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**FEC  
FORM 3X**

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

Office Use Only

1. NAME OF COMMITTEE (In full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5  
SHEETZ POLITICAL ACTION COMMITTEE (SHEETZ PAC)

ADDRESS (number and street) 5700 SIXTH AVE  
 Check if different than previously reported. (ACC) ALTOONA PA 16602

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
000219121

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

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on MM / DD / YYYY in the State of    
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on MM / DD / YYYY in the State of  

5. Covering Period MM / DD / YYYY through MM / DD / YYYY  
07 / 01 / 2009 through 12 / 31 / 2009

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

Type or Print Name of Treasurer STANTON R. SHEETZ

Signature of Treasurer 

Date MM / DD / YYYY  
01 / 29 / 2010

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

Office Use Only									
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**FEC FORM 3X**  
Rev. 12/2004

10030240879

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SHEETZ Political Action Committee (Sheetz Pac)

Report Covering the Period: From:    To:

**COLUMN A  
This Period**

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

6. (a) Cash on Hand January 1, <input type="text" value="2009"/>	<input type="text" value="23725.55"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="29148.05"/>
(c) Total Receipts (from Line 19).....	<input type="text" value="10172.50"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="39320.55"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="43071.91"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="99864"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0000"/>
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0000"/>

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

**For further information contact:**

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

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

10030240880

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

*SHEETZ PAC*

Report Covering the Period: From:

MM ' DD ' YYYY  
07 ' 01 ' 2009

To:

MM ' DD ' YYYY  
12 ' 31 ' 2009

**I. Receipts**

**COLUMN A**  
Total This Period

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

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees  
(i) Itemized (use Schedule A).....

8,190.00

16,380.00

(ii) Unitemized.....

1,982.50

3,965.00

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

10,172.50

20,345.00

(b) Political Party Committees.....

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

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

10,172.50

20,345.00

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

10,172.50

20,345.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

10,172.50

20,345.00

10030240881

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

**II. Disbursements**

**COLUMN A**  
Total This Period

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

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	377,500.00	414,000.00
24. Independent Expenditures (use Schedule E).....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements .....	571.91	1,671.91
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	3,832,191	4,307,191
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3,832,191	4,307,191

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	10,172.50	20,345.00
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10,172.50	20,345.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....		
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....		

10030240883

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

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

FOR LINE NUMBER: PAGE 6 OF 15  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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)  
**SHEETZ Political Action Committee (SHEETZ PAC)**

A. Full Name (Last, First, Middle Initial)  
**SHEETZ, Stephen G.**  
 Mailing Address  
**3511 Shawnee Ave.**  
 City **Altamora** State **PA** Zip Code **16602**  
 Name of Employer **Sheetz, Inc.** Occupation **Chairman**  
 Receipt For:  
 Primary  General  
 Other (specify) **Payroll deduction**  
 Aggregate Year-to-Date **26.00.00**  
 FEC ID number of contributing federal political committee. **C**

Date of Receipt **7/9, 7/21, 8/7, 8/21, 9/4, 9/18, 10/2, 10/16, 10/30, 11/13, 11/25, 12/10, 12/21**  
 Amount of Each Receipt this Period **1,300.00**

B. Full Name (Last, First, Middle Initial)  
**Sheetz, G. Robert**  
 Mailing Address  
**1900 Royal Palm Way**  
 City **Boca RATON** State **FL** Zip Code **33432**  
 Name of Employer **Sheetz, Inc.** Occupation **Vice-Chairman**  
 Receipt For:  
 Primary  General  
 Other (specify) **Payroll deduction**  
 Aggregate Year-to-Date **2600.00**  
 FEC ID number of contributing federal political committee. **C**

Date of Receipt **as above**  
 Amount of Each Receipt this Period **1,300.00**

C. Full Name (Last, First, Middle Initial)  
**Sheetz, Stanton R.**  
 Mailing Address  
**191 Scenic Pine Drive**  
 City **Holidaysburg** State **PA** Zip Code **16648**  
 Name of Employer **Sheetz, Inc.** Occupation **President/CEO**  
 Receipt For:  
 Primary  General  
 Other (specify) **Payroll deduction**  
 Aggregate Year-to-Date **26.00.00**  
 FEC ID number of contributing federal political committee. **C**

Date of Receipt **as above**  
 Amount of Each Receipt this Period **1,300.00**

SUBTOTAL of Receipts This Page (optional) **39,00.00**  
 TOTAL This Period (last page this line number only)

10030240884

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**SHEETZ Political Action Committee (SHEETZ PAC)**

A. Full Name (Last, First, Middle Initial)  
**McMAHON, Wm. DANIEL**

Mailing Address  
**521 Summit St.**

City **Gallitzin** State **PA** Zip Code **16641**

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

Name of Employer **Sheetz, Inc.** Occupation **EVP - Operations**

Receipt For:  
 Primary  General  
 Other (specify) **Payroll deduction**

Aggregate Year-to-Date **1,300.00**

Date of Receipt **7/9, 7/21, 8/7, 8/21, 9/4, 9/18, 10/2, 10/16, 10/30, 11/13, 11/25, 12/10, 12/21**

Amount of Each Receipt this Period **650.00**

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

Mailing Address  
**301 Cardinal Drive**

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

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

Name of Employer **Sheetz, Inc.** Occupation **EVP - FINANCE**

Receipt For:  
 Primary  General  
 Other (specify) **Payroll deduction**

Aggregate Year-to-Date **1,300.00**

Date of Receipt **as above**

Amount of Each Receipt this Period **650.00**

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

Mailing Address  
**RR2 Box 352**

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

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

Name of Employer **Sheetz Inc.** Occupation **EVP - Marketing**

Receipt For:  
 Primary  General  
 Other (specify) **Payroll deduction**

Aggregate Year-to-Date **1,040.00**

Date of Receipt **as above**

Amount of Each Receipt this Period **520.00**

SUBTOTAL of Receipts This Page (optional)..... **1,820.00**

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

10030240885

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

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

FOR LINE NUMBER: PAGE 8 OF 15  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**SHEETZ Political Action Committee (SHEETZ PAC)**

A. Full Name (Last, First, Middle Initial)  
**Cortez, R. Michael**  
 Mailing Address  
**3312 Broad Ave.**  
 City  
**Altoona** State  
**PA** Zip Code  
**16602**  
 FEC ID number of contributing federal political committee.  
**C**  
 Name of Employer  
**Sheetz, Inc.** Occupation  
**VP - Legal Counsel**  
 Receipt For:  
 Primary  General  
 Other (specify) **Payroll deduction**  
 Aggregate Year-to-Date  
**780.00**

Date of Receipt  
**7/9, 7/21, 8/7, 8/21, 9/4, 9/18, 10/2, 10/16, 10/30, 11/13, 11/25, 12/1, 12/21**  
 Amount of Each Receipt this Period  
**390.00**

B. Full Name (Last, First, Middle Initial)  
**Cyman, Richard**  
 Mailing Address  
**370 CANARY Drive**  
 City  
**Hollidaysburg** State  
**PA** Zip Code  
**16648**  
 FEC ID number of contributing federal political committee.  
**C**  
 Name of Employer  
**Sheetz, Inc.** Occupation  
**VP - Facilities**  
 Receipt For:  
 Primary  General  
 Other (specify) **Payroll deduction**  
 Aggregate Year-to-Date  
**780.00**

Date of Receipt  
**as above**  
 Amount of Each Receipt this Period  
**390.00**

C. Full Name (Last, First, Middle Initial)  
**LORENZ, Michael**  
 Mailing Address  
**230 Millview Drive**  
 City  
**Pittsburgh** State  
**PA** Zip Code  
**15238**  
 FEC ID number of contributing federal political committee.  
**C**  
 Name of Employer  
**Sheetz, Inc.** Occupation  
**EVP - Petroleum**  
 Receipt For:  
 Primary  General  
 Other (specify) **Payroll deduction**  
 Aggregate Year-to-Date  
**780.00**

Date of Receipt  
**as above**  
 Amount of Each Receipt this Period  
**390.00**

SUBTOTAL of Receipts This Page (optional).....▶ **1,170.00**  
 TOTAL This Period (last page this line number only).....▶

10030240886



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

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 15	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
**SHEETZ Political Action Committee (SHEETZ PAC)**

A. Full Name (Last, First, Middle Initial)  
**Ryan, Raymond**

Mailing Address  
**1155 St. Augustine Road**

City **Dysart** State **PA** Zip Code **16636**

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

Name of Employer **Sheetz, Inc.** Occupation **Exp. Distribution Services**

Receipt For:  
 Primary  General  
 Other (specify) **Payroll deduction**

Aggregate Year-to-Date **780.00**

Date of Receipt **7/9, 7/21, 8/7, 8/21, 9/4, 9/18, 10/2, 10/16, 10/30, 11/13, 11/25, 12/16, 12/21**

Amount of Each Receipt this Period **390.00**

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

Mailing Address  
**156 Elm St.**

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

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

Name of Employer **Sheetz, Inc.** Occupation **VP-Operations**

Receipt For:  
 Primary  General  
 Other (specify) **Payroll deduction**

Aggregate Year-to-Date **780.00**

Date of Receipt **as above**

Amount of Each Receipt this Period **390.00**

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

Mailing Address  
**RR 4 Box 179B**

City **Altoona** State **PA** Zip Code **16601**

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

Name of Employer **Sheetz, Inc.** Occupation **Director-Finance/Accounting**

Receipt For:  
 Primary  General  
 Other (specify) **Payroll deduction**

Aggregate Year-to-Date **520.00**

Date of Receipt **as above**

Amount of Each Receipt this Period **260.00**

SUBTOTAL of Receipts This Page (optional)..... **1,040.00**

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

10030240887

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

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

FOR LINE NUMBER: PAGE 10 OF 15  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**SHEETZ Political Action Committee (SHEETZ PAC)**

A. Full Name (Last, First, Middle Initial)  
**Weger, Jerry**  
 Mailing Address  
**505 Clearview Drive**  
 City **Hollidaysburg** State **PA** Zip Code **16648**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **Sheetz, Inc.** Occupation **Director - Tobacco Sales**  
 Receipt For:  
 Primary  General  
 Other (specify) **Payroll deduction**  
 Aggregate Year-to-Date **520.00**

Date of Receipt **7/9, 7/21, 8/7, 8/21, 9/4, 9/18, 10/2, 10/16, 10/30, 11/13, 11/25, 12/10, 12/21**  
 Amount of Each Receipt this Period  
**260.00**

B. Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date

Date of Receipt  
 Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date

Date of Receipt  
 Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional) **260.00**  
**TOTAL** This Period (last page this line number only) **8190.00**

10030240888

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 15

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

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NAME OF COMMITTEE (In Full)

*SHEETZ Political Action Committee (Sheetz PAC)*

Full Name (Last, First, Middle Initial)

A. *NATIONAL Republican Congressional Committee  
% Mike DeVanney*

Date of Disbursement

MM ' DD ' YYYY  
07 ' 11 ' 2009

Mailing Address

*4700 Ellsworth Ave. #3*

City

*Pittsburgh*

State

*PA*

Zip Code

*15213*

Purpose of Disbursement

*7/13/09 - Roundtable Event*

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

5000.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. *Toomey For SENATE*

Date of Disbursement

MM ' DD ' YYYY  
07 ' 14 ' 2009

Mailing Address

*8623 Lexington Place*

City

*Wexford*

State

*PA*

Zip Code

*15090*

Purpose of Disbursement

*7/16/09 - Dinner/Fundraiser*

Candidate Name

*Toomey*

Category/  
Type

Amount of Each Disbursement this Period

1500.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: *PA*

District:

Full Name (Last, First, Middle Initial)

C. *TOM CORBETT FOR GOVERNOR*

Date of Disbursement

MM ' DD ' YYYY  
08 ' 04 ' 2009

Mailing Address

*PO Box 186*

City

*Sewickley*

State

*PA*

Zip Code

*15143*

Purpose of Disbursement

*8/12/09 - Fundraiser*

Candidate Name

*TOM CORBETT*

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: *PA*

District:

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

7500.00

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

10030240889

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

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

FOR LINE NUMBER: (check only one)

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

PAGE 12 OF 15

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NAME OF COMMITTEE (In Full)  
**SHEETZ Political Action Committee (SHEETZ PAC)**

A. **Friends of Joseph SCARNATI**  
 Mailing Address: **PO Box 177**  
 City: **Brockway** State: **PA** Zip Code: **15824**  
 Purpose of Disbursement: **Contribution**  
 Candidate Name: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: **PA** District: \_\_\_\_\_

Date of Disbursement: **08' 04' 2009**

Amount of Each Disbursement this Period: **2500.00**

B. **Friends of Dominic Pileggi**  
 Mailing Address: **101 W. BALTIMORE Ave. 2nd Floor**  
 City: **Media** State: **PA** Zip Code: **19063**  
 Purpose of Disbursement: **Contribution**  
 Candidate Name: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: **PA** District: \_\_\_\_\_

Date of Disbursement: **08' 04' 2009**

Amount of Each Disbursement this Period: **1000.00**

C. **RAFFERTY FOR SENATE**  
 Mailing Address: **PO Box 436**  
 City: **Worcester** State: **PA** Zip Code: **19490**  
 Purpose of Disbursement: **Contribution**  
 Candidate Name: **John RAFFERTY**  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: **PA** District: \_\_\_\_\_

Date of Disbursement: **08' 04' 2009**

Amount of Each Disbursement this Period: **2000.00**

SUBTOTAL of Disbursements This Page (optional)..... **5500.00**

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

10030240890

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 15

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

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NAME OF COMMITTEE (In Full)

*SHEETZ Political Action Committee (Sheetz PAC)*

Full Name (Last, First, Middle Initial)

A. *LOGAN FOR SENATE*

Date of Disbursement

*08' 04' 2009*

Mailing Address

*PO Box 935*

City

*Monroeville*

State

*PA*

Zip Code

*15146-0935*

Purpose of Disbursement

*Contribution*

Candidate Name

*Sean Logan*

Category/  
Type

Amount of Each Disbursement this Period

*750.00*

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: *PA*

District:

Full Name (Last, First, Middle Initial)

B. *I LIKE EICH*

Date of Disbursement

*08' 04' 2009*

Mailing Address

*643 Hillside View Dr.*

City

*Duncansville*

State

*PA*

Zip Code

*16635*

Purpose of Disbursement

*Contribution*

Candidate Name

*Sen. John Eichelberger*

Category/  
Type

Amount of Each Disbursement this Period

*500.00*

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: *PA*

District:

Full Name (Last, First, Middle Initial)

C. *CHAMBER PAC*

Date of Disbursement

*09' 28' 2009*

Mailing Address

*417 Walnut St.*

City

*Harrisburg*

State

*PA*

Zip Code

*17101*

Purpose of Disbursement

*Membership dues*

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

*1,000.00*

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

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

*3,250.00*

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

10030240891

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

SHEETZ Political Action Committee (SHEETZ PAC)

Full Name (Last, First, Middle Initial)

A. Republican Party of PA % Bob Buzzuto, Judicial Mgr.

Date of Disbursement

10 / 12 / 2009

Mailing Address

PO Box 27, 513 Allegheny St.

City

Hollidaysburg

State

PA

Zip Code

16648

Purpose of Disbursement

Adv. Acct for

Candidate Name

Judge Joan ORIE Melvin

Category/Type

Amount of Each Disbursement this Period

4,000.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Judge JOAN ORIE Melvin for Supreme COURT

Date of Disbursement

10 / 12 / 2009

Mailing Address

PO Box 516

City

JINGOMAR

State

PA

Zip Code

15127

Purpose of Disbursement

10/14/09 Fundraiser

Candidate Name

Joan ORIE Melvin

Category/Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

PA

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

~~MM / DD / YYYY~~

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Amount of Each Disbursement this Period

~~Amount~~

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

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

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

5,000.00

Amount

10030240892

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 15

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

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NAME OF COMMITTEE (In Full)

Sheetz Political Action Committee (Sheetz PAC)

Full Name (Last, First, Middle Initial)

A. RAFFERTY FOR SENATE

Mailing Address

PO Box 436

City

Worcester

State

PA

Zip Code

19490

Purpose of Disbursement

10/20/09 - Reception/Fundraiser

Candidate Name

John RAFFERTY

Category/  
Type

Date of Disbursement

10 / 15 / 2009

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: PA

District:

Full Name (Last, First, Middle Initial)

B. Tom CORBETT FOR GOVERNOR

Mailing Address

8623 Lexington PLACE

City

Weyford

State

PA

Zip Code

15090

Purpose of Disbursement

CAMPAIGN CONTRIBUTION

Candidate Name

Tom CORBETT

Category/  
Type

Date of Disbursement

11 / 12 / 2009

Amount of Each Disbursement this Period

1,500.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: PA

District:

Full Name (Last, First, Middle Initial)

C. Tom CORBETT FOR GOVERNOR

Mailing Address

c/o PFMA (Pennsylvania Food Merchants Assoc)

City

PO Box 870  
CAMP Hill

State

PA

Zip Code

17001-0870

Purpose of Disbursement

1/7/10 - Luncheon/Fundraiser

Candidate Name

Tom CORBETT

Category/  
Type

Date of Disbursement

12 / 18 / 2009

Amount of Each Disbursement this Period

500.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: PA

District:

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

1,650.00

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

3,775.00

10030240893

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

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

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *fed Ex* Shipping Date  
*2/1/10*  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*[Signature]* *2/2/10*  
 PREPARER DATE PREPARED

10030240894