYLVANIA AVE NW
SUITE 900**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11C.112197

Amount of Each Receipt this Period
 Memo Item
1000.00

C. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY PAC

Mailing Address **1299 PENNSYLVANIA AVE NW
SUITE 900**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11C.112333

Amount of Each Receipt this Period
 Memo Item
1000.00

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
GENERAL ELECTRIC COMPANY PAC

Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 900

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112337

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GENERAL MOTORS CORPORATION PAC

Mailing Address 25 MASSACHUSETTS AVE NW STE 400

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00076810**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.112240

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GENERAL MOTORS CORPORATION PAC

Mailing Address 25 MASSACHUSETTS AVE NW STE 400

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00076810**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112339

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HIGHMARK HEALTH PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 29 / 2016	
Mailing Address 1800 CENTER ST		Transaction ID : SA11C.112251	
City CAMP HILL	State PA	Zip Code 17089	
FEC ID number of contributing federal political committee. C C00302844		Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation		<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. HNTB HOLDINGS LTD PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 04 / 2016	
Mailing Address 715 KIRK DR		Transaction ID : SA11C.111963	
City KANSAS CITY	State MO	Zip Code 64105	
FEC ID number of contributing federal political committee. C C00386029		Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation		<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 8000.00	

Full Name (Last, First, Middle Initial) C. HNTB HOLDINGS LTD PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 29 / 2016	
Mailing Address 715 KIRK DR		Transaction ID : SA11C.112237	
City KANSAS CITY	State MO	Zip Code 64105	
FEC ID number of contributing federal political committee. C C00386029		Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation		<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 9000.00	

SUBTOTAL of Receipts This Page (optional).....	3000.00
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: (check only one)	PAGE 179 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
HNTB HOLDINGS LTD PAC

Mailing Address 715 KIRK DR

City KANSAS CITY State MO Zip Code 64105

FEC ID number of contributing federal political committee. **C** C00386029

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112790

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HOOSIERS FOR ROKITA, INC.

Mailing Address 5802 OAK AVENUE

City INDIANAPOLIS State IN Zip Code 46219

FEC ID number of contributing federal political committee. **C** C00476192

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112817

Amount of Each Receipt this Period
 _____ 2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HUNTINGTON BANCSHARES INC PAC

Mailing Address 41 SOUTH HIGH STREET

City COLUMBUS State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C** C00165589

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112366

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

_____ 4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
HUNTINGTON INGALLS INDUSTRIES POLITICAL ACTION COMMITTEE (SHIPPAC)

Mailing Address 300 M STREET S.E.
SUITE 350

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00325092**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112799

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
INDEPENDENCE BLUE CROSS PAC (IBC PAC)

Mailing Address 1901 MARKET STREET

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C C00450056**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11C.112775

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA PAC

Mailing Address 412 FIRST STREET, SE, SUITE 300

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00022343**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11C.112474

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 181 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA PAC

Mailing Address 412 FIRST STREET, SE, SUITE 300

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11C.112479

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
INSTITUTE OF MAKERS OF EXPLOSIVES PAC

Mailing Address 1120 19TH ST NW
SUITE 310

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00135590

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2016

Transaction ID : SA11C.112903

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

Mailing Address 1448 DUKE STREET

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00144154

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : SA11C.112282

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial)
INTERNATIONAL BANK OF COMMERCE COMMITTEE FOR IMPROVEMENT AND BETTERMENT OF THE COUNTRY

A. Mailing Address 1200 SAN BERNARDO

City State Zip Code
LAREDO TX 78040

FEC ID number of contributing federal political committee. **C** C00276592

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11C.111969

Amount of Each Receipt this Period
 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE (IP-PAC)

B. Mailing Address 1101 PENNSYLVANIA AVENUE NW
SUITE 200

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00034405

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11C.112733

Amount of Each Receipt this Period
 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
JACKIE PAC

C. Mailing Address PO BOX 26141

City State Zip Code
ALEXANDRIA VA 22313

FEC ID number of contributing federal political committee. **C** C00582726

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11C.112071

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JAMES T. YODER FOR COMMISSIONER

Mailing Address 228 EMERT RD

City SOMERSET State PA Zip Code 15501

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112401

Amount of Each Receipt this Period
 250.00

Memo Item
PERMISSIBLE FUNDS

B. Full Name (Last, First, Middle Initial)
JEFF PAC

Mailing Address 2150 RIVER PLAZA DR. #150

City SACRAMENTO State CA Zip Code 95833

FEC ID number of contributing federal political committee. **C** C00489112

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112812

Amount of Each Receipt this Period
 5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JM FAMILY ENTERPRISES INC PAC

Mailing Address 111 JIM MORAN BLVD

City DEERFIELD BEACH State FL Zip Code 33442

FEC ID number of contributing federal political committee. **C** C00240911

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11C.112073

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

6250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
KANSAS CITY SOUTHERN EMPLOYEE PAC

Mailing Address 427 W 12TH STREET

City State Zip Code
KANSAS CITY MO 64105

FEC ID number of contributing federal political committee. **C** C00139451

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11C.112072

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KELLEY DRYE & WARREN POLITICAL ACTION COMMITTEE

Mailing Address 3050 K STREET NW SUITE 400

City State Zip Code
WASHINGTON DC 20007

FEC ID number of contributing federal political committee. **C** C00301929

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11C.112819

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
KEVIN MCCARTHY FOR CONGRESS

Mailing Address PO BOX 12667

City State Zip Code
BAKERSFIELD CA 93389

FEC ID number of contributing federal political committee. **C** C00420935

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11C.112065

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
KEVIN MCCARTHY FOR CONGRESS

Mailing Address PO BOX 12667

City State Zip Code
BAKERSFIELD CA 93389

FEC ID number of contributing federal political committee. **C** C00420935

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11C.112069

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KEYSTONE ALLIANCE PAC

Mailing Address 426 MAIN ST SECOND FLOOR

City State Zip Code
HARLEYSVILLE PA 19438

FEC ID number of contributing federal political committee. **C** C00432096

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11C.112661

Amount of Each Receipt this Period
4000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
KEYSTONE ALLIANCE PAC

Mailing Address 426 MAIN ST SECOND FLOOR

City State Zip Code
HARLEYSVILLE PA 19438

FEC ID number of contributing federal political committee. **C** C00432096

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11C.112772

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

11000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
KOCH PAC

Mailing Address 655 15TH ST NW
SUITE 445

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112808

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
L-3 COMMUNICATIONS CORPORATION PAC

Mailing Address 600 THIRD AVENUE

City NEW YORK State NY Zip Code 10016

FEC ID number of contributing federal political committee. **C C00338087**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11C.112195

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
L-3 COMMUNICATIONS CORPORATION PAC

Mailing Address 600 THIRD AVENUE

City NEW YORK State NY Zip Code 10016

FEC ID number of contributing federal political committee. **C C00338087**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : SA11C.112205

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4500.00

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

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

FOR LINE NUMBER: PAGE 187 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LAHOOD FOR CONGRESS

Mailing Address P.O. BOX 10735

City State Zip Code
PEORIA IL 61612

FEC ID number of contributing federal political committee. **C C00575050**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11C.112779

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address PO BOX 66338

City State Zip Code
BATON ROUGE LA 70896

FEC ID number of contributing federal political committee. **C C00174599**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.112254

Amount of Each Receipt this Period
 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LEO A DALY COMPANY PAC

Mailing Address 8600 INDIAN HILLS DRIVE

City State Zip Code
OMAHA NE 68114

FEC ID number of contributing federal political committee. **C C00402727**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11C.111967

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
LOCKHEED MARTIN EPAC

Mailing Address 2121 CRYSTAL DRIVE - SUITE 100

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11C.112729

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EPAC

Mailing Address 2121 CRYSTAL DRIVE - SUITE 100

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11C.112730

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MAGELLAN MIDSTREAM HOLDINGS GP, LLC POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 22186

City TULSA State OK Zip Code 74121

FEC ID number of contributing federal political committee. **C** C00397711

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11C.111964

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MAJORITY COMMITTEE PAC--MC PAC

Mailing Address P.O. BOX 10134

City BAKERSFIELD State CA Zip Code 93389

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11C.112066

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC--MC PAC

Mailing Address P.O. BOX 10134

City BAKERSFIELD State CA Zip Code 93389

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11C.112070

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MARATHON OIL CO PAC

Mailing Address 5555 SAN FELIPE ST., STE. 4148

City HOUSTON State TX Zip Code 77056

FEC ID number of contributing federal political committee. **C** C00040568

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11C.112196

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

11500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 190 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MARATHON PETROLEUM CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE (MPAC)

Mailing Address 539 S MAIN ST.

City FINDLAY State OH Zip Code 45840

FEC ID number of contributing federal political committee. **C** C00496307

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11C.112571

Amount of Each Receipt this Period
 5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MICHAEL BAKER CORPORATION PAC

Mailing Address 100 AIRSIDE DR

City MOON TOWNSHIP State PA Zip Code 15108

FEC ID number of contributing federal political committee. **C** C00403477

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112369

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MORE CONSERVATIVES PAC (MCPAC)

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00540187

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.112247

Amount of Each Receipt this Period
 5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

11000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MORPAC)

Mailing Address 1919 M STREET, NW
5TH FLOOR

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00004812**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.112246

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NACD RESPONSIBLE DISTRIBUTION PAC

Mailing Address 1560 WILSON BLVD
SUITE 1100

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00379180**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11C.112724

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL ASPHALT PAVEMENT ASSOCIATION PAC (NAPA-PAC)

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 600 WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00444539**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112375

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4000.00

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

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

FOR LINE NUMBER: PAGE 192 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. NATIONAL ASPHALT PAVEMENT ASSOCIATION PAC (NAPA-PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 CONSTITUTION AVENUE NW
 SUITE 600 WEST
 City WASHINGTON State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C C00444539**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016
Transaction ID : SA11C.112809
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. NATIONAL BEER WHOLESALERS ASSOCIATION PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 KING ST SUITE 600
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C C00144766**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016
Transaction ID : SA11C.112198
 Amount of Each Receipt this Period
 2500.00
 Memo Item

C. NATIONAL BUSINESS AVIATION ASSOCIATION INC PAC (NBAA-PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 EIGHTEENTH ST NW SUITE 400
 City WASHINGTON State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C C00319723**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016
Transaction ID : SA11C.112187
 Amount of Each Receipt this Period
 2500.00
 Memo Item

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
NATIONAL CUSTOMS BROKERS AND FORWARDERS ASSOCIATION OF AMERICA PAC

Mailing Address 1800 18TH STREET NW #901

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00435206

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11C.112477

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL GRAIN & FEED ASSOC. PAC

Mailing Address 1250 EYE STREET SUITE 1003

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00240226

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11C.111965

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL INDEPENDENT AUTOMOBILE DEALERS ASSOCIATION PAC FUND

Mailing Address 2521 BROWN BLVD

City ARLINGTON State TX Zip Code 76006

FEC ID number of contributing federal political committee. **C** C00507699

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.112236

Amount of Each Receipt this Period
 2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4500.00

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

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

FOR LINE NUMBER: PAGE 194 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONWIDE MUTUAL INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address ONE NATIONWIDE PLAZA
1-32-301

City State Zip Code
COLUMBUS OH 43215

FEC ID number of contributing federal political committee. **C** C00076174

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11C.112340

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONWIDE MUTUAL INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address ONE NATIONWIDE PLAZA
1-32-301

City State Zip Code
COLUMBUS OH 43215

FEC ID number of contributing federal political committee. **C** C00076174

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11C.112341

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NISOURCE INC. PAC

Mailing Address 200 CIVIC CENTER DR

City State Zip Code
COLUMBUS OH 43215

FEC ID number of contributing federal political committee. **C** C00051979

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 08 / 2016

Transaction ID : SA11C.112288

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
NISOURCE INC. PAC

Mailing Address 200 CIVIC CENTER DR

City State Zip Code
COLUMBUS OH 43215

FEC ID number of contributing federal political committee. **C** C00051979

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : SA11C.112289

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 444 NORTH CAPITOL ST NW
SUITE 645

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00245548

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11C.112828

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NORFOLK SOUTHERN CORP GOOD GOVT FUND

Mailing Address THREE COMMERCIAL PL

City State Zip Code
NORFOLK VA 23510

FEC ID number of contributing federal political committee. **C** C00009282

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11C.112190

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

8000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
NUCOR CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1915 REXFORD ROAD

City State Zip Code
CHARLOTTE NC 28211

FEC ID number of contributing federal political committee. **C C00379628**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112816

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NUSTARPAC

Mailing Address 2330 NORTH LOOP WEST 1604

City State Zip Code
SAN ANTONIO TX 78248

FEC ID number of contributing federal political committee. **C C00435321**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11C.112186

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
OLD CASTLE MATERIALS INC. PAC

Mailing Address 101 CONSTITUTION AVE NW
SUITE 600W

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00346353**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.112234

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
OLD CASTLE MATERIALS INC. PAC

Mailing Address 101 CONSTITUTION AVE NW
SUITE 600W

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00346353**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 06 / 2016

Transaction ID : SA11C.112905

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
OUTDOOR ADVERTISING ASSOC OF AMERICA PAC

Mailing Address 1850 M ST NW
SUITE 1040

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00045781**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4900.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11C.112260

Amount of Each Receipt this Period
2400.00

Memo Item

C. Full Name (Last, First, Middle Initial)
OUTFRONT MEDIA INC PAC

Mailing Address 2350 KERNER BLVD STE. 250

City SAN RAFAEL State CA Zip Code 94901

FEC ID number of contributing federal political committee. **C C00571414**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11C.112377

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. OWNER OPERATOR INDEPENDENT DRIVERS

Full Name (Last, First, Middle Initial)
OWNER OPERATOR INDEPENDENT DRIVERS

Mailing Address 122 C ST NW
SUITE 520

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00236778**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112793

Amount of Each Receipt this Period
2500.00

Memo Item

B. PARSONS CORPORATION PAC

Full Name (Last, First, Middle Initial)
PARSONS CORPORATION PAC

Mailing Address 100 M STREET SE
SUITE 1200

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00103549**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11C.112727

Amount of Each Receipt this Period
2500.00

Memo Item

C. PENNSYLVANIA HOMECARE ASSOCIATION HOMEPAC

Full Name (Last, First, Middle Initial)
PENNSYLVANIA HOMECARE ASSOCIATION HOMEPAC

Mailing Address 600 N 12TH STREET
SUITE 200

City LEMOYNE State PA Zip Code 17043

FEC ID number of contributing federal political committee. **C C00602524**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112380

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
PETROLEUM MARKETERS ASSOC OF AMERICA'S PAC

Mailing Address 1901 N. FORT MYER DRIVE
SUITE 500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00035204**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.112235

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PG&E CORPORATION EMPLOYEES ENERGY PAC

Mailing Address 77 BEALE STREET
PO BOX 770000 B29H

City SAN FRANCISCO State CA Zip Code 94177

FEC ID number of contributing federal political committee. **C C00177469**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11C.112471

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PHILLIPS 66 PAC

Mailing Address 670 ADAMS BUILDING
411 SOUTH KEELER AVENUE

City BARTLESVILLE State OK Zip Code 74003

FEC ID number of contributing federal political committee. **C C00513549**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112802

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
POWER PAC OF EDISON ELECTRIC INSTITUTE

Mailing Address 701 PENNSYLVANIA AVE NW

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C C00095869**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112338

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PPG BETTER GOVERNMENT TEAM

Mailing Address ONE PPG PLACE

City State Zip Code
PITTSBURGH PA 15272

FEC ID number of contributing federal political committee. **C C00034298**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112370

Amount of Each Receipt this Period
4500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PPL PEOPLE FOR GOOD GOVT PAC

Mailing Address TWO NORTH NINTH ST

City State Zip Code
ALLENTOWN PA 18101

FEC ID number of contributing federal political committee. **C C00228106**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112818

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

9500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
PROCTER GAMBLE CO GOOD GOVT

Mailing Address 1 PROCTER GAMBLE PLAZA

City State Zip Code
CINCINNATI OH 45202

FEC ID number of contributing federal political committee. **C C00257329**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11C.112798

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (PCIPAC)

Mailing Address 8700 WEST BRYN MAWR SUITE 1200S

City State Zip Code
CHICAGO IL 60631

FEC ID number of contributing federal political committee. **C C00066472**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 21 / 2016

Transaction ID : SA11C.112476

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PROSPERITY ACTION INC.

Mailing Address 1006 PENDLETON STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C C00377689**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11C.112735

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

12500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 202 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
PSC H2O

Mailing Address **762 LANCASTER AVE W**

City **BRYN MAWR** State **PA** Zip Code **19010**

FEC ID number of contributing federal political committee. **C C00340455**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SA11C.112662

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
QUICKEN LOANS INC PAC

Mailing Address **101 S. WASHINGTON SQ.
SUITE 620**

City **LANSING** State **MI** Zip Code **48933**

FEC ID number of contributing federal political committee. **C C00388827**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11C.112792

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RAYTHEON PAC

Mailing Address **1100 WILSON BOULEVARD SUITE 1500**

City **ARLINGTON** State **VA** Zip Code **22209**

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **7000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11C.112194

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
RAYTHEON PAC

Mailing Address 1100 WILSON BOULEVARD SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.112241

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
REALTORS PAC

Mailing Address 430 MICHIGAN AVE N

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2016

Transaction ID : SA11C.112904

Amount of Each Receipt this Period
 3000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ROCKWELL COLLINS EMPLOYEE PAC

Mailing Address 1300 WILSON BLVD. STE. 200

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00365684**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11C.112336

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
SAIC VOLUNTARY PAC

Mailing Address 2111 WILSON BOULEVARD
SUITE 1110

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C C00300418**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112801

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SALTCHUK RESOURCES INC. PAC

Mailing Address 32001 32ND AVE S STE 200

City FEDERAL WAY State WA Zip Code 98001

FEC ID number of contributing federal political committee. **C C00411694**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11C.112067

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SALTCHUK RESOURCES INC. PAC

Mailing Address 32001 32ND AVE S STE 200

City FEDERAL WAY State WA Zip Code 98001

FEC ID number of contributing federal political committee. **C C00411694**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112803

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 205 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
SALTCHUK RESOURCES INC. PAC

Mailing Address 32001 32ND AVE S STE 200

City State Zip Code
FEDERAL WAY WA 98001

FEC ID number of contributing federal political committee. **C C00411694**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11C.112804

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SECURITIES INDUSTRY AND FINANCIAL MARKETS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 NEW YORK AVENUE, NW
8TH FLOOR

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C00431312**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11C.112250

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SHEETZPAC

Mailing Address 5700 6TH AVE

City State Zip Code
ALTOONA PA 16602

FEC ID number of contributing federal political committee. **C C00219121**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11C.112696

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 206 OF 323
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SHEETZPAC

Mailing Address 5700 6TH AVE

City ALTOONA State PA Zip Code 16602

FEC ID number of contributing federal political committee. **C C00219121**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112889

Amount of Each Receipt this Period
2300.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SHEETZPAC

Mailing Address 5700 6TH AVE

City ALTOONA State PA Zip Code 16602

FEC ID number of contributing federal political committee. **C C00219121**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112893

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SOCIETY FOR RELIEF OF DISTRESSED AND DECAYED PILOTS POLITICAL ACTION COMMITTEE

Mailing Address 1628 JFK BLVD SUITE 2000
C/O JAMES W JOHNSON,HOLSTEIN KEATI

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C C00240457**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11C.112666

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 207 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
SOUTHWEST AIRLINES CO. FREEDOM FUND

Mailing Address P O BOX 36611, HDQ 4GA

City State Zip Code
DALLAS TX 75235

FEC ID number of contributing federal political committee. **C C00341602**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8317.15

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11C.112022

Amount of Each Receipt this Period
3317.15

Memo Item

B. Full Name (Last, First, Middle Initial)
SPACE EXPLORATION TECHNOLOGIES CORPORATION PAC

Mailing Address 1030 15TH STREET, NW
SUITE 220 E

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C00411116**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11C.112332

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address ONE STATE FARM PLAZA
C/O MARK SCHWAMBERGER, TREASURER,

City State Zip Code
BLOOMINGTON IL 61710

FEC ID number of contributing federal political committee. **C C00544817**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 22 / 2016

Transaction ID : SA11C.112204

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5317.15

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 208 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
STEEL MANUFACTURERS ASSOCIATION, INC. 21ST CENTURY STEEL MAKERS COALITION (SMA PAC)

Mailing Address 1150 CONNECTICUT AVE NW
SUITE 1125

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00576470

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11C.112481

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SUNTRUST PAC

Mailing Address 919 E MAIN STREET

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00386524

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.112245

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY PAC

Mailing Address 929 LONG BRIDGE DR

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
9000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112807

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 209 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
THE GREATER CUMBERLAND COMMITTEE

Mailing Address 71 BALTIMORE ST
2ND FLOOR

City State Zip Code
CUMBERLAND MD 21502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11C.112273

Amount of Each Receipt this Period
250.00

Memo Item
PERMISSIBLE FUNDS

B. Full Name (Last, First, Middle Initial)
THE WILLIAMS COMPANIES INC PAC

Mailing Address 1627 I STREET NW
SUITE 900

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00040394

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 22 / 2016

Transaction ID : SA11C.112203

Amount of Each Receipt this Period
3000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TRALAPAC (TRUCK RENTING AND LEASING ASSOCIATION PAC)

Mailing Address 675 N WASHINGTON STREET
SUITE 410

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00499400

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11C.112184

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 210 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial)
TYCO INTERNATIONAL MANAGEMENT COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE (TYCO EMPLOYEES)

A. Mailing Address 9 ROSZEL ROAD

City State Zip Code
PRINCETON NJ 08540

FEC ID number of contributing federal political committee. **C** C00113753

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016
Transaction ID : SA11C.112291

Amount of Each Receipt this Period
 2500.00
 Memo Item

Full Name (Last, First, Middle Initial)
B. UNION PACIFIC CORP FFEG PAC

Mailing Address 700 THIRTEENTH STREET, NW SUITE 350

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016
Transaction ID : SA11C.112188

Amount of Each Receipt this Period
 5000.00
 Memo Item

Full Name (Last, First, Middle Initial)
C. UNITED STATES STEEL PAC

Mailing Address 600 GRANT STREET

City State Zip Code
PITTSBURGH PA 15219

FEC ID number of contributing federal political committee. **C** C00030676

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016
Transaction ID : SA11C.112478

Amount of Each Receipt this Period
 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....

9500.00

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: (check only one)	PAGE 211 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
UNITED STATES STEEL PAC

Mailing Address 600 GRANT STREET

City State Zip Code
PITTSBURGH PA 15219

FEC ID number of contributing federal political committee. **C** C00030676

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112815

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
UPSPAC

Mailing Address 55 GLENLAKE PKWY NE

City State Zip Code
ATLANTA GA 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : SA11C.112287

Amount of Each Receipt this Period
4000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
VALERO PAC

Mailing Address 601 PENNSYLVANIA AVENUE, NW
SUITE 900, NORTH BUILDING

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00109546

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11C.112794

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
WINE SPIRITS WHOLESALERS OF AMERICA

Mailing Address 805 15TH ST NW SUITE 430

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C00147173**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11C.112728

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
XCEL ENERGY EMPLOYEE

Mailing Address 1225 17TH ST SUITE 1200

City State Zip Code
DENVER CO 80202

FEC ID number of contributing federal political committee. **C C00107771**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : SA11C.112281

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ZACHRY CORPORATION PAC

Mailing Address P. O. BOX 33240

City State Zip Code
SAN ANTONIO TX 78265

FEC ID number of contributing federal political committee. **C C00048165**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11C.111966

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7500.00

341929.15

**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 213 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. 814 CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016
Mailing Address 5827 COLFAX AVE.		Amount of Each Disbursement this Period 9606.88
City ALEXANDRIA State VA Zip Code 22311	Purpose of Disbursement FUNDRAISING CONSULTING 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111846

Full Name (Last, First, Middle Initial) B. 814 CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 5827 COLFAX AVE.		Amount of Each Disbursement this Period 18969.15
City ALEXANDRIA State VA Zip Code 22311	Purpose of Disbursement FUNDRAISING CONSULTING 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112533

Full Name (Last, First, Middle Initial) C. ACE SELF STORAGE		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016
Mailing Address 300 ORCHARD AVE.		Amount of Each Disbursement this Period 689.60
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement STORAGE 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111858

SUBTOTAL of Disbursements This Page (optional).....	29265.63
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 214 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address 1 ADP BLVD			Amount of Each Disbursement this Period 7.00	
City ROSELAND	State NJ	Zip Code 07068	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAYROLL FEES		Category/ Type 001	Transaction ID : SB17.112918	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ADP			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2016	
Mailing Address 1 ADP BLVD			Amount of Each Disbursement this Period 120.78	
City ROSELAND	State NJ	Zip Code 07068	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAYROLL FEES		Category/ Type 001	Transaction ID : SB17.112919	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ADP			Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016	
Mailing Address 1 ADP BLVD			Amount of Each Disbursement this Period 77.90	
City ROSELAND	State NJ	Zip Code 07068	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAYROLL FEES		Category/ Type 001	Transaction ID : SB17.112920	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	205.68
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 215 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016
Mailing Address 1 ADP BLVD		Amount of Each Disbursement this Period 4240.39
City ROSELAND	State NJ	
Zip Code 07068	Purpose of Disbursement PAYROLL TAXES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112921
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016
Mailing Address 1 ADP BLVD		Amount of Each Disbursement this Period 9390.03
City ROSELAND	State NJ	
Zip Code 07068	Purpose of Disbursement SEE MEMO ENTRIES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112922
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. JOEY BROWN		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016
Mailing Address 210 BIG POND RD		Amount of Each Disbursement this Period 1947.65
City SHIPPENSBURG	State PA	
Zip Code 17257	Purpose of Disbursement SALARY	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112958
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	13630.42
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 216 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EMILY KURTZ		Date of Disbursement MM / DD / YYYY 01 / 29 / 2016
Mailing Address 368 HEUSTON RD		Amount of Each Disbursement this Period 1736.70
City ROARING SPRING	State PA	
Zip Code 16673	Purpose of Disbursement SALARY	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112959
State: District:		

Full Name (Last, First, Middle Initial) B. MS. JENNIFER MEARKLE		Date of Disbursement MM / DD / YYYY 01 / 29 / 2016
Mailing Address 3022 BROAD AVE		Amount of Each Disbursement this Period 170.88
City ALTOONA	State PA	
Zip Code 16601	Purpose of Disbursement SALARY	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112960
State: District:		

Full Name (Last, First, Middle Initial) C. TYLER MENZLER		Date of Disbursement MM / DD / YYYY 01 / 29 / 2016
Mailing Address 701 THOMPSON AVE		Amount of Each Disbursement this Period 2080.03
City DONORA	State PA	
Zip Code 15033	Purpose of Disbursement SALARY	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112961
State: District:		

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 217 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BRITTANY PSYHOGIOS-SMITH		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016
Mailing Address 700 S. COURTHOUSE RD. #404		Amount of Each Disbursement this Period 834.60
City ARLINGTON State VA Zip Code 22204	Purpose of Disbursement SALARY Category/Type 001	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112962
State: District:		

Full Name (Last, First, Middle Initial) B. MR. WILLIAM STRAESSER		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016
Mailing Address PO BOX 1023		Amount of Each Disbursement this Period 2620.17
City ALTOONA State PA Zip Code 16603	Purpose of Disbursement SALARY Category/Type 001	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112963
State: District:		

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016
Mailing Address 1 ADP BLVD		Amount of Each Disbursement this Period 7.00
City ROSELAND State NJ Zip Code 07068	Purpose of Disbursement PAYROLL FEES Category/Type 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112923
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7.00
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 218 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2016
Mailing Address 1 ADP BLVD		Amount of Each Disbursement this Period 125.50
City ROSELAND	State NJ	
Zip Code 07068	Purpose of Disbursement PAYROLL FEES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112927
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2016
Mailing Address 1 ADP BLVD		Amount of Each Disbursement this Period 7.00
City ROSELAND	State NJ	
Zip Code 07068	Purpose of Disbursement PAYROLL FEES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112928
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2016
Mailing Address 1 ADP BLVD		Amount of Each Disbursement this Period 4986.29
City ROSELAND	State NJ	
Zip Code 07068	Purpose of Disbursement PAYROLL TAXES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112929
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5118.79
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 219 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2016
Mailing Address 1 ADP BLVD		Amount of Each Disbursement this Period 10957.64
City ROSELAND	State NJ	
Zip Code 07068	Purpose of Disbursement SEE MEMO ENTRIES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112930
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. JOEY BROWN		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2016
Mailing Address 210 BIG POND RD		Amount of Each Disbursement this Period 1947.65
City SHIPPENSBURG	State PA	
Zip Code 17257	Purpose of Disbursement SALARY	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112951
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ANDREW GROSSMAN		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2016
Mailing Address 3714 LEYLAND DR		Amount of Each Disbursement this Period 1567.50
City MECHANICSBURG	State PA	
Zip Code 17050	Purpose of Disbursement SALARY	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112952
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10957.64
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 220 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EMILY KURTZ			Date of Disbursement MM / DD / YYYY 02 / 26 / 2016	
Mailing Address 368 HEUSTON RD			Amount of Each Disbursement this Period 1736.70	
City ROARING SPRING	State PA	Zip Code 16673	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112953	
Purpose of Disbursement SALARY		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. MS. JENNIFER MEARKLE			Date of Disbursement MM / DD / YYYY 02 / 26 / 2016	
Mailing Address 3022 BROAD AVE			Amount of Each Disbursement this Period 170.88	
City ALTOONA	State PA	Zip Code 16601	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112954	
Purpose of Disbursement SALARY		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. TYLER MENZLER			Date of Disbursement MM / DD / YYYY 02 / 26 / 2016	
Mailing Address 701 THOMPSON AVE			Amount of Each Disbursement this Period 2080.05	
City DONORA	State PA	Zip Code 15033	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112955	
Purpose of Disbursement SALARY		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

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 221 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BRITTANY PSYHOGIOS-SMITH			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2016	
Mailing Address 700 S. COURTHOUSE RD. #404			Amount of Each Disbursement this Period 834.60	
City ARLINGTON	State VA	Zip Code 22204	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112956	
Purpose of Disbursement SALARY		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. MR. WILLIAM STRAESSER			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2016	
Mailing Address PO BOX 1023			Amount of Each Disbursement this Period 2620.26	
City ALTOONA	State PA	Zip Code 16603	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112957	
Purpose of Disbursement SALARY		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. ADP			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016	
Mailing Address 1 ADP BLVD			Amount of Each Disbursement this Period 127.86	
City ROSELAND	State NJ	Zip Code 07068	<input type="checkbox"/> Memo Item Transaction ID : SB17.112933	
Purpose of Disbursement PAYROLL FEES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	127.86
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 222 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2016
Mailing Address 1 ADP BLVD		Amount of Each Disbursement this Period 7.00
City ROSELAND	State NJ	
Zip Code 07068	Purpose of Disbursement PAYROLL FEES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112934
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2016
Mailing Address 1 ADP BLVD		Amount of Each Disbursement this Period 10957.63
City ROSELAND	State NJ	
Zip Code 07068	Purpose of Disbursement SEE MEMO ENTRIES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112935
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ANDREW GROSSMAN		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2016
Mailing Address 3714 LEYLAND DR		Amount of Each Disbursement this Period 1567.60
City MECHANICSBURG	State PA	
Zip Code 17050	Purpose of Disbursement SALARY	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112944
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10964.63
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 223 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JOEY BROWN			Date of Disbursement MM / DD / YYYY 03 / 29 / 2016	
Mailing Address 210 BIG POND RD			Amount of Each Disbursement this Period 1947.65	
City SHIPPENSBURG	State PA	Zip Code 17257	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112945	
Purpose of Disbursement SALARY		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. EMILY KURTZ			Date of Disbursement MM / DD / YYYY 03 / 29 / 2016	
Mailing Address 368 HEUSTON RD			Amount of Each Disbursement this Period 1736.70	
City ROARING SPRING	State PA	Zip Code 16673	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112946	
Purpose of Disbursement SALARY		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. MS. JENNIFER MEARKLE			Date of Disbursement MM / DD / YYYY 03 / 29 / 2016	
Mailing Address 3022 BROAD AVE			Amount of Each Disbursement this Period 170.88	
City ALTOONA	State PA	Zip Code 16601	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112947	
Purpose of Disbursement SALARY		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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 224 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TYLER MENZLER			Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2016	
Mailing Address 701 THOMPSON AVE			Amount of Each Disbursement this Period 2080.03	
City DONORA	State PA	Zip Code 15033	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112948	
Purpose of Disbursement SALARY		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. BRITTANY PSYHOGIOS-SMITH			Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2016	
Mailing Address 700 S. COURTHOUSE RD. #404			Amount of Each Disbursement this Period 834.60	
City ARLINGTON	State VA	Zip Code 22204	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112949	
Purpose of Disbursement SALARY		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. MR. WILLIAM STRAESSER			Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2016	
Mailing Address PO BOX 1023			Amount of Each Disbursement this Period 2620.17	
City ALTOONA	State PA	Zip Code 16603	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112950	
Purpose of Disbursement SALARY		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

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 225 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement MM / DD / YYYY 03 / 29 / 2016
Mailing Address 1 ADP BLVD		Amount of Each Disbursement this Period 4920.68
City ROSELAND	State NJ	
Zip Code 07068	Purpose of Disbursement PAYROLL TAXES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112936
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address PO BOX 1270		Amount of Each Disbursement this Period 14465.60
City NEWARK	State NJ	
Zip Code 07101	Purpose of Disbursement SEE MEMO ENTRIES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.111884
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. RIB ROOM		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 2020 K ST NW		Amount of Each Disbursement this Period 256.76
City WASHINGTON	State DC	
Zip Code 20006	Purpose of Disbursement MEETING EXPENSE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.111885
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	19386.28
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 226 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OMNI HOTEL		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016
Mailing Address 676 NORTH MICHIGAN AVENUE		Amount of Each Disbursement this Period 386.46
City CHICAGO State IL Zip Code 60611	Purpose of Disbursement LODGING 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111886
State: District:		

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016
Mailing Address 300 FIRST STREET SE		Amount of Each Disbursement this Period 233.74
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement MEETING EXPENSE 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111887
State: District:		

Full Name (Last, First, Middle Initial) C. SHEETZ INC		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016
Mailing Address 5700 SIXTH AVENUE		Amount of Each Disbursement this Period 18.90
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement TRAVEL EXPENSE 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111889
State: District:		

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 227 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address 800 MARKET STREET 7TH FLOOR			Amount of Each Disbursement this Period 208.35	
City SAN FRANCISCO	State CA	Zip Code 94115	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.111890	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. DEL FRISCO GRILLE			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address 50 ROCKEFELLER PLAZA			Amount of Each Disbursement this Period 3823.83	
City NEW YORK	State NY	Zip Code 10020	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.111891	
Purpose of Disbursement EVENT CATERING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. AMTRAK			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address 400 N CAPITOL STREET NW			Amount of Each Disbursement this Period 1208.00	
City WASHINGTON	State DC	Zip Code 20001	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.111892	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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 228 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ACQUA AL 2		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016
Mailing Address 212 7TH STREET SOUTHEAST		Amount of Each Disbursement this Period 1042.55
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement EVENT CATERING 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111893
State: District:		

Full Name (Last, First, Middle Initial) B. GHIBELLINA		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016
Mailing Address 1610 14TH ST NW		Amount of Each Disbursement this Period 320.93
City WASHINGTON State DC Zip Code 20009	Purpose of Disbursement MEETING EXPENSE 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111894
State: District:		

Full Name (Last, First, Middle Initial) C. RISTORANTE TOSCA		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016
Mailing Address 1112 F STREET NW		Amount of Each Disbursement this Period 1071.40
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement EVENT CATERING 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111895
State: District:		

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 229 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SEI RESTAURANT			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address 444 7TH STREET NW			Amount of Each Disbursement this Period 100.85	
City WASHINGTON	State DC	Zip Code 20004	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.111896	
Purpose of Disbursement MEETING EXPENSE		001 Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. RED STIXS			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address 216 E. 49TH STREET			Amount of Each Disbursement this Period 894.82	
City NEW YORK	State NY	Zip Code 10017	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.111897	
Purpose of Disbursement EVENT CATERING		001 Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. CARBONE			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address 181 THOMPSON ST			Amount of Each Disbursement this Period 1370.05	
City NEW YORK	State NY	Zip Code 10012	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.111898	
Purpose of Disbursement EVENT CATERING		001 Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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 230 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KIMBERLY HOTEL			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address 145 EAST 50TH STREET			Amount of Each Disbursement this Period 1228.70	
City NEW YORK	State NY	Zip Code 10022	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.111899	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address 2211 NORTH FIRST ST.			Amount of Each Disbursement this Period 853.00	
City SAN JOSE	State CA	Zip Code 95131	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.111901	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016	
Mailing Address PO BOX 1270			Amount of Each Disbursement this Period 1232.15	
City NEWARK	State NJ	Zip Code 07101	<input type="checkbox"/> Memo Item Transaction ID : SB17.111859	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1232.15
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 231 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. APPLE STORE		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016
Mailing Address 1100 S HAYES STREET LOT P04-A		Amount of Each Disbursement this Period 961.42
City ARLINGTON State VA Zip Code 22202	Purpose of Disbursement OFFICE EQUIPMENT 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112964
State: District:		

Full Name (Last, First, Middle Initial) B. NORTON SECURITY		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016
Mailing Address 350 ELLIS STREET		Amount of Each Disbursement this Period 79.99
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement SOFTWARE 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112965
State: District:		

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016
Mailing Address 800 MARKET STREET 7TH FLOOR		Amount of Each Disbursement this Period 81.32
City SAN FRANCISCO State CA Zip Code 94115	Purpose of Disbursement TRAVEL EXPENSE 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112966
State: District:		

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 232 OF 323			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2016		
Mailing Address PO BOX 1270			Amount of Each Disbursement this Period 347.73		
City NEWARK	State NJ	Zip Code 07101	Memo Item <input type="checkbox"/>		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001			
Candidate Name			Transaction ID : SB17.112931		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016		
Mailing Address PO BOX 1270			Amount of Each Disbursement this Period 6759.42		
City NEWARK	State NJ	Zip Code 07101	Memo Item <input type="checkbox"/>		
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001			
Candidate Name			Transaction ID : SB17.112075		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C. NORTON SECURITY			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016		
Mailing Address 350 ELLIS STREET			Amount of Each Disbursement this Period 95.39		
City MOUNTAIN VIEW	State CA	Zip Code 94043	Memo Item <input checked="" type="checkbox"/>		
Purpose of Disbursement SOFTWARE		Category/ Type 001			
Candidate Name			Transaction ID : SB17.112097		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....	7107.15
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 233 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 800 MARKET STREET 7TH FLOOR			Amount of Each Disbursement this Period 157.63	
City SAN FRANCISCO	State CA	Zip Code 94115	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112098	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. POTBELLY			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 1275 1ST STREET NE BLD 1 STE. J			Amount of Each Disbursement this Period 149.60	
City WASHINTON	State DC	Zip Code 20002	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112099	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. DUNKIN DONUTS			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 3132 PLEASANT VALLEY BLVD			Amount of Each Disbursement this Period 142.16	
City ALTOONA	State PA	Zip Code 16602	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112100	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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 234 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FACEBOOK		Date of Disbursement MM / DD / YYYY 02 / 12 / 2016
Mailing Address 1 HACKER WAY		Amount of Each Disbursement this Period 804.02
City MENLO PARK	State CA	
Zip Code 94025	Purpose of Disbursement ADVERTISING	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112101
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. WASHINGTON COURT HOTEL		Date of Disbursement MM / DD / YYYY 02 / 12 / 2016
Mailing Address 525 NEW JERSEY AVE. NW		Amount of Each Disbursement this Period 1307.20
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement LODGING	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112102
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SCHNEIDERS OF CAPITOL HILL		Date of Disbursement MM / DD / YYYY 02 / 12 / 2016
Mailing Address 300 MASSACHUSETTS AVENUE NE		Amount of Each Disbursement this Period 2071.48
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement EVENT SUPPLIES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112103
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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 235 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016
Mailing Address PO BOX 25505		Amount of Each Disbursement this Period 65.25
City LEHIGH VALLEY	State PA	
Zip Code 18002	Purpose of Disbursement CELL PHONE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112104
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016
Mailing Address PO BOX 619612 MD 2400		Amount of Each Disbursement this Period 255.06
City DALLAS	State TX	
Zip Code 75261	Purpose of Disbursement AIRFARE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112105
State: District:		

Full Name (Last, First, Middle Initial) C. PLAN B BURGER BAR		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016
Mailing Address 1530 14TH STREET NW		Amount of Each Disbursement this Period 120.00
City WASHINGTON	State DC	
Zip Code 20005	Purpose of Disbursement MEETING EXPENSE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112106
State: District:		

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 236 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address PO BOX 1270			Amount of Each Disbursement this Period 5839.53	
City NEWARK	State NJ	Zip Code 07101	Memo Item <input type="checkbox"/>	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.112107	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 300 FIRST STREET SE			Amount of Each Disbursement this Period 396.82	
City WASHINGTON	State DC	Zip Code 20003	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.112108	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ACQUA AL 2			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 212 7TH STREET SOUTHEAST			Amount of Each Disbursement this Period 1114.95	
City WASHINGTON	State DC	Zip Code 20003	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : SB17.112109	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	5839.53
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 237 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EXXON		Date of Disbursement MM / DD / YYYY 02 / 12 / 2016
Mailing Address 542 SOUTH CENTER STREET		Amount of Each Disbursement this Period 32.18
City EBENSBURG	State PA Zip Code 15931	
Purpose of Disbursement TRAVEL EXPENSE	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.112110
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. SHEETZ INC		Date of Disbursement MM / DD / YYYY 02 / 12 / 2016
Mailing Address 5700 SIXTH AVENUE		Amount of Each Disbursement this Period 88.77
City ALTOONA	State PA Zip Code 16602	
Purpose of Disbursement TRAVEL EXPENSE	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.112111
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. LENA'S CAFE		Date of Disbursement MM / DD / YYYY 02 / 12 / 2016
Mailing Address 2000 EIGHTH AVENUE		Amount of Each Disbursement this Period 210.00
City ALTOONA	State PA Zip Code 16602	
Purpose of Disbursement MEETING EXPENSE	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.112112
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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 238 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PLAN B BURGER BAR			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 1530 14TH STREET NW			Amount of Each Disbursement this Period 145.00	
City WASHINGTON	State DC	Zip Code 20005	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112113	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. THE BENJAMIN HOTEL			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 125 EAST 50TH STREET			Amount of Each Disbursement this Period 1642.66	
City NEW YORK	State NY	Zip Code 10022	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112114	
Purpose of Disbursement LODGING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. RISTORANTE TOSCA			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 1112 F STREET NW			Amount of Each Disbursement this Period 300.00	
City WASHINGTON	State DC	Zip Code 20004	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112115	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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 239 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address PO BOX 619612 MD 2400			Amount of Each Disbursement this Period 1087.45	
City DALLAS	State TX	Zip Code 75261	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112116	
Purpose of Disbursement AIRFARE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 1200 E ALGONQUIN ROAD			Amount of Each Disbursement this Period 574.20	
City ELK GROVE VILLAGE	State IL	Zip Code 60007	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112117	
Purpose of Disbursement AIRFARE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) C. MARRIOTT			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 601 MAIN ST			Amount of Each Disbursement this Period 217.35	
City FT. WORTH	State TX	Zip Code 76102	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112118	
Purpose of Disbursement LODGING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

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 240 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2016
Mailing Address PO BOX 1270		Amount of Each Disbursement this Period 7.95
City NEWARK	State NJ	
Zip Code 07101	Purpose of Disbursement CC TRANSACTION FEES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112937
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address PO BOX 1270		Amount of Each Disbursement this Period 58.10
City NEWARK	State NJ	
Zip Code 07101	Purpose of Disbursement CC TRANSACTION FEES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112938
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address PO BOX 1270		Amount of Each Disbursement this Period 5708.27
City NEWARK	State NJ	
Zip Code 07101	Purpose of Disbursement SEE MEMO ENTRIES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112535
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5774.32
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 241 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 800 MARKET STREET 7TH FLOOR		Amount of Each Disbursement this Period 78.92
City SAN FRANCISCO State CA Zip Code 94115	Purpose of Disbursement TRAVEL EXPENSE 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112647
State: District:		

Full Name (Last, First, Middle Initial) B. ENTERPRISE RENT-A-CAR		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 1525 KENWOOD AVENUE		Amount of Each Disbursement this Period 618.74
City ALEXANDRIA State VA Zip Code 22302	Purpose of Disbursement TRAVEL EXPENSE 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112648
State: District:		

Full Name (Last, First, Middle Initial) C. DUNKIN DONUTS		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 3132 PLEASANT VALLEY BLVD		Amount of Each Disbursement this Period 235.31
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement MEETING EXPENSE 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112649
State: District:		

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 242 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FERRARI'S		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 1200 WILLIAM D TATE AVE		Amount of Each Disbursement this Period 2544.48
City GRAPEVINE State TX Zip Code 76051	Purpose of Disbursement EVENT CATERING	
Candidate Name	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112650
State: District:		

Full Name (Last, First, Middle Initial) B. BIGA ON THE BANKS		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 203 S ST MARY'S		Amount of Each Disbursement this Period 898.90
City SAN ANTONIO State TX Zip Code 78205	Purpose of Disbursement EVENT CATERING	
Candidate Name	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112651
State: District:		

Full Name (Last, First, Middle Initial) C. MARRIOTT		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 601 MAIN ST		Amount of Each Disbursement this Period 277.66
City FT. WORTH State TX Zip Code 76102	Purpose of Disbursement LODGING	
Candidate Name	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112652
State: District:		

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 243 OF 323			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FACEBOOK		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 1 HACKER WAY		Amount of Each Disbursement this Period 464.92
City MENLO PARK	State CA	
Zip Code 94025	Purpose of Disbursement ADVERTISING	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112653
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address PO BOX 1270		Amount of Each Disbursement this Period 7686.85
City NEWARK	State NJ	
Zip Code 07101	Purpose of Disbursement SEE MEMO ENTRIES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112939
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ACQUA AL 2		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 212 7TH STREET SOUTHEAST		Amount of Each Disbursement this Period 1045.60
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement EVENT CATERING	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112967
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7686.85
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 244 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAFE BERLIN		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 322 MASSACHUSETTS AVENUE NE		Amount of Each Disbursement this Period 1880.85
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement EVENT CATERING	
Candidate Name	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112968
State: District:		

Full Name (Last, First, Middle Initial) B. FRESH CONNECTIONS		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 1114 HERNDON PKWY		Amount of Each Disbursement this Period 466.15
City HERNDON State VA Zip Code 20170	Purpose of Disbursement EVENT CATERING	
Candidate Name	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112969
State: District:		

Full Name (Last, First, Middle Initial) C. HILTON HOTEL		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 1870 GRIFFIN ROAD		Amount of Each Disbursement this Period 1448.12
City DANIA State FL Zip Code 33004	Purpose of Disbursement LODGING	
Candidate Name	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112970
State: District:		

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 245 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RISTORANTE TOSCA			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address 1112 F STREET NW			Amount of Each Disbursement this Period 359.60	
City WASHINGTON	State DC	Zip Code 20004	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112971	
Purpose of Disbursement EVENT CATERING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. SHEETZ INC			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address 5700 SIXTH AVENUE			Amount of Each Disbursement this Period 84.90	
City ALTOONA	State PA	Zip Code 16602	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112972	
Purpose of Disbursement PRINTING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. SHERATON DALLAS			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address 400 NORTH OLICE ST.			Amount of Each Disbursement this Period 514.34	
City DALLAS	State TX	Zip Code 75201	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112973	
Purpose of Disbursement LODGING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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 246 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE GEORGIAN INN OF SOMERSET			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address 800 GEORGIAN PLACE DRIVE			Amount of Each Disbursement this Period 770.20	
City SOMERSET	State PA	Zip Code 15501	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112974	
Purpose of Disbursement LODGING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. AMVETS POST 103			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016	
Mailing Address PO BOX 423			Amount of Each Disbursement this Period 942.50	
City HOPWOOD	State PA	Zip Code 15445	<input type="checkbox"/> Memo Item Transaction ID : SB17.112148	
Purpose of Disbursement EVENT CATERING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2016	
Mailing Address 5555 HILTON STE 106			Amount of Each Disbursement this Period 761.34	
City BATON ROUGE	State LA	Zip Code 70808	<input type="checkbox"/> Memo Item Transaction ID : SB17.112932	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	1703.84
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 247 OF 323			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2016
Mailing Address 5555 HILTON STE 106		Amount of Each Disbursement this Period 257.65
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement CC TRANSACTION FEES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112940
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ATLANTIC BROADBAND		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016
Mailing Address BOX 371801		Amount of Each Disbursement this Period 393.39
City PITTSBURGH	State PA	
Zip Code 15250	Purpose of Disbursement INTERNET	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.111907
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ATLANTIC BROADBAND		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2016
Mailing Address BOX 371801		Amount of Each Disbursement this Period 592.89
City PITTSBURGH	State PA	
Zip Code 15250	Purpose of Disbursement INTERNET	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.111847
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1243.93
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 248 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ATLANTIC BROADBAND			Date of Disbursement										
Mailing Address BOX 371801			<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>17</td> <td></td> <td>2016</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		17		2016
M M	/	D D	/	Y Y Y Y									
02		17		2016									
City PITTSBURGH	State PA	Zip Code 15250	Amount of Each Disbursement this Period <table border="1"><tr><td>593.17</td></tr></table>	593.17									
593.17													
Purpose of Disbursement INTERNET	Category/ Type <table border="1"><tr><td>001</td></tr></table>		001										
001													
Candidate Name			<input type="checkbox"/> Memo Item										
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112150										
State:	District:												

Full Name (Last, First, Middle Initial) B. ATLANTIC BROADBAND			Date of Disbursement										
Mailing Address BOX 371801			<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>29</td> <td></td> <td>2016</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		29		2016
M M	/	D D	/	Y Y Y Y									
02		29		2016									
City PITTSBURGH	State PA	Zip Code 15250	Amount of Each Disbursement this Period <table border="1"><tr><td>723.40</td></tr></table>	723.40									
723.40													
Purpose of Disbursement INTERNET	Category/ Type <table border="1"><tr><td>001</td></tr></table>		001										
001													
Candidate Name			<input type="checkbox"/> Memo Item										
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112628										
State:	District:												

Full Name (Last, First, Middle Initial) C. ATLANTIC BROADBAND			Date of Disbursement										
Mailing Address BOX 371801			<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>15</td> <td></td> <td>2016</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		15		2016
M M	/	D D	/	Y Y Y Y									
03		15		2016									
City PITTSBURGH	State PA	Zip Code 15250	Amount of Each Disbursement this Period <table border="1"><tr><td>384.22</td></tr></table>	384.22									
384.22													
Purpose of Disbursement INTERNET	Category/ Type <table border="1"><tr><td>001</td></tr></table>		001										
001													
Candidate Name			<input type="checkbox"/> Memo Item										
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112486										
State:	District:												

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"><tr><td>1700.79</td></tr></table>	1700.79
1700.79		
TOTAL This Period (last page this line number only).....	<table border="1"><tr><td></td></tr></table>	

**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 249 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BEDFORD COUNTY FREE PRESS			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016	
Mailing Address PO BOX 235			Amount of Each Disbursement this Period 200.00	
City BEDFORD	State PA	Zip Code 15522	<input type="checkbox"/> Memo Item	
Purpose of Disbursement ADVERTISING		Category/ Type 001	Transaction ID : SB17.112833	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. BEDFORD COUNTY GOP			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address 255 GUNSIGHT PASS			Amount of Each Disbursement this Period 500.00	
City IMLER	State PA	Zip Code 16655	<input type="checkbox"/> Memo Item	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.112541	
Candidate Name BEDFORD COUNTY GOP				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. BEDFORD ELKS COUNTRY CLUB			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address 937 S RICHARD STREET			Amount of Each Disbursement this Period 2789.56	
City BEDFORD	State PA	Zip Code 15522	<input type="checkbox"/> Memo Item	
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : SB17.112542	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3489.56
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 250 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BENTLEY SYSTEMS			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2016	
Mailing Address 685 STOCKTON DR			Amount of Each Disbursement this Period 623.78	
City EXTON	State PA	Zip Code 19341	<input type="checkbox"/> Memo Item	
Purpose of Disbursement EVENT CATERING		Category/ Type 001		
Candidate Name			Transaction ID : SB17.112528	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. BENZELS BRETZEL BAKERY			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address 5200 SIXTH AVENUE			Amount of Each Disbursement this Period 105.00	
City ALTOONA	State PA	Zip Code 16602	<input type="checkbox"/> Memo Item	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001		
Candidate Name			Transaction ID : SB17.112543	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. BENZELS BRETZEL BAKERY			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 5200 SIXTH AVENUE			Amount of Each Disbursement this Period 70.00	
City ALTOONA	State PA	Zip Code 16602	<input type="checkbox"/> Memo Item	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001		
Candidate Name			Transaction ID : SB17.112487	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional)	798.78
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 251 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BERKE FARAH LLP			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016		
Mailing Address 2101 L STREET NW STE. 1000			Amount of Each Disbursement this Period 1500.00		
City WASHINGTON	State DC	Zip Code 20037	Memo Item <input type="checkbox"/>		
Purpose of Disbursement LEGAL CONSULTING		Category/ Type 001	Transaction ID : SB17.111848		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) B. BERKE FARAH LLP			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016		
Mailing Address 2101 L STREET NW STE. 1000			Amount of Each Disbursement this Period 1500.00		
City WASHINGTON	State DC	Zip Code 20037	Memo Item <input type="checkbox"/>		
Purpose of Disbursement LEGAL CONSULTING		Category/ Type 001	Transaction ID : SB17.112077		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) C. BERKE FARAH LLP			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016		
Mailing Address 2101 L STREET NW STE. 1000			Amount of Each Disbursement this Period 1531.70		
City WASHINGTON	State DC	Zip Code 20037	Memo Item <input type="checkbox"/>		
Purpose of Disbursement LEGAL CONSULTING		Category/ Type 001	Transaction ID : SB17.112544		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	4531.70
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 252 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BERKE FARAH LLP		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 2101 L STREET NW STE. 1000		Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Memo Item
City WASHINGTON	State DC	
Zip Code 20037	Purpose of Disbursement LEGAL CONSULTING	Transaction ID : SB17.112834
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MEGHAN BOOCKS		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 511 PAYNE HILL ROAD APT 212		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item
City JEFFERSON HILLS	State PA	
Zip Code 15025	Purpose of Disbursement FIELD CONSULTING	Transaction ID : SB17.112778
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MARK BROADRICK		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016
Mailing Address 301 SEAWAT AVENUE		Amount of Each Disbursement this Period 1200.00 <input type="checkbox"/> Memo Item
City ALTOONA	State PA	
Zip Code 16601	Purpose of Disbursement OFFICE RENT	Transaction ID : SB17.111866
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3700.00
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 253 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. MARK BROADRICK			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016		
Mailing Address 301 SEAWAT AVENUE			Amount of Each Disbursement this Period 1200.00		
City ALTOONA	State PA	Zip Code 16601	<input type="checkbox"/> Memo Item Transaction ID : SB17.111939		
Purpose of Disbursement OFFICE RENT		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. MARK BROADRICK			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016		
Mailing Address 301 SEAWAT AVENUE			Amount of Each Disbursement this Period 1200.00		
City ALTOONA	State PA	Zip Code 16601	<input type="checkbox"/> Memo Item Transaction ID : SB17.112567		
Purpose of Disbursement OFFICE RENT		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. MARK BROADRICK			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2016		
Mailing Address 301 SEAWAT AVENUE			Amount of Each Disbursement this Period 1200.00		
City ALTOONA	State PA	Zip Code 16601	<input type="checkbox"/> Memo Item Transaction ID : SB17.112660		
Purpose of Disbursement OFFICE RENT		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	3600.00
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 254 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. JOEY BROWN		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016
Mailing Address 210 BIG POND RD		Amount of Each Disbursement this Period 750.40
City SHIPPENSBURG	State PA Zip Code 17257	
Purpose of Disbursement MILEAGE	Candidate Name	<input type="checkbox"/> Memo Item
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111849
State: District:		

Full Name (Last, First, Middle Initial) B. JOEY BROWN		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016
Mailing Address 210 BIG POND RD		Amount of Each Disbursement this Period 1280.04
City SHIPPENSBURG	State PA Zip Code 17257	
Purpose of Disbursement SEE MEMO ENTRIES	Candidate Name	<input type="checkbox"/> Memo Item
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112086
State: District:		

Full Name (Last, First, Middle Initial) C. JOEY BROWN		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016
Mailing Address 210 BIG POND RD		Amount of Each Disbursement this Period 1010.80
City SHIPPENSBURG	State PA Zip Code 17257	
Purpose of Disbursement MILEAGE	Candidate Name	<input checked="" type="checkbox"/> Memo Item
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112094
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2030.44
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 255 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS			Date of Disbursement MM / DD / YYYY 02 / 12 / 2016	
Mailing Address PO BOX 25505			Amount of Each Disbursement this Period 236.40	
City LEHIGH VALLEY	State PA	Zip Code 18002	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112095	
Purpose of Disbursement CELL PHONE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. JOEY BROWN			Date of Disbursement MM / DD / YYYY 03 / 09 / 2016	
Mailing Address 210 BIG POND RD			Amount of Each Disbursement this Period 948.62	
City SHIPPENSBURG	State PA	Zip Code 17257	<input type="checkbox"/> Memo Item Transaction ID : SB17.112562	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. JOEY BROWN			Date of Disbursement MM / DD / YYYY 03 / 09 / 2016	
Mailing Address 210 BIG POND RD			Amount of Each Disbursement this Period 921.76	
City SHIPPENSBURG	State PA	Zip Code 17257	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112563	
Purpose of Disbursement MILEAGE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	948.62
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 256 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address PO BOX 15026			Amount of Each Disbursement this Period 6.87	
City ALBANY	State NY	Zip Code 12212	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112564	
Purpose of Disbursement TELEPHONE		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. BEDFORD GAZETTE			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address PO BOX 671			Amount of Each Disbursement this Period 19.99	
City BEDFORD	State PA	Zip Code 15522	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112565	
Purpose of Disbursement ADVERTISING		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. CAMBRIA COUNTY REPUBLICAN PARTY			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 450 LURAY AVENUE			Amount of Each Disbursement this Period 100.00	
City JOHSTOWN	State PA	Zip Code 15904	<input type="checkbox"/> Memo Item Transaction ID : SB17.112490	
Purpose of Disbursement EVENT TICKETS		Category/Type 001		
Candidate Name CAMBRIA COUNTY REPUBLICAN PARTY				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	100.00
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 257 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITOL PROMOTIONS INC.			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 2362 OAKDALE AVENUE PO BOX 231			Amount of Each Disbursement this Period 930.15	
City GLENSIDE	State PA	Zip Code 19038	<input type="checkbox"/> Memo Item	
Purpose of Disbursement CAMPAIGN SIGNS		Category/ Type 001	Transaction ID : SB17.112079	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. CARLIN AND ASSOCIATES INSURANCE			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2016	
Mailing Address PO BOX 1269			Amount of Each Disbursement this Period 947.50	
City ALTOONA	State PA	Zip Code 16603	<input type="checkbox"/> Memo Item	
Purpose of Disbursement INSURANCE		Category/ Type 001	Transaction ID : SB17.111857	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. CENTRAL BLAIR RECREATION COMMISSION			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016	
Mailing Address 2101 FIFTH AVENUE			Amount of Each Disbursement this Period 150.00	
City ALTOONA	State PA	Zip Code 16602	<input type="checkbox"/> Memo Item	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.111909	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2027.65
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 258 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CENTRAL PA COUNCIL OF REPUBLICAN WOMEN			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 250 BRISTOL LANE			Amount of Each Disbursement this Period 350.00
City HOLLIDAYSBURG	State PA	Zip Code 16648	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	<input type="checkbox"/> Memo Item
Candidate Name CENTRAL PA COUNCIL OF REPUBLICAN WOMEN		Transaction ID : SB17.112836	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. CENTRAL PA HUMANE SOCIETY			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 1837 E. PLEASANT VALLEY BLVD			Amount of Each Disbursement this Period 1000.00
City ALTOONA	State PA	Zip Code 16602	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : SB17.112837	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. CENTRE PUBLICATIONS			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016
Mailing Address PO BOX 345			Amount of Each Disbursement this Period 350.00
City CENTRE HALL	State PA	Zip Code 16828	
Purpose of Disbursement ADVERTISING		Category/ Type 001	<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : SB17.112080	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1700.00
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 259 OF 323			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JOSHUA CHUMRIK			Date of Disbursement MM / DD / YYYY 02 / 29 / 2016	
Mailing Address 982 WINTERSET RD.			Amount of Each Disbursement this Period 50.00	
City EBENSBURG	State PA	Zip Code 15931	Memo Item <input type="checkbox"/>	
Purpose of Disbursement FIELD CONSULTING		Category/ Type 001	Transaction ID : SB17.112636	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. CMDI			Date of Disbursement MM / DD / YYYY 01 / 28 / 2016	
Mailing Address 1593 SPRING HILL ROAD SUITE 400			Amount of Each Disbursement this Period 796.00	
City TYSONS CORNER	State VA	Zip Code 22182	Memo Item <input type="checkbox"/>	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.112924	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. CMDI			Date of Disbursement MM / DD / YYYY 03 / 31 / 2016	
Mailing Address 1593 SPRING HILL ROAD SUITE 400			Amount of Each Disbursement this Period 635.32	
City TYSONS CORNER	State VA	Zip Code 22182	Memo Item <input type="checkbox"/>	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.112941	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1481.32
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 260 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CASEY CONTRES			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016	
Mailing Address 2213 7TH AVE APT. A			Amount of Each Disbursement this Period 837.76	
City ALTOONA	State PA	Zip Code 16602	Memo Item <input type="checkbox"/>	
Purpose of Disbursement MILEAGE		Category/Type 001		
Candidate Name			Transaction ID : SB17.111934	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. CASEY CONTRES			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address 2213 7TH AVE APT. A			Amount of Each Disbursement this Period 295.12	
City ALTOONA	State PA	Zip Code 16602	Memo Item <input type="checkbox"/>	
Purpose of Disbursement MILEAGE		Category/Type 001		
Candidate Name			Transaction ID : SB17.112545	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. CASEY CONTRES			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016	
Mailing Address 2213 7TH AVE APT. A			Amount of Each Disbursement this Period 244.31	
City ALTOONA	State PA	Zip Code 16602	Memo Item <input type="checkbox"/>	
Purpose of Disbursement SEE MEMO ENTRY		Category/Type 001		
Candidate Name			Transaction ID : SB17.112835	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1377.19
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 261 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BEST BUY		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 1721 OSGOOD DRIVE		Amount of Each Disbursement this Period 244.31
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement OFFICE SUPPLIES Category/Type 001	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112860
State: District:		

Full Name (Last, First, Middle Initial) B. COPY RITE & BANNER ZONE		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016
Mailing Address 301 ALLEGHENY STREET		Amount of Each Disbursement this Period 287.68
City HOLLIDAYSBURG State PA Zip Code 16648	Purpose of Disbursement PRINTING Category/Type 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111910
State: District:		

Full Name (Last, First, Middle Initial) C. COPY RITE & BANNER ZONE		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2016
Mailing Address 301 ALLEGHENY STREET		Amount of Each Disbursement this Period 334.59
City HOLLIDAYSBURG State PA Zip Code 16648	Purpose of Disbursement PRINTING Category/Type 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111919
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	622.27
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 262 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COPY RITE & BANNER ZONE			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016	
Mailing Address 301 ALLEGHENY STREET			Amount of Each Disbursement this Period 142.36	
City HOLLIDAYSBURG	State PA	Zip Code 16648	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : SB17.111935	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. COPY RITE & BANNER ZONE			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 301 ALLEGHENY STREET			Amount of Each Disbursement this Period 861.25	
City HOLLIDAYSBURG	State PA	Zip Code 16648	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : SB17.112082	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. COPY RITE & BANNER ZONE			Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016	
Mailing Address 301 ALLEGHENY STREET			Amount of Each Disbursement this Period 222.34	
City HOLLIDAYSBURG	State PA	Zip Code 16648	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : SB17.112631	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1225.95
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 263 OF 323			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COPY RITE & BANNER ZONE			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address 301 ALLEGHENY STREET			Amount of Each Disbursement this Period 1116.20	
City HOLLIDAYSBURG	State PA	Zip Code 16648	<input type="checkbox"/> Memo Item	
Purpose of Disbursement PRINTING		Category/ Type 001		
Candidate Name			Transaction ID : SB17.112546	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. COPY RITE & BANNER ZONE			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 301 ALLEGHENY STREET			Amount of Each Disbursement this Period 201.40	
City HOLLIDAYSBURG	State PA	Zip Code 16648	<input type="checkbox"/> Memo Item	
Purpose of Disbursement PRINTING		Category/ Type 001		
Candidate Name			Transaction ID : SB17.112495	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. COPY RITE & BANNER ZONE			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016	
Mailing Address 301 ALLEGHENY STREET			Amount of Each Disbursement this Period 210.68	
City HOLLIDAYSBURG	State PA	Zip Code 16648	<input type="checkbox"/> Memo Item	
Purpose of Disbursement PRINTING		Category/ Type 001		
Candidate Name			Transaction ID : SB17.112838	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1528.28
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 264 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CUNNINGHAM MEATS			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016	
Mailing Address 81 CUNNINGHAM ROAD			Amount of Each Disbursement this Period 147.68	
City INDIANA	State PA	Zip Code 15701	Memo Item <input type="checkbox"/>	
Purpose of Disbursement MEETING EXPENSE		Category/Type 001		
Candidate Name			Transaction ID : SB17.112839	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. ANDREW DANIEL			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016	
Mailing Address 923 CHESTNUT ST			Amount of Each Disbursement this Period 1500.00	
City INDIANA	State PA	Zip Code 15701	Memo Item <input type="checkbox"/>	
Purpose of Disbursement FIELD CONSULTING		Category/Type 001		
Candidate Name			Transaction ID : SB17.112831	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. ELECTEKUSA			Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016	
Mailing Address PO BOX 23715			Amount of Each Disbursement this Period 2359.40	
City CHAGRIN FALLS	State OH	Zip Code 44023	Memo Item <input type="checkbox"/>	
Purpose of Disbursement SOFTWARE		Category/Type 001		
Candidate Name			Transaction ID : SB17.111862	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	4007.08
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 265 OF 323			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELECTEKUSA		Date of Disbursement MM / DD / YYYY 02 / 12 / 2016
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 2342.71 <input type="checkbox"/> Memo Item
City CHAGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement SOFTWARE	Transaction ID : SB17.112083
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ELECTEKUSA		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 2465.09 <input type="checkbox"/> Memo Item
City CHAGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement SOFTWARE	Transaction ID : SB17.112548
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ELECTEKUSA		Date of Disbursement MM / DD / YYYY 04 / 05 / 2016
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 2380.23 <input type="checkbox"/> Memo Item
City CHAGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement SOFTWARE	Transaction ID : SB17.112840
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7188.03
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 266 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FAYETTE CO ASSOC OF TWP SUPERVISORS		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2016
Mailing Address LEIGH KLINK, FCATO SECRETARY PO BOX 87		Amount of Each Disbursement this Period 100.00 <input type="checkbox"/> Memo Item
City NEW SALEM State PA Zip Code 15468	Purpose of Disbursement EVENT TICKETS 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112523
State: District:		

Full Name (Last, First, Middle Initial) B. FAYETTE HOLDINGS LIMITED		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2016
Mailing Address 52 W MAIN ST		Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Memo Item
City UNIONTOWN State PA Zip Code 15401	Purpose of Disbursement OFFICE RENT 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112658
State: District:		

Full Name (Last, First, Middle Initial) C. FCMC FOUNDATION		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address 214 PEACH ORCHARD ROAD		Amount of Each Disbursement this Period 60.00 <input type="checkbox"/> Memo Item
City MCCONNELLSBURG State PA Zip Code 17233	Purpose of Disbursement EVENT TICKETS 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112151
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	360.00
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 267 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FIRST COMMONWEALTH BANK		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address CREDIT CARD DEPT PO BOX 0537		Amount of Each Disbursement this Period 4085.01
City INDIANA State PA Zip Code 15701	Purpose of Disbursement SEE MEMO ENTRIES 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112152
State: District:		

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address PLANK ROAD/ORCHARD PLAZA		Amount of Each Disbursement this Period 707.25
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement OFFICE SUPPLIES 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112173
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address 525 ALLEGHENY STREET		Amount of Each Disbursement this Period 731.59
City HOLLIDAYSBURG State PA Zip Code 16648	Purpose of Disbursement POSTAGE 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112178
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4085.01
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 268 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WAL-MART		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address 702 SW 8TH ST		Amount of Each Disbursement this Period 160.68
City BENTONVILLE	State AR Zip Code 72716	
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.112181
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. SHEETZ INC		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address 5700 SIXTH AVENUE		Amount of Each Disbursement this Period 44.04
City ALTOONA	State PA Zip Code 16602	
Purpose of Disbursement TRAVEL EXPENSE	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.112182
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. FIRST COMMONWEALTH BANK		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address CREDIT CARD DEPT PO BOX 0537		Amount of Each Disbursement this Period 96.77
City INDIANA	State PA Zip Code 15701	
Purpose of Disbursement SEE MEMO ENTRY	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.112165
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	96.77
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 269 OF 323	
	<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

Full Name (Last, First, Middle Initial)
A. MCLEAN FAMILY RESTAURANT

Mailing Address 1321 CHAIN BRIDGE RD

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 17 / 2016

Amount of Each Disbursement this Period: 96.77

Memo Item

Transaction ID : SB17.112168

Full Name (Last, First, Middle Initial)
B. FIRST COMMONWEALTH BANK

Mailing Address CREDIT CARD DEPT
PO BOX 0537

City INDIANA State PA Zip Code 15701

Purpose of Disbursement SEE MEMO ENTRIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 09 / 2016

Amount of Each Disbursement this Period: 850.48

Memo Item

Transaction ID : SB17.112555

Full Name (Last, First, Middle Initial)
C. ALTOONA GRAND HOTEL

Mailing Address 1 SHERATON DR.

City ALTOONA State PA Zip Code 16601

Purpose of Disbursement LODGING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 09 / 2016

Amount of Each Disbursement this Period: 555.90

Memo Item

Transaction ID : SB17.112556

SUBTOTAL of Disbursements This Page (optional)..... 850.48

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 270 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TOM AND JOES RESTAURANT			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address 1201 13TH AVENUE			Amount of Each Disbursement this Period 82.42	
City ALTOONA	State PA	Zip Code 16601	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112557	
Purpose of Disbursement MEETING EXPENSE		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. JOHN STUCKEY FORD			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address 500 BROAD STREET			Amount of Each Disbursement this Period 66.78	
City HOLLIDAYSBURG	State PA	Zip Code 16648	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112559	
Purpose of Disbursement TRAVEL EXPENSE		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. FLUOR			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 403 E CAPITOL ST SE			Amount of Each Disbursement this Period 250.00	
City WASHINGTON	State DC	Zip Code 20003	<input type="checkbox"/> Memo Item Transaction ID : SB17.112501	
Purpose of Disbursement EVENT FACILITY RENTAL FEE		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	250.00
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 271 OF 323			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FORD CREDIT		Date of Disbursement
Mailing Address BOX 220564		<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2016"/>
City PITTSBURGH	State PA	Zip Code 15257
Purpose of Disbursement CAMPAIGN VEHICLE	<input type="text" value="001"/>	Amount of Each Disbursement this Period <input type="text" value="410.77"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112925
State: District:		

Full Name (Last, First, Middle Initial) B. FORD CREDIT		Date of Disbursement
Mailing Address BOX 220564		<input type="text" value="02"/> / <input type="text" value="12"/> / <input type="text" value="2016"/>
City PITTSBURGH	State PA	Zip Code 15257
Purpose of Disbursement CAMPAIGN VEHICLE	<input type="text" value="001"/>	Amount of Each Disbursement this Period <input type="text" value="410.77"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112074
State: District:		

Full Name (Last, First, Middle Initial) C. FORD CREDIT		Date of Disbursement
Mailing Address BOX 220564		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2016"/>
City PITTSBURGH	State PA	Zip Code 15257
Purpose of Disbursement CAMPAIGN VEHICLE	<input type="text" value="001"/>	Amount of Each Disbursement this Period <input type="text" value="410.77"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112942
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="1232.31"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**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 272 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRANKLIN CO REPUBLICAN COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016	
Mailing Address SUITE 293 SOUTH GATE MALL			Amount of Each Disbursement this Period 600.00	
City CHAMBERSBURG	State PA	Zip Code 17201	Memo Item <input type="checkbox"/>	
Purpose of Disbursement MEMBERSHIP DUES		Category/ Type 001	Transaction ID : SB17.111936	
Candidate Name FRANKLIN CO REPUBLICAN COMMITTEE	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) B. FRANKLIN FIRE COMPANY			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016	
Mailing Address 158 WEST KING STREET			Amount of Each Disbursement this Period 1185.00	
City CHAMBERSBURG	State PA	Zip Code 17201	Memo Item <input type="checkbox"/>	
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : SB17.112154	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
District:				

Full Name (Last, First, Middle Initial) C. GREATER WAYNESBORO CHAMBER OF COMMERCE			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address 5 ROADSIDE AVENUE			Amount of Each Disbursement this Period 180.00	
City WAYNESBORO	State PA	Zip Code 17268	Memo Item <input type="checkbox"/>	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.112560	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
District:				

SUBTOTAL of Disbursements This Page (optional).....	1965.00
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 273 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GREENE CO. REPUBLICAN COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016	
Mailing Address 970 MAPLETOWN ROAD			Amount of Each Disbursement this Period 280.00	
City GREENSBORO	State PA	Zip Code 15338	<input type="checkbox"/> Memo Item	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.112634	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ANDREW GROSSMAN			Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016	
Mailing Address 3714 LEYLAND DR			Amount of Each Disbursement this Period 280.92	
City MECHANICSBURG	State PA	Zip Code 17050	<input type="checkbox"/> Memo Item	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.112617	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. WAL-MART			Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016	
Mailing Address 702 SW 8TH ST			Amount of Each Disbursement this Period 26.12	
City BENTONVILLE	State AR	Zip Code 72716	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : SB17.112618	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	560.92
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 274 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANDREW GROSSMAN			Date of Disbursement MM / DD / YYYY 02 / 29 / 2016	
Mailing Address 3714 LEYLAND DR			Amount of Each Disbursement this Period 254.80	
City MECHANICSBURG	State PA	Zip Code 17050	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112619	
Purpose of Disbursement MILEAGE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. ANDREW GROSSMAN			Date of Disbursement MM / DD / YYYY 03 / 09 / 2016	
Mailing Address 3714 LEYLAND DR			Amount of Each Disbursement this Period 647.51	
City MECHANICSBURG	State PA	Zip Code 17050	<input type="checkbox"/> Memo Item Transaction ID : SB17.112537	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. ANDREW GROSSMAN			Date of Disbursement MM / DD / YYYY 03 / 09 / 2016	
Mailing Address 3714 LEYLAND DR			Amount of Each Disbursement this Period 528.08	
City MECHANICSBURG	State PA	Zip Code 17050	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112538	
Purpose of Disbursement MILEAGE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	647.51
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 275 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANDREW GROSSMAN			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2016	
Mailing Address 3714 LEYLAND DR			Amount of Each Disbursement this Period 859.99	
City MECHANICSBURG	State PA	Zip Code 17050	Memo Item <input type="checkbox"/>	
Purpose of Disbursement SEE MEMO ENTRIES		Category/Type 001		
Candidate Name			Transaction ID : SB17.112529	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ANDREW GROSSMAN			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2016	
Mailing Address 3714 LEYLAND DR			Amount of Each Disbursement this Period 677.60	
City MECHANICSBURG	State PA	Zip Code 17050	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement MILEAGE		Category/Type 001		
Candidate Name			Transaction ID : SB17.112530	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. STAPLES			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2016	
Mailing Address PLANK ROAD/ORCHARD PLAZA			Amount of Each Disbursement this Period 115.99	
City ALTOONA	State PA	Zip Code 16602	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement OFFICE SUPPLIES		Category/Type 001		
Candidate Name			Transaction ID : SB17.112531	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	859.99
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 276 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TARGET		Date of Disbursement
Mailing Address 153 SIERRA DRIVE		<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2016"/>
City ALTOONA	State PA	Zip Code 16603
Purpose of Disbursement OFFICE SUPPLIES	<input type="text" value="001"/>	Amount of Each Disbursement this Period <input type="text" value="18.18"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112532
State: District:		

Full Name (Last, First, Middle Initial) B. ANDREW GROSSMAN		Date of Disbursement
Mailing Address 3714 LEYLAND DR		<input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2016"/>
City MECHANICSBURG	State PA	Zip Code 17050
Purpose of Disbursement SEE MEMO ENTRIES	<input type="text" value="001"/>	Amount of Each Disbursement this Period <input type="text" value="754.54"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112832
State: District:		

Full Name (Last, First, Middle Initial) C. ANDREW GROSSMAN		Date of Disbursement
Mailing Address 3714 LEYLAND DR		<input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2016"/>
City MECHANICSBURG	State PA	Zip Code 17050
Purpose of Disbursement MILEAGE	<input type="text" value="001"/>	Amount of Each Disbursement this Period <input type="text" value="567.84"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112854
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="754.54"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**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 277 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address PO BOX 9001309		Amount of Each Disbursement this Period 68.00
City LOUISVILLE State KY Zip Code 40290	Purpose of Disbursement TELEPHONE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112855
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 525 ALLEGHENY STREET		Amount of Each Disbursement this Period 19.60
City HOLLIDAYSBURG State PA Zip Code 16648	Purpose of Disbursement POSTAGE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112856
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. HOLLIDAYSBURG AREA YMCA		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016
Mailing Address 1111 HEWITT STREET		Amount of Each Disbursement this Period 195.00
City HOLLIDAYSBURG State PA Zip Code 16648	Purpose of Disbursement ADVERTISING 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item Transaction ID : SB17.111937
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	195.00
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 278 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. HOLLIDAYSBURG AREA YMCA

Full Name (Last, First, Middle Initial)
Mailing Address 1111 HEWITT STREET

City HOLLIDAYSBURG State PA Zip Code 16648

Purpose of Disbursement
EVENT TICKETS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 23 / 2016

Amount of Each Disbursement this Period
500.00

Memo Item

Transaction ID : SB17.112521

B. HOME HELPERS

Full Name (Last, First, Middle Initial)
Mailing Address 911 S SCOTCH VALLEY RD STE D

City HOLLIDAYSBURG State PA Zip Code 16648

Purpose of Disbursement
EVENT TICKETS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 03 / 2016

Amount of Each Disbursement this Period
300.00

Memo Item

Transaction ID : SB17.111938

C. HOUCK'S QUALITY SERVICES

Full Name (Last, First, Middle Initial)
Mailing Address 191 CHERRYWOOD DR

City ALTOONA State PA Zip Code 16601

Purpose of Disbursement
OFFICE EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 11 / 2016

Amount of Each Disbursement this Period
650.00

Memo Item

Transaction ID : SB17.111863

SUBTOTAL of Disbursements This Page (optional)..... 1450.00

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 279 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HOUCK'S QUALITY SERVICES			Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016	
Mailing Address 191 CHERRYWOOD DR			Amount of Each Disbursement this Period 165.00	
City ALTOONA	State PA	Zip Code 16601	Memo Item <input type="checkbox"/>	
Purpose of Disbursement OFFICE EXPENSE		Category/ Type 001		
Candidate Name			Transaction ID : SB17.112635	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. I360			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address PO BOX 37046			Amount of Each Disbursement this Period 1717.64	
City BALTIMORE	State MD	Zip Code 21297	Memo Item <input type="checkbox"/>	
Purpose of Disbursement SOFTWARE		Category/ Type 001		
Candidate Name			Transaction ID : SB17.112561	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. I360			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016	
Mailing Address PO BOX 37046			Amount of Each Disbursement this Period 1968.39	
City BALTIMORE	State MD	Zip Code 21297	Memo Item <input type="checkbox"/>	
Purpose of Disbursement SOFTWARE		Category/ Type 001		
Candidate Name			Transaction ID : SB17.112844	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	3851.03
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 280 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. INDIANA COUNTRY CLUB			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016	
Mailing Address PO BOX 277			Amount of Each Disbursement this Period 873.41	
City INDIANA	State PA	Zip Code 15701	Memo Item <input type="checkbox"/>	
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : SB17.112845	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ISGCC			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016	
Mailing Address 824 INDIAN SPRINGS RD			Amount of Each Disbursement this Period 1750.27	
City INDIANA	State PA	Zip Code 15701	Memo Item <input type="checkbox"/>	
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : SB17.112156	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. JAFFA CIRCUS ADVERTISING			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016	
Mailing Address PO BOX 1984			Amount of Each Disbursement this Period 175.00	
City ALTOONA	State PA	Zip Code 16603	Memo Item <input type="checkbox"/>	
Purpose of Disbursement ADVERTISING		Category/ Type 001	Transaction ID : SB17.112158	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2798.68
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 281 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KEN WERTZ HAULING, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016
Mailing Address 2567 W LOOP RD		Amount of Each Disbursement this Period 120.00
City HOLLIDAYSBURG	State PA	
Zip Code 16648	Purpose of Disbursement OFFICE EXPENSE	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.111911
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. KEN WERTZ HAULING, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 2567 W LOOP RD		Amount of Each Disbursement this Period 240.00
City HOLLIDAYSBURG	State PA	
Zip Code 16648	Purpose of Disbursement OFFICE EXPENSE	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112566
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. EMILY KENDALL		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 566 MEADOW GROUND RD		Amount of Each Disbursement this Period 600.00
City MCCONNELLSBURG	State PA	
Zip Code 17233	Purpose of Disbursement FIELD CONSULTING	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112549
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	960.00
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 282 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EMILY KENDALL		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 566 MEADOW GROUND RD		Amount of Each Disbursement this Period 600.00
City MCCONNELLSBURG	State PA	
Zip Code 17233	Purpose of Disbursement FIELD CONSULTING	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112841
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. KIWANIS CLUB OF ALTOONA		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016
Mailing Address PO BOX 419		Amount of Each Disbursement this Period 125.00
City HOLLIDAYSBURG	State PA	
Zip Code 16648	Purpose of Disbursement EVENT TICKETS	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112087
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. KTAADN GROUP		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016
Mailing Address 850 29TH STREET		Amount of Each Disbursement this Period 130.91
City ALTOONA	State PA	
Zip Code 16601	Purpose of Disbursement OFFICE EQUIPMENT REPAIR	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.111865
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	855.91
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 283 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KTAADN GROUP		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 850 29TH STREET		Amount of Each Disbursement this Period 109.71
City ALTOONA	State PA Zip Code 16601	
Purpose of Disbursement OFFICE EQUIPMENT REPAIR	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Transaction ID : SB17.112846	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. EMILY KURTZ		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 368 HEUSTON RD		Amount of Each Disbursement this Period 67.65
City ROARING SPRING	State PA Zip Code 16673	
Purpose of Disbursement SEE MEMO ENTRIES	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Transaction ID : SB17.112524	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. EMILY KURTZ		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 368 HEUSTON RD		Amount of Each Disbursement this Period 8.85
City ROARING SPRING	State PA Zip Code 16673	
Purpose of Disbursement MILEAGE	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Transaction ID : SB17.112525	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	177.36
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 284 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 525 ALLEGHENY STREET		Amount of Each Disbursement this Period 58.80
City HOLLIDAYSBURG	State PA	
Zip Code 16648	Purpose of Disbursement POSTAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112526
State: District:		

Full Name (Last, First, Middle Initial) B. EMILY KURTZ		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 368 HEUSTON RD		Amount of Each Disbursement this Period 240.18
City ROARING SPRING	State PA	
Zip Code 16673	Purpose of Disbursement SEE MEMO ENTRIES	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112550
State: District:		

Full Name (Last, First, Middle Initial) C. WAL MART SUPERCENTER		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address WALMART PLAZA		Amount of Each Disbursement this Period 67.31
City ALTOONA	State PA	
Zip Code 16602	Purpose of Disbursement OFFICE SUPPLIES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112551
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	240.18
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 285 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EMILY KURTZ		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 368 HEUSTON RD		Amount of Each Disbursement this Period 172.87
City ROARING SPRING	State PA	
Zip Code 16673	Purpose of Disbursement MILEAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112552
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MADISON PROPERTIES LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2016
Mailing Address 946 LINCOLN WAY		Amount of Each Disbursement this Period 644.83
City CHAMBERSBURG	State PA	
Zip Code 17201	Purpose of Disbursement OFFICE RENT	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112206
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MADISON PROPERTIES LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address 946 LINCOLN WAY		Amount of Each Disbursement this Period 500.00
City CHAMBERSBURG	State PA	
Zip Code 17201	Purpose of Disbursement OFFICE RENT	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.112637
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1144.83
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 286 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MADISON PROPERTIES LLC			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 946 LINCOLN WAY			Amount of Each Disbursement this Period 500.00	
City CHAMBERSBURG	State PA	Zip Code 17201	Memo Item <input type="checkbox"/>	
Purpose of Disbursement OFFICE RENT		Category/ Type 001	Transaction ID : SB17.112943	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. MADISON PROPERTIES LLC			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2016	
Mailing Address 946 LINCOLN WAY			Amount of Each Disbursement this Period 500.00	
City CHAMBERSBURG	State PA	Zip Code 17201	Memo Item <input type="checkbox"/>	
Purpose of Disbursement OFFICE RENT		Category/ Type 001	Transaction ID : SB17.112520	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. MAVERICK FINANCE			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address 403 N SECOND STREET 2ND FL			Amount of Each Disbursement this Period 4000.00	
City HARRISBURG	State PA	Zip Code 17101	Memo Item <input type="checkbox"/>	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : SB17.111850	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	5000.00
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 287 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MAVERICK FINANCE			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016	
Mailing Address 403 N SECOND STREET 2ND FL			Amount of Each Disbursement this Period 4000.00	
City HARRISBURG	State PA	Zip Code 17101	Memo Item <input type="checkbox"/>	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001		
Candidate Name			Transaction ID : SB17.111940	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. MAVERICK FINANCE			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016	
Mailing Address 403 N SECOND STREET 2ND FL			Amount of Each Disbursement this Period 1033.11	
City HARRISBURG	State PA	Zip Code 17101	Memo Item <input type="checkbox"/>	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001		
Candidate Name			Transaction ID : SB17.112160	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. MAVERICK FINANCE			Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016	
Mailing Address 403 N SECOND STREET 2ND FL			Amount of Each Disbursement this Period 476.73	
City HARRISBURG	State PA	Zip Code 17101	Memo Item <input type="checkbox"/>	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001		
Candidate Name			Transaction ID : SB17.112638	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional)	5509.84
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 288 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MAVERICK FINANCE		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 403 N SECOND STREET 2ND FL		Amount of Each Disbursement this Period 6619.44
City HARRISBURG State PA Zip Code 17101	Purpose of Disbursement FUNDRAISING CONSULTING Category/Type 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112589
State: District:		

Full Name (Last, First, Middle Initial) B. MAVERICK FINANCE		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 403 N SECOND STREET 2ND FL		Amount of Each Disbursement this Period 848.53
City HARRISBURG State PA Zip Code 17101	Purpose of Disbursement FUNDRAISING CONSULTING Category/Type 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112503
State: District:		

Full Name (Last, First, Middle Initial) C. MAVERICK FINANCE		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2016
Mailing Address 403 N SECOND STREET 2ND FL		Amount of Each Disbursement this Period 3904.29
City HARRISBURG State PA Zip Code 17101	Purpose of Disbursement FUNDRAISING CONSULTING Category/Type 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112519
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11372.26
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 289 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MCCARTNEYS		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016
Mailing Address 819 HOWARD AVENUE PO BOX 1714		Amount of Each Disbursement this Period 493.96
City ALTOONA State PA Zip Code 16603	Purpose of Disbursement OFFICE SUPPLIES Category/Type 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111867
State: District:		

Full Name (Last, First, Middle Initial) B. MCCARTNEYS		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address 819 HOWARD AVENUE PO BOX 1714		Amount of Each Disbursement this Period 124.99
City ALTOONA State PA Zip Code 16603	Purpose of Disbursement OFFICE SUPPLIES Category/Type 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112639
State: District:		

Full Name (Last, First, Middle Initial) C. MENTZER MEDIA SERVICES INC		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2016
Mailing Address 210 W PENNSYLVANIA AVE STE 250		Amount of Each Disbursement this Period 143130.00
City TOWSON State MD Zip Code 21204	Purpose of Disbursement MEDIA BUY Category/Type 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112208
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	143748.95
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 290 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MENTZER MEDIA SERVICES INC			Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2016	
Mailing Address 210 W PENNSYLVANIA AVE STE 250			Amount of Each Disbursement this Period 53066.00	
City TOWSON	State MD	Zip Code 21204	<input type="checkbox"/> Memo Item	
Purpose of Disbursement MEDIA BUY		Category/ Type 001	Transaction ID : SB17.112484	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. MENTZER MEDIA SERVICES INC			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2016	
Mailing Address 210 W PENNSYLVANIA AVE STE 250			Amount of Each Disbursement this Period 65866.00	
City TOWSON	State MD	Zip Code 21204	<input type="checkbox"/> Memo Item	
Purpose of Disbursement MEDIA BUY		Category/ Type 001	Transaction ID : SB17.112916	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. MENTZER MEDIA SERVICES INC			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2016	
Mailing Address 210 W PENNSYLVANIA AVE STE 250			Amount of Each Disbursement this Period 74066.00	
City TOWSON	State MD	Zip Code 21204	<input type="checkbox"/> Memo Item	
Purpose of Disbursement MEDIA BUY		Category/ Type 001	Transaction ID : SB17.112917	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	192998.00
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 291 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TYLER MENZLER			Date of Disbursement MM / DD / YYYY 02 / 17 / 2016	
Mailing Address 701 THOMPSON AVE			Amount of Each Disbursement this Period 975.27	
City DONORA	State PA	Zip Code 15033	<input type="checkbox"/> Memo Item	
Purpose of Disbursement SEE MEMO ENTRIES		<input type="checkbox"/> Category/Type 001		
Candidate Name			Transaction ID : SB17.112162	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. TYLER MENZLER			Date of Disbursement MM / DD / YYYY 02 / 17 / 2016	
Mailing Address 701 THOMPSON AVE			Amount of Each Disbursement this Period 652.29	
City DONORA	State PA	Zip Code 15033	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement MILEAGE		<input type="checkbox"/> Category/Type 001		
Candidate Name			Transaction ID : SB17.112164	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. TYLER MENZLER			Date of Disbursement MM / DD / YYYY 03 / 24 / 2016	
Mailing Address 701 THOMPSON AVE			Amount of Each Disbursement this Period 580.61	
City DONORA	State PA	Zip Code 15033	<input type="checkbox"/> Memo Item	
Purpose of Disbursement SEE MEMO ENTRIES		<input type="checkbox"/> Category/Type 001		
Candidate Name			Transaction ID : SB17.112516	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1555.88
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 292 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address PO BOX 9001309		Amount of Each Disbursement this Period 148.29
City LOUISVILLE State KY Zip Code 40290	Purpose of Disbursement TELEPHONE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112517
State: District:		

Full Name (Last, First, Middle Initial) B. TYLER MENZLER		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address 701 THOMPSON AVE		Amount of Each Disbursement this Period 432.32
City DONORA State PA Zip Code 15033	Purpose of Disbursement MILEAGE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112518
State: District:		

Full Name (Last, First, Middle Initial) C. TEAL NITTERHOUSE		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 1785 FALLING SPRINGS ROAD		Amount of Each Disbursement this Period 136.48
City CHAMBERSBURG State PA Zip Code 17202	Purpose of Disbursement SEE MEMO ENTRIES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : SB17.112599
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	136.48
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 293 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TEAL NITTERHOUSE			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address 1785 FALLING SPRINGS ROAD			Amount of Each Disbursement this Period 116.48	
City CHAMBERSBURG	State PA	Zip Code 17202	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112600	
Purpose of Disbursement MILEAGE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. RONALD NOCCO			Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016	
Mailing Address 1416 PHILADELPHIA STREET			Amount of Each Disbursement this Period 417.37	
City INDIANA	State PA	Zip Code 15701	<input type="checkbox"/> Memo Item Transaction ID : SB17.111874	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. NRA FOUNDATION			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016	
Mailing Address 298 MORGANTOWN ST.			Amount of Each Disbursement this Period 500.00	
City UNIONTOWN	State PA	Zip Code 15401	<input type="checkbox"/> Memo Item Transaction ID : SB17.111912	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	917.37
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 294 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. NRA FOUNDATION

Full Name (Last, First, Middle Initial)
Mailing Address 298 MORGANTOWN ST.

City UNIONTOWN State PA Zip Code 15401

Purpose of Disbursement
EVENT TICKETS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 09 / 2016

Amount of Each Disbursement this Period
800.00

Memo Item

Transaction ID : SB17.112590

Category/Type: 001

B. ROGER OSBAUGH

Full Name (Last, First, Middle Initial)
Mailing Address 6575 ORPHANAGE RD.
WESLEY HOUSE APT. 205

City WAYNESBORO State PA Zip Code 17268

Purpose of Disbursement
SEE MEMO ENTRY

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 11 / 2016

Amount of Each Disbursement this Period
89.97

Memo Item

Transaction ID : SB17.111872

Category/Type: 001

C. DOLLAR GENERAL

Full Name (Last, First, Middle Initial)
Mailing Address 904 BLAIR ST

City HOLLIDAYSBURG State PA Zip Code 16648

Purpose of Disbursement
TELEPHONE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 11 / 2016

Amount of Each Disbursement this Period
89.97

Memo Item

Transaction ID : SB17.111873

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 889.97

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 295 OF 323	
	<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

Full Name (Last, First, Middle Initial) A. ROGER OSBAUGH		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 6575 ORPHANAGE RD. WESLEY HOUSE APT. 205		Amount of Each Disbursement this Period 59.98
City WAYNESBORO	State PA Zip Code 17268	
Purpose of Disbursement SEE MEMO ENTRY	Candidate Name	<input type="checkbox"/> Memo Item
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DOLLAR GENERAL		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 904 BLAIR ST		Amount of Each Disbursement this Period 59.98
City HOLLIDAYSBURG	State PA Zip Code 16648	
Purpose of Disbursement TELEPHONE	Candidate Name	<input checked="" type="checkbox"/> Memo Item
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PENELEC		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016
Mailing Address PO BOX 3687		Amount of Each Disbursement this Period 144.95
City AKRON	State OH Zip Code 44309	
Purpose of Disbursement UTILITIES	Candidate Name	<input type="checkbox"/> Memo Item
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	204.93
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 296 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PENELEC			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address PO BOX 3687			Amount of Each Disbursement this Period 46.36	
City AKRON	State OH	Zip Code 44309	Memo Item <input type="checkbox"/>	
Purpose of Disbursement UTILITIES		Category/ Type 001		
Candidate Name			Transaction ID : SB17.112088	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. PENN STATE ALTOONA ATHLETICS			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016	
Mailing Address 1419 12TH AVE			Amount of Each Disbursement this Period 500.00	
City ALTOONA	State PA	Zip Code 16601	Memo Item <input type="checkbox"/>	
Purpose of Disbursement ADVERTISING		Category/ Type 001		
Candidate Name			Transaction ID : SB17.111914	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. PEOPLES NATURAL GAS (PNG)			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address PO BOX 644760			Amount of Each Disbursement this Period 127.46	
City PITTSBURGH	State PA	Zip Code 15264	Memo Item <input type="checkbox"/>	
Purpose of Disbursement UTILITIES		Category/ Type 001		
Candidate Name			Transaction ID : SB17.112089	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	673.82
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 297 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PEOPLES NATURAL GAS (PNG)		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address PO BOX 644760		Amount of Each Disbursement this Period 123.72
City PITTSBURGH	State PA	
Zip Code 15264	Purpose of Disbursement UTILITIES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112591
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PEOPLES NATURAL GAS (PNG)		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address PO BOX 644760		Amount of Each Disbursement this Period 43.18
City PITTSBURGH	State PA	
Zip Code 15264	Purpose of Disbursement UTILITIES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112849
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. RACHAEL PICCIONE		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016
Mailing Address PO BOX 280		Amount of Each Disbursement this Period 1272.00
City MARTINSBURG	State PA	
Zip Code 16662	Purpose of Disbursement EVENT CATERING	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.111942
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1438.90
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 298 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANDREW POST			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2016	
Mailing Address 425 L ST NW #107			Amount of Each Disbursement this Period 1500.00	
City WASHINGTON	State DC	Zip Code 20001	Memo Item <input type="checkbox"/>	
Purpose of Disbursement FIELD CONSULTING		Category/Type 001		
Candidate Name			Transaction ID : SB17.111855	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. ANDREW POST			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2016	
Mailing Address 425 L ST NW #107			Amount of Each Disbursement this Period 7500.00	
City WASHINGTON	State DC	Zip Code 20001	Memo Item <input type="checkbox"/>	
Purpose of Disbursement FIELD CONSULTING		Category/Type 001		
Candidate Name			Transaction ID : SB17.111856	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. ANDREW POST			Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2016	
Mailing Address 425 L ST NW #107			Amount of Each Disbursement this Period 9000.00	
City WASHINGTON	State DC	Zip Code 20001	Memo Item <input type="checkbox"/>	
Purpose of Disbursement FIELD CONSULTING		Category/Type 001		
Candidate Name			Transaction ID : SB17.111916	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	18000.00
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 299 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANDREW POST			Date of Disbursement MM / DD / YYYY 02 / 03 / 2016	
Mailing Address 425 L ST NW #107			Amount of Each Disbursement this Period 411.47	
City WASHINGTON	State DC	Zip Code 20001	Memo Item <input type="checkbox"/>	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.111926	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. VERIZON			Date of Disbursement MM / DD / YYYY 02 / 03 / 2016	
Mailing Address PO BOX 15026			Amount of Each Disbursement this Period 59.86	
City ALBANY	State NY	Zip Code 12212	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : SB17.111927	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ANDREW POST			Date of Disbursement MM / DD / YYYY 02 / 03 / 2016	
Mailing Address 425 L ST NW #107			Amount of Each Disbursement this Period 225.12	
City WASHINGTON	State DC	Zip Code 20001	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement MILEAGE		Category/ Type 001	Transaction ID : SB17.111928	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	411.47
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 300 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TARGET		Date of Disbursement MM / DD / YYYY 02 / 03 / 2016
Mailing Address 153 SIERRA DRIVE		Amount of Each Disbursement this Period 10.40
City ALTOONA	State PA	
Zip Code 16603	Purpose of Disbursement OFFICE SUPPLIES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111930
State: District:		

Full Name (Last, First, Middle Initial) B. ANDREW POST		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 425 L ST NW #107		Amount of Each Disbursement this Period 434.25
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement SEE MEMO ENTRIES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112621
State: District:		

Full Name (Last, First, Middle Initial) C. AMAZON.COM		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 2646 RAINIER AVENUE S		Amount of Each Disbursement this Period 86.69
City SEATTLE	State WA	
Zip Code 98144	Purpose of Disbursement OFFICE SUPPLIES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112622
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	434.25
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 301 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TARGET		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 153 SIERRA DRIVE		Amount of Each Disbursement this Period 17.99
City ALTOONA State PA Zip Code 16603	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112623
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 525 ALLEGHENY STREET		Amount of Each Disbursement this Period 20.75
City HOLLIDAYSBURG State PA Zip Code 16648	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112625
State: District:		

Full Name (Last, First, Middle Initial) C. SHEETZ INC		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 5700 SIXTH AVENUE		Amount of Each Disbursement this Period 70.84
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112627
State: District:		

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 302 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANDREW POST		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address 425 L ST NW #107		Amount of Each Disbursement this Period 9000.00
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement FIELD CONSULTING	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112483
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ANDREW POST		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 425 L ST NW #107		Amount of Each Disbursement this Period 232.68
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement MILEAGE	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112485
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ANDREW POST		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address 425 L ST NW #107		Amount of Each Disbursement this Period 9000.00
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement STRATEGY CONSULTING	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.112656
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	18232.68
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 303 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PRECIOUS LIFE INC		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016
Mailing Address 1716 12TH AVENUE		Amount of Each Disbursement this Period 500.00
City ALTOONA	State PA Zip Code 16601	
Purpose of Disbursement EVENT TICKETS	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.111941
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. RAVINE		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016
Mailing Address 610 7TH ST		Amount of Each Disbursement this Period 1301.00
City ALTOONA	State PA Zip Code 16602	
Purpose of Disbursement PRINTING	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.112090
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. RAVINE		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address 610 7TH ST		Amount of Each Disbursement this Period 1473.00
City ALTOONA	State PA Zip Code 16602	
Purpose of Disbursement PRINTING	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.112642
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	3274.00
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 304 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RAVINE			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016		
Mailing Address 610 7TH ST			Amount of Each Disbursement this Period 184.00		
City ALTOONA	State PA	Zip Code 16602	<input type="checkbox"/> Memo Item Transaction ID : SB17.112593		
Purpose of Disbursement PRINTING		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. RED MAVERICK MEDIA LLC			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016		
Mailing Address 401 N. SECOND STREET			Amount of Each Disbursement this Period 2226.26		
City HARRISBURG	State PA	Zip Code 17101	<input type="checkbox"/> Memo Item Transaction ID : SB17.112091		
Purpose of Disbursement ROBO CALLS		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. RED MAVERICK MEDIA LLC			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016		
Mailing Address 401 N. SECOND STREET			Amount of Each Disbursement this Period 10068.00		
City HARRISBURG	State PA	Zip Code 17101	<input type="checkbox"/> Memo Item Transaction ID : SB17.112161		
Purpose of Disbursement ROBO CALLS		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	12478.26
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 305 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RED MAVERICK MEDIA LLC			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 401 N. SECOND STREET			Amount of Each Disbursement this Period 52103.44	
City HARRISBURG	State PA	Zip Code 17101	<input type="checkbox"/> Memo Item	
Purpose of Disbursement MEDIA BUY		Category/Type 001		
Candidate Name			Transaction ID : SB17.112505	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. ROARING SPRING BOTTLING			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016	
Mailing Address PO BOX 97			Amount of Each Disbursement this Period 94.05	
City ROARING SPRINGS	State PA	Zip Code 16673	<input type="checkbox"/> Memo Item	
Purpose of Disbursement BOTTLED WATER		Category/Type 001		
Candidate Name			Transaction ID : SB17.112850	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. S&T BANK			Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2016	
Mailing Address 1100 LOGAN BLVD			Amount of Each Disbursement this Period 80.00	
City ALTOONA	State PA	Zip Code 16602	<input type="checkbox"/> Memo Item	
Purpose of Disbursement BANK FEES		Category/Type 001		
Candidate Name			Transaction ID : SB17.112926	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	52277.49
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 306 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SAMS CLUB		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address PO BOX 9001907		Amount of Each Disbursement this Period 45.00
City LOUISVILLE State KY Zip Code 40290	Purpose of Disbursement MEMBERSHIP DUES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/> Transaction ID : SB17.112596
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. EVAN SHIRCLIFFE		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 103 BROOKSIDE AVE #4		Amount of Each Disbursement this Period 750.00
City SHIPPENSBURG State PA Zip Code 17257	Purpose of Disbursement FIELD CONSULTING 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/> Transaction ID : SB17.112553
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. EVAN SHIRCLIFFE		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 103 BROOKSIDE AVE #4		Amount of Each Disbursement this Period 750.00
City SHIPPENSBURG State PA Zip Code 17257	Purpose of Disbursement FIELD CONSULTING 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/> Transaction ID : SB17.112842
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1545.00
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 307 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STATE FARM INSURANCE		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 715 LEXINGTON AVENUE		Amount of Each Disbursement this Period 475.00
City ALTOONA	State PA Zip Code 16601	
Purpose of Disbursement INSURANCE	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Transaction ID : SB17.112598	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. STELTEK GRAPHICS INC		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016
Mailing Address ONE CORPORATE DRIVE SUITE 105		Amount of Each Disbursement this Period 1891.14
City BEDFORD	State PA Zip Code 15522	
Purpose of Disbursement PRINTING	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Transaction ID : SB17.111851	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MR. WILLIAM STRAESSER		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016
Mailing Address PO BOX 1023		Amount of Each Disbursement this Period 1830.75
City ALTOONA	State PA Zip Code 16603	
Purpose of Disbursement SEE MEMO ENTRIES	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Transaction ID : SB17.111879	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4196.89
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 308 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. WILLIAM STRAESSER			Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016	
Mailing Address PO BOX 1023			Amount of Each Disbursement this Period 1224.16	
City ALTOONA	State PA	Zip Code 16603	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.111880	
Purpose of Disbursement MILEAGE		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. STAPLES			Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016	
Mailing Address PLANK ROAD/ORCHARD PLAZA			Amount of Each Disbursement this Period 105.98	
City ALTOONA	State PA	Zip Code 16602	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.111882	
Purpose of Disbursement OFFICE SUPPLIES		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. USPS			Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016	
Mailing Address 525 ALLEGHENY STREET			Amount of Each Disbursement this Period 31.49	
City HOLLIDAYSBURG	State PA	Zip Code 16648	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.111883	
Purpose of Disbursement POSTAGE		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

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 309 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. WILLIAM STRAESSER			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016	
Mailing Address PO BOX 1023			Amount of Each Disbursement this Period 2078.58	
City ALTOONA	State PA	Zip Code 16603	Memo Item <input type="checkbox"/>	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.111944	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. MR. WILLIAM STRAESSER			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016	
Mailing Address PO BOX 1023			Amount of Each Disbursement this Period 867.44	
City ALTOONA	State PA	Zip Code 16603	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement MILEAGE		Category/ Type 001	Transaction ID : SB17.111945	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. USPS			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016	
Mailing Address 525 ALLEGHENY STREET			Amount of Each Disbursement this Period 185.14	
City HOLLIDAYSBURG	State PA	Zip Code 16648	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement POSTAGE		Category/ Type 001	Transaction ID : SB17.111950	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2078.58
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 310 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement MM / DD / YYYY 02 / 03 / 2016
Mailing Address PLANK ROAD/ORCHARD PLAZA		Amount of Each Disbursement this Period 64.17
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement OFFICE SUPPLIES Category/Type 001	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111951
State: District:		

Full Name (Last, First, Middle Initial) B. LIFE 30:19		Date of Disbursement MM / DD / YYYY 02 / 03 / 2016
Mailing Address 540 E WASHINGTON ST		Amount of Each Disbursement this Period 250.00
City CHAMBERSBURG State PA Zip Code 17201	Purpose of Disbursement DONATION Category/Type 012	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111954
State: District:		

Full Name (Last, First, Middle Initial) C. SHEETZ INC		Date of Disbursement MM / DD / YYYY 02 / 03 / 2016
Mailing Address 5700 SIXTH AVENUE		Amount of Each Disbursement this Period 150.00
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement GIFTS Category/Type 001	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111956
State: District:		

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 311 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TOM AND JOES RESTAURANT			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016		
Mailing Address 1201 13TH AVENUE			Amount of Each Disbursement this Period 26.10		
City ALTOONA	State PA	Zip Code 16601	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.111957		
Purpose of Disbursement MEETING EXPENSE		001 Category/Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. MR. WILLIAM STRAESSER			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016		
Mailing Address PO BOX 1023			Amount of Each Disbursement this Period 1638.65		
City ALTOONA	State PA	Zip Code 16603	<input type="checkbox"/> Memo Item Transaction ID : SB17.112607		
Purpose of Disbursement SEE MEMO ENTRIES		001 Category/Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. MR. WILLIAM STRAESSER			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016		
Mailing Address PO BOX 1023			Amount of Each Disbursement this Period 154.00		
City ALTOONA	State PA	Zip Code 16603	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112608		
Purpose of Disbursement MILEAGE		001 Category/Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	1638.65
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 312 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CARLIN AND ASSOCIATES INSURANCE		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address PO BOX 1269		Amount of Each Disbursement this Period 133.25
City ALTOONA State PA Zip Code 16603	Purpose of Disbursement INSURANCE	
Candidate Name	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112609
State: District:		

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address PLANK ROAD/ORCHARD PLAZA		Amount of Each Disbursement this Period 124.01
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement STAPLES	
Candidate Name	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112610
State: District:		

Full Name (Last, First, Middle Initial) C. SAMS CLUB		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address PO BOX 9001907		Amount of Each Disbursement this Period 86.63
City LOUISVILLE State KY Zip Code 40290	Purpose of Disbursement EVENT SUPPLIES	
Candidate Name	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112611
State: District:		

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 313 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 525 ALLEGHENY STREET		Amount of Each Disbursement this Period 198.80
City HOLLIDAYSBURG	State PA	
Zip Code 16648	Purpose of Disbursement POSTAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/Type	Transaction ID : SB17.112612
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. EVERETT VARSITY BOYS SOCCER BOOSTER		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 1180 PITTMAN HOLLOW RD		Amount of Each Disbursement this Period 140.00
City EVERETT	State PA	
Zip Code 15537	Purpose of Disbursement EVENT TICKETS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/Type	Transaction ID : SB17.112615
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. HUNTINGDON COUNTY GOP		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address PO BOX 61		Amount of Each Disbursement this Period 250.00
City HUNTINGDON	State PA	
Zip Code 16652	Purpose of Disbursement EVENT TICKETS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/Type	Transaction ID : SB17.112616
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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 314 OF 323			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. WILLIAM STRAESSER			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016	
Mailing Address PO BOX 1023			Amount of Each Disbursement this Period 2133.12	
City ALTOONA	State PA	Zip Code 16603	<input type="checkbox"/> Memo Item	
Purpose of Disbursement SEE MEMO ENTRIES		<input type="checkbox"/> 001 Category/ Type		
Candidate Name			Transaction ID : SB17.112853	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. MR. WILLIAM STRAESSER			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016	
Mailing Address PO BOX 1023			Amount of Each Disbursement this Period 280.00	
City ALTOONA	State PA	Zip Code 16603	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement MILEAGE		<input type="checkbox"/> 001 Category/ Type		
Candidate Name			Transaction ID : SB17.112863	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. BLACK DOG COFFEE & CATERING			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016	
Mailing Address 519 ALLEGHENY STREET			Amount of Each Disbursement this Period 46.31	
City HOLLIDAYSBURG	State PA	Zip Code 16648	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement MEETING EXPENSE		<input type="checkbox"/> 001 Category/ Type		
Candidate Name			Transaction ID : SB17.112865	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2133.12
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 315 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DUCKS UNLIMITED		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 21 BRANDT BLVD		Amount of Each Disbursement this Period 100.00
City LANDISVILLE	State PA	
Zip Code 17538	Purpose of Disbursement EVENT TICKETS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112871
State: District:		

Full Name (Last, First, Middle Initial) B. WAL-MART		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 702 SW 8TH ST		Amount of Each Disbursement this Period 50.33
City BENTONVILLE	State AR	
Zip Code 72716	Purpose of Disbursement OFFICE SUPPLIES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112873
State: District:		

Full Name (Last, First, Middle Initial) C. SHEETZ INC		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 5700 SIXTH AVENUE		Amount of Each Disbursement this Period 256.40
City ALTOONA	State PA	
Zip Code 16602	Purpose of Disbursement EVENT SUPPLIES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112879
State: District:		

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 316 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 525 ALLEGHENY STREET		Amount of Each Disbursement this Period 20.93
City HOLLIDAYSBURG	State PA	
Zip Code 16648	Purpose of Disbursement POSTAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112882
State: District:		

Full Name (Last, First, Middle Initial) B. BLAIR COUNTY REPUBLICAN PARTY		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 301 UNION AVE. #364		Amount of Each Disbursement this Period 50.00
City ALTOONA	State PA	
Zip Code 16602	Purpose of Disbursement ADVERTISING	<input checked="" type="checkbox"/> Memo Item
Candidate Name BLAIR COUNTY REPUBLICAN PARTY	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112885
State: District:		

Full Name (Last, First, Middle Initial) C. HUNTINGDON COUNTY GOP		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address PO BOX 61		Amount of Each Disbursement this Period 300.00
City HUNTINGDON	State PA	
Zip Code 16652	Purpose of Disbursement EVENT TICKETS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112886
State: District:		

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 317 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EVERETT VARSITY BOYS SOCCER BOOSTER			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016	
Mailing Address 1180 PITTMAN HOLLOW RD			Amount of Each Disbursement this Period 250.00	
City EVERETT	State PA	Zip Code 15537	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112887	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. TOM AND JOES RESTAURANT			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016	
Mailing Address 1201 13TH AVENUE			Amount of Each Disbursement this Period 25.60	
City ALTOONA	State PA	Zip Code 16601	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.112897	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. THE DUQUESNE CLUB			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 325 6TH AVE			Amount of Each Disbursement this Period 3957.87	
City PITTSBURGH	State PA	Zip Code 15222	<input type="checkbox"/> Memo Item Transaction ID : SB17.112496	
Purpose of Disbursement EVENT CATERING		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	3957.87
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 318 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE TARRANCE GROUP, INC.			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016		
Mailing Address 201 NORTH UNION STREET SUITE 410			Amount of Each Disbursement this Period 21576.00		
City ALEXANDRIA	State VA	Zip Code 22314	Memo Item <input type="checkbox"/>		
Purpose of Disbursement POLLING		Category/ Type 001			
Candidate Name			Transaction ID : SB17.112603		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. THE TARRANCE GROUP, INC.			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016		
Mailing Address 201 NORTH UNION STREET SUITE 410			Amount of Each Disbursement this Period 17168.00		
City ALEXANDRIA	State VA	Zip Code 22314	Memo Item <input type="checkbox"/>		
Purpose of Disbursement POLLING		Category/ Type 001			
Candidate Name			Transaction ID : SB17.112851		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. THE UNION LEAGUE OF PHILADELPHIA			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016		
Mailing Address 140 S BROAD ST			Amount of Each Disbursement this Period 2410.24		
City PHILADELPHIA	State PA	Zip Code 19102	Memo Item <input type="checkbox"/>		
Purpose of Disbursement EVENT CATERING		Category/ Type 001			
Candidate Name			Transaction ID : SB17.112852		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	41154.24
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 319 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TUSCARORA AREA CHAMBER OF COMMERCE			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2016	
Mailing Address 19 NORTH MAIN STREET PO BOX 161			Amount of Each Disbursement this Period 250.00	
City MERCERSBURG	State PA	Zip Code 17236	Memo Item <input type="checkbox"/>	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.111852	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. UNITED WAY OF BLAIR COUNTY			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 5414 6TH AVE			Amount of Each Disbursement this Period 360.00	
City ALTOONAP	State PA	Zip Code 16602	Memo Item <input type="checkbox"/>	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.112507	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address PO BOX 15026			Amount of Each Disbursement this Period 870.60	
City ALBANY	State NY	Zip Code 12212	Memo Item <input type="checkbox"/>	
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : SB17.111853	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1480.60
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 320 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016
Mailing Address PO BOX 15026		Amount of Each Disbursement this Period 142.44
City ALBANY State NY Zip Code 12212	Purpose of Disbursement TELEPHONE 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.111943
State: District:		

Full Name (Last, First, Middle Initial) B. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address PO BOX 15026		Amount of Each Disbursement this Period 147.46
City ALBANY State NY Zip Code 12212	Purpose of Disbursement TELEPHONE 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112645
State: District:		

Full Name (Last, First, Middle Initial) C. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address PO BOX 15026		Amount of Each Disbursement this Period 2053.72
City ALBANY State NY Zip Code 12212	Purpose of Disbursement TELEPHONE 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.112604
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2343.62
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 321 OF 323			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON			Date of Disbursement MM / DD / YYYY 03 / 23 / 2016	
Mailing Address PO BOX 15026			Amount of Each Disbursement this Period 744.14	
City ALBANY	State NY	Zip Code 12212	Memo Item <input type="checkbox"/>	
Purpose of Disbursement TELEPHONE		Category/Type 001		
Candidate Name		Transaction ID : SB17.112514		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. VERIZON			Date of Disbursement MM / DD / YYYY 03 / 23 / 2016	
Mailing Address PO BOX 15026			Amount of Each Disbursement this Period 142.44	
City ALBANY	State NY	Zip Code 12212	Memo Item <input type="checkbox"/>	
Purpose of Disbursement INTERNET		Category/Type 001		
Candidate Name		Transaction ID : SB17.112515		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. WASHINGTON COUNTY REPUBLICAN PARTY			Date of Disbursement MM / DD / YYYY 02 / 12 / 2016	
Mailing Address 61 MCKENNAN AVE.			Amount of Each Disbursement this Period 600.00	
City WASHINGTON	State PA	Zip Code 15301	Memo Item <input type="checkbox"/>	
Purpose of Disbursement ADVERTISING		Category/Type 001		
Candidate Name WASHINGTON COUNTY REPUBLICAN PARTY		Transaction ID : SB17.112093		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	1486.58
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 322 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. WELL DUNN CATERING

Full Name (Last, First, Middle Initial)
Mailing Address 513 MORSE STREET NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 09 / 2016

Amount of Each Disbursement this Period: 353.00

Memo Item

Transaction ID : SB17.112606

B. YMCA OF INDIANA COUNTY

Full Name (Last, First, Middle Initial)
Mailing Address 60 N BEN FRANKLIN RD

City INDIANA State PA Zip Code 15701

Purpose of Disbursement ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 12 / 2016

Amount of Each Disbursement this Period: 200.00

Memo Item

Transaction ID : SB17.112085

C. YMCA OF INDIANA COUNTY

Full Name (Last, First, Middle Initial)
Mailing Address 60 N BEN FRANKLIN RD

City INDIANA State PA Zip Code 15701

Purpose of Disbursement ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 15 / 2016

Amount of Each Disbursement this Period: 250.00

Memo Item

Transaction ID : SB17.112502

SUBTOTAL of Disbursements This Page (optional) 803.00

TOTAL This Period (last page this line number only) 718017.58

**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 323 OF 323	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MALISSA R TUTINO		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 3031 WILMINGTON RD.		Amount of Each Disbursement this Period 1900.00
City NEW CASTLE	State PA	
Purpose of Disbursement CONTRIBUTION REFUND	Zip Code 16105	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB20A.112847
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1900.00
TOTAL This Period (last page this line number only).....	1900.00