FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Bill Shuster for Congress

ADDRESS (number and street) PO Box 27

Check if different than previously reported. (ACC)

Hollidaysburg | PA | 16648

2. **FEC IDENTIFICATION NUMBER** C00364935

CITY STATE ZIP CODE

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

STATE DISTRICT PA 09

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- [X] April 15 Quarterly Report (Q1)
- [ ] July 15 Quarterly Report (Q2)
- [ ] October 15 Quarterly Report (Q3)
- [ ] January 31 Year-End Report (YE)
- [ ] Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

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

[ ] Convention (12C) [ ] Special (12S)

Election on ____ in the State of ____

(c) 30-Day **POST**-Election Report for the:

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

Election on ____ in the State of ____

5. Covering Period 01 01 2011 through 03 31 2011

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

Type or Print Name of Treasurer Frederick A Ciocca

Signature of Treasurer Electronically Filed by Frederick A Ciocca Date 04 13 2011

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

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