

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

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** ▼

C C00364935

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

PA

09

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

(a) Quarterly Reports:

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

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

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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 Frederick A Ciocca

[Electronically Filed]

Date

/  /

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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**SUMMARY PAGE**  
of Receipts and Disbursements

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))....	156190	388200.71
(b) Total Contribution Refunds (from Line 20(d)) .....		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	156190	388200.71
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	73538.47	281838.17
(b) Total Offsets to Operating Expenditures (from Line 14).....	262.02	1001.38
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	73276.45	280836.79
8. Cash on Hand at Close of Reporting Period (from Line 27).....	212409.47	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	3689.2	

**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)

Page 3

Write or Type Committee Name

**Bill Shuster for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2011 To: M M / D D / Y Y Y Y 09 / 30 / 2011

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	41200	135372.53
(ii) Unitemized.....	990	8030
(iii) TOTAL of contributions from individuals ▶	42190	143402.53
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....	114000	244798.18
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	156190	388200.71
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>		2250
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....		
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....		
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	262.02	1001.38
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>		
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	156452.02	391452.09

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	73538.47	281838.17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans .....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS .....	31778	63388
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	105316.47	345226.17

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	161273.92
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	156452.02
25. SUBTOTAL (add Line 23 and Line 24).....	317725.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	105316.47
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	212409.47

**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 121
	<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)  
**Mr. James R Agras**

Mailing Address 73 Lebanon Hills Drive

City State Zip Code  
Pittsburgh PA 15228

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

Name of Employer Occupation  
Triangle Tech Group CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11Ai-CN7859**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John K Applegath**

Mailing Address 402 Longleaf Drive

City State Zip Code  
Venetia PA 15367

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

Name of Employer Occupation  
Range Resources VP Of Operations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2011

**Transaction ID : SA11Ai-CN7927**

Amount of Each Receipt this Period  
400

**C.** Full Name (Last, First, Middle Initial)  
**Kevin S Baker**

Mailing Address 469 Morrison Dr

City State Zip Code  
Pittsburgh PA 15216

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

Name of Employer Occupation  
Buchanan Ingersoll Rooney Government Relations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2011

**Transaction ID : SA11Ai-CN7940**

Amount of Each Receipt this Period  
500

**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 6 OF 121
	<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. Scott R Baugh**

Mailing Address 6662 Blue Heron Drive

City Huntington Beach State CA Zip Code 92648

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

Name of Employer Scott Baugh & Associates Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11Ai-CN7965**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**James L Bowman**

Mailing Address 846 Wynnewood Rd

City Camp Hill State PA Zip Code 17011

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

Name of Employer Reinsel Kuntz Leshner LLP Occupation Accountant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2011

**Transaction ID : SA11Ai-CN7937**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Levon S Boyagian**

Mailing Address 3711 Pershing Dr N

City Arlington State VA Zip Code 22203

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

Name of Employer Boyagian Consulting LLC Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11Ai-CN7966**

Amount of Each Receipt this Period  
**500**

**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 7 OF 121
	<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 G Branstetter**

Mailing Address 3031 Logan Street

City State Zip Code  
Camp Hill PA 17011

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

Name of Employer Occupation  
Hallowell Branstetter & Long Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 27 / 2011**

**Transaction ID : SA11Ai-CN7913**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Nancy K Buese**

Mailing Address 101 Dexter Street

City State Zip Code  
Denver CO 80220

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

Name of Employer Occupation  
MarkWest Energy Partners LP Senior VP & CFO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 01 / 2011**

**Transaction ID : SA11Ai-CN7867**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Ben R Butler**

Mailing Address 509 7th St NW  
Fifth Floor

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation  
Public Properties LLC Principal - Commercial Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 01 / 2011**

**Transaction ID : SA11Ai-CN7888**

Amount of Each Receipt this Period  
**1000**

**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 8 OF 121
	<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. David S Congdon**

Mailing Address 1030 Rockford Road

City High Point State NC Zip Code 27262

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

Name of Employer Old Dominion Freight Line Inc Occupation President & CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 01 / 2011**

**Transaction ID : SA11Ai-CN7885**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**G. Warren Elliott**

Mailing Address 822 Shatzer Orchard Rd

City Chambersburg State PA Zip Code 17202

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

Name of Employer Cardinal Crossings Occupation Principal

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2011**

**Transaction ID : SA11Ai-CN7935**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Craig M Engle**

Mailing Address 1050 Connecticut Avenue NW

City Washington State DC Zip Code 20036

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

Name of Employer Arent Fox LLP Occupation Partner/Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 19 / 2011**

**Transaction ID : SA11Ai-CN7900**

Amount of Each Receipt this Period  
**250**

**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 9 OF 121
	<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. Philip S English**

Mailing Address 1050 Connecticut Avenue NW

City Washington State DC Zip Code 20036

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

Name of Employer Arent Fox Attorneys At Law Occupation Senior Govt Relations Advisor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11Ai-CN7858**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**James L Ervin**

Mailing Address 116 Queen St

City Alexandria State VA Zip Code 22314

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

Name of Employer ATK Occupation Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11Ai-CN7881**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Judith A Eschberger**

Mailing Address 3712 North Third Street

City Harrisburg State PA Zip Code 17110

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

Name of Employer Novak Strategic Advisors Occupation Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2011

**Transaction ID : SA11Ai-CN7938**

Amount of Each Receipt this Period  
**250**

**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 10 OF 121
	<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. Joseph H Frantz**

Mailing Address 229 Alaqua Drive

City State Zip Code  
Sewickley PA 15143

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

Name of Employer Occupation  
Unbridled Energy USA Inc CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2011

**Transaction ID : SA11Ai-CN7926**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Christopher M Giblin**

Mailing Address 1304 Chancel Place

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
Ogilvy Government Relations Government Relations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 19 / 2011

**Transaction ID : SA11Ai-CN7951**

Amount of Each Receipt this Period  
**500**

**C.** 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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2011

**Transaction ID : SA11Ai-CN7916**

Amount of Each Receipt this Period  
**250**

**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 11 OF 121
	<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 E Groninger**

Mailing Address PO Box 36

City Mexico State PA Zip Code 17056

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

Name of Employer John E Groninger Inc Occupation General Contractor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 27 / 2011**

**Transaction ID : SA11Ai-CN7918**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Christopher A Helms**

Mailing Address 11614 Green Oaks

City Houston State TX Zip Code 77024

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

Name of Employer NiSource Inc. Occupation Executive VP & Group CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 01 / 2011**

**Transaction ID : SA11Ai-CN7864**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Lynn Helms**

Mailing Address 11614 Green Oaks

City Houston State TX Zip Code 77024

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

Name of Employer None Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 01 / 2011**

**Transaction ID : SA11Ai-CN7863**

Amount of Each Receipt this Period  
**500**

**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 12 OF 121
	<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. S. Dale High**

Mailing Address 746 Willow Road

City Lancaster State PA Zip Code 17601

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

Name of Employer The High Companies Occupation Chairman Of The Board

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2011**

**Transaction ID : SA11Ai-CN7945**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Carl A Hoffman Jr**

Mailing Address 1617 Berkshire Ln

City Harrisburg State PA Zip Code 17111

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

Name of Employer PrimeCare Medical Inc Occupation President & Corporate Medical Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 19 / 2011**

**Transaction ID : SA11Ai-CN7901**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mark A Holman**

Mailing Address 9208 Belwood Ct

City Alexandria State VA Zip Code 22309

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

Name of Employer Ridge Policy Group Occupation Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2011**

**Transaction ID : SA11Ai-CN7939**

Amount of Each Receipt this Period  
**1000**

**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 13 OF 121
	<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)  
**William P Jarrell**

Mailing Address 10676 S Douglas Hwy

City State Zip Code  
Gillette WY 82718

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

Name of Employer Occupation  
Madison Group Principal Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11Ai-CN7969**

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Harry D 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  
Self Employed Physician-General Practitioner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2011

**Transaction ID : SA11Ai-CN7919**

Amount of Each Receipt this Period  
300

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Dean E Kaplan**

Mailing Address 131 Matzinger Road

City State Zip Code  
Toledo OH 43612

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

Name of Employer Occupation  
K-Limited CEO/Executive VP

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11Ai-CN7884**

Amount of Each Receipt this Period  
1000

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

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

1800.00

**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 121
	<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. W. Thomas Kirchhoff Jr**

Mailing Address 1 Glen Ridge Drive

City Lemoyne State PA Zip Code 17043

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

Name of Employer Cleveland Brothers Occupation Executive VP/COO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2011

**Transaction ID : SA11Ai-CN7915**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James J Kutz**

Mailing Address 312 Meadow Drive

City Mechanicsburg State PA Zip Code 17055

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

Name of Employer Post & Schell PC Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2011

**Transaction ID : SA11Ai-CN7942**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Betty M Lehman**

Mailing Address 315 Quince Ct

City Hollidaysburg State PA Zip Code 16648

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

Name of Employer None Occupation None

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2011

**Transaction ID : SA11Ai-CN7899**

Amount of Each Receipt this Period  
**1250**

**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 15 OF 121
	<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. P Joseph Lehman Jr.**

Mailing Address 315 Quince Ct

City Hollidaysburg State PA Zip Code 16648

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

Name of Employer P Joseph Lehman Inc Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 23 / 2011**

**Transaction ID : SA11Ai-CN7898**

Amount of Each Receipt this Period  
**1250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jeffrey Loveng**

Mailing Address 228 W. Windsor Avenue

City Alexandria State VA Zip Code 22301

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

Name of Employer Vandor Strategies LLC Occupation Government Affairs

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 19 / 2011**

**Transaction ID : SA11Ai-CN7950**

Amount of Each Receipt this Period  
**2500**

**C.** Full Name (Last, First, Middle Initial)  
**Andrew K Maloney**

Mailing Address 3020 Macomb Street NW

City Washington State DC Zip Code 20008

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

Name of Employer Ogilvy Government Relations Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 15 / 2011**

**Transaction ID : SA11Ai-CN7922**

Amount of Each Receipt this Period  
**1000**

**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: PAGE 16 OF 121  
(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. James D Massie**

Mailing Address 501 High Street

City State Zip Code  
Alexandria VA 22302

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

Name of Employer Occupation  
Alpine Group Principal

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11Ai-CN7957**

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**John P McAllister**

Mailing Address 3039 Albemarle St NW

City State Zip Code  
Washington DC 20008

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

Name of Employer Occupation  
McAllister & Quinn LLC Partner

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11Ai-CN7964**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas R Merlie**

Mailing Address 59 Derbyshire Dr

City State Zip Code  
Carlisle PA 17013

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

Name of Employer Occupation  
Xerox Corporation Sales Specialist

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2011

**Transaction ID : SA11Ai-CN7941**

Amount of Each Receipt this Period  
250

**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 17 OF 121
	<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)  
**John D Milne**

Mailing Address 409 G Street SE

City Washington State DC Zip Code 20003

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

Name of Employer MCapitol Management Occupation Senior Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11Ai-CN7970**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John C Mollenkopf**

Mailing Address 6205 S Benton Ct

City Littleton State CO Zip Code 80123

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

Name of Employer MarkWest Energy Partners LP Occupation Senior VP & COO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11Ai-CN7865**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Thomas G Paese**

Mailing Address 1933 19th St NW

City Washington State DC Zip Code 20009

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

Name of Employer Klett Rooney Lieber & Schorling Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2011

**Transaction ID : SA11Ai-CN7912**

Amount of Each Receipt this Period  
**250**

**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 18 OF 121
	<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 A Pietrandrea**

Mailing Address 2540 Longmount Drive

City State Zip Code  
Wexford PA 15090

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

Name of Employer Occupation  
Railroad Development Corporation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11Ai-CN7860**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Donald K Robinson**

Mailing Address 885 Fernwood Ct

City State Zip Code  
Highland Village TX 75077

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

Name of Employer Occupation  
Robinson Drilling Consulting Inc President & Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2011

**Transaction ID : SA11Ai-CN7925**

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**James C Roddey**

Mailing Address 1413 Oak St

City State Zip Code  
Oakmont PA 15139

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

Name of Employer Occupation  
Star Cable Association President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11Ai-CN7868**

Amount of Each Receipt this Period  
1000

**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 121
	<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)  
**B Michael Schaul**

Mailing Address 840 Allenview Dr

City Mechanicsburg State PA Zip Code 17055

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

Name of Employer Wetlands Habitat Management Inc Occupation President/Principal

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2011

**Transaction ID : SA11Ai-CN7936**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Frank M Semple**

Mailing Address 301 Fairfax Street

City Denver State CO Zip Code 80220

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

Name of Employer MarkWest Energy Partners LP Occupation Chairman Pres & CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11Ai-CN7866**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert C Skaggs Jr**

Mailing Address 200 Civic Center Dr

City Columbus State OH Zip Code 43215

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

Name of Employer NiSource Inc. Occupation President & CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11Ai-CN7862**

Amount of Each Receipt this Period  
**1000**

**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 20 OF 121
	<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. Stephen P Smith**

Mailing Address 7809 Lambton Park Road

City State Zip Code  
New Albany OH 43054

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

Name of Employer Occupation  
NiSource Inc. CFO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11Ai-CN7851**

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John Snider**

Mailing Address 1884 Bell Avenue

City State Zip Code  
Chambersburg PA 17202

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

Name of Employer Occupation  
NOVA CEO & President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2011

**Transaction ID : SA11Ai-CN7894**

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Chad Stephens**

Mailing Address 3712 Hamilton Avenue

City State Zip Code  
Fort Worth TX 76107

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

Name of Employer Occupation  
Range Resources Senior VP Corporate Development

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2011

**Transaction ID : SA11Ai-CN7929**

Amount of Each Receipt this Period  
500

**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 21 OF 121
	<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)  
**Ms. Cindy Troutman**

Mailing Address 600 Maryland Avenue SW

City Washington State DC Zip Code 20024

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

Name of Employer CGH Technologies Inc Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2011

**Transaction ID : SA11Ai-CN7847**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**C Alan Walker**

Mailing Address PO Box 34

City Bigler State PA Zip Code 16825

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

Name of Employer Bradford Coal Co Inc Occupation President & CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11Ai-CN7861**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Mark D Whitley**

Mailing Address 1709 Sherburne Drive

City Keller State TX Zip Code 76262

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

Name of Employer Range Resources Occupation Senior VP N & SW Divisions

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2011

**Transaction ID : SA11Ai-CN7923**

Amount of Each Receipt this Period  
**500**

**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 22 OF 121
	<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. Charles L Whittington**

Mailing Address 18375 E 345 South

City State Zip Code  
Grammer IN 47236

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

Name of Employer Occupation  
Grammer Logistics Transportation Specialist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2011

**Transaction ID : SA11Ai-CN7883**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Barbara J Windsor**

Mailing Address 11323 San Andrew Dr

City State Zip Code  
New Market MD 21774

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

Name of Employer Occupation  
Hahn Transportation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2011

**Transaction ID : SA11Ai-CN7882**

Amount of Each Receipt this Period  
1000

**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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2011

**Transaction ID : SA11Ai-CN7920**

Amount of Each Receipt this Period  
1000

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

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

3000.00

41200.00

**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 121
	<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 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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11C-CN7959**

Amount of Each Receipt this Period  
 1500

**B.** Full Name (Last, First, Middle Initial)  
**American Dental PAC**

Mailing Address 1111 14th St NW Suite 1100

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00000729**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2011

**Transaction ID : SA11C-CN7870**

Amount of Each Receipt this Period  
 2000

**C.** Full Name (Last, First, Middle Initial)  
**Arent Fox LLP PAC**

Mailing Address 1050 Connecticut Ave NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00241380**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11C-CN7852**

Amount of Each Receipt this Period  
 2000

**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 24 OF 121
	<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. Associated General Contractors PAC**  
 Full Name (Last, First, Middle Initial)  
 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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 3500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2011

**Transaction ID : SA11C-CN7848**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 3500

**B. AT&T Inc Federal PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 208 Akard St S Suite 3521

City Dallas	State TX	Zip Code 75202
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer	Occupation
------------------	------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2011

**Transaction ID : SA11C-CN7849**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000

**C. AT&T Inc Federal PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 208 Akard St S Suite 3521

City Dallas	State TX	Zip Code 75202
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer	Occupation
------------------	------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 3500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11C-CN7872**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500

**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 25 OF 121
	<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. Automotive Free International Trade PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1625 Prince St Suite 225  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C** C00250399  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011  
**Transaction ID : SA11C-CN7960**  
 Amount of Each Receipt this Period  
 5000

**B. BAE Systems USA PAC**  
 Full Name (Last, First, Middle Initial)  
 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: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2011  
**Transaction ID : SA11C-CN7904**  
 Amount of Each Receipt this Period  
 1000

**C. BNSF RAILPAC**  
 Full Name (Last, First, Middle Initial)  
 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: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 8000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011  
**Transaction ID : SA11C-CN7953**  
 Amount of Each Receipt this Period  
 2000

**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 26 OF 121
	<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. Chesapeake Energy Corp. Federal PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 18576

City Oklahoma City State OK Zip Code 73112

FEC ID number of contributing federal political committee. **C C00389288**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2011

**Transaction ID : SA11C-CN7892**

Amount of Each Receipt this Period  
5000

**B. Comcast Corporation PAC**

Full Name (Last, First, Middle Initial)  
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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2011

**Transaction ID : SA11C-CN7907**

Amount of Each Receipt this Period  
4000

**C. Consol Energy Inc PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1000 Consol Energy Drive

City Canonsburg State PA Zip Code 15317

FEC ID number of contributing federal political committee. **C C00279331**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11C-CN7853**

Amount of Each Receipt this Period  
5000

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

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

14000.00

**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 121
	<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)  
**CPDA-PAC**

Mailing Address 1730 Rhode Island Avenue NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00214809

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11C-CN7963**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**EQT Corporation PAC**

Mailing Address 625 Liberty Avenue Suite 1700

City Pittsburgh State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C** C00151175

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11C-CN7856**

Amount of Each Receipt this Period  
 2500

**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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 17 / 2011

**Transaction ID : SA11C-CN7893**

Amount of Each Receipt this Period  
 2000

**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 28 OF 121
	<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)  
**FirstEnergy PAC**

Mailing Address 76 Main St S

City Akron State OH Zip Code 44308

FEC ID number of contributing federal political committee. **C** C00140855

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11C-CN7955**

Amount of Each Receipt this Period  
 2500

**B.** Full Name (Last, First, Middle Initial)  
**FirstEnergy PAC**

Mailing Address 76 Main St S

City Akron State OH Zip Code 44308

FEC ID number of contributing federal political committee. **C** C00140855

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11C-CN7956**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Friends of Rich Alloway Committee**

Mailing Address PO Box 351

City Chambersburg State PA Zip Code 17201

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 750

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2011

**Transaction ID : SA11C-CN7947**

Amount of Each Receipt this Period  
 250

**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 29 OF 121
	<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. General Dynamics Voluntary PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2941 Fairview Park Dr  
 Suite 100  
 City Falls Church State VA Zip Code 22042  
 FEC ID number of contributing federal political committee. **C C00078451**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2011  
**Transaction ID : SA11C-CN7908**  
 Amount of Each Receipt this Period  
 1000

**B. GenOn Energy PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1000 Main Street  
 City Houston State TX Zip Code 77002  
 FEC ID number of contributing federal political committee. **C C00491696**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011  
**Transaction ID : SA11C-CN7961**  
 Amount of Each Receipt this Period  
 2500

**C. Highmark Health PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1800 Center St  
 City Camp Hill State PA Zip Code 17089  
 FEC ID number of contributing federal political committee. **C C00302844**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2011  
**Transaction ID : SA11C-CN7949**  
 Amount of Each Receipt this Period  
 250

**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 30 OF 121
	<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)  
**HomePAC**

Mailing Address 20 Erford Road - Suite 115

City Lemoyne State PA Zip Code 17043

FEC ID number of contributing federal political committee. **C** C00394726

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2011

**Transaction ID : SA11C-CN7921**

Amount of Each Receipt this Period  
 250

**B.** Full Name (Last, First, Middle Initial)  
**Honeywell International PAC**

Mailing Address 101 Constitution Ave NW  
Suite 500 W

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11C-CN7952**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**K&L Gates LLP PAC**

Mailing Address 1601 K Street NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2011

**Transaction ID : SA11C-CN7948**

Amount of Each Receipt this Period  
 1000

**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 31 OF 121
	<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. MarkWest Energy Partners LP PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1515 Arapahoe Street  
Tower 1 Suite 1600

City Denver State CO Zip Code 80202

FEC ID number of contributing federal political committee. **C C00489468**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11C-CN7857**

Amount of Each Receipt this Period  
2500

**B. Nalco Company PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1601 W. Diehl Road

City Naperville State IL Zip Code 60563

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11C-CN7972**

Amount of Each Receipt this Period  
2500

**C. NiSource Inc. PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 200 Civic Center Dr

City Columbus State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C C00051979**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11C-CN7854**

Amount of Each Receipt this Period  
2500

**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 32 OF 121
	<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 Columbus State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C** C00051979

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2011

**Transaction ID : SA11C-CN7895**

Amount of Each Receipt this Period  
 500

**B.** Full Name (Last, First, Middle Initial)  
**Owner Operator Independent Drivers PAC**

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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11C-CN7876**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Owner Operator Independent Drivers PAC**

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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2011

**Transaction ID : SA11C-CN7931**

Amount of Each Receipt this Period  
 1000

**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 33 OF 121
	<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 PAC**

Full Name (Last, First, Middle Initial)  
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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2011

**Transaction ID : SA11C-CN7962**

Amount of Each Receipt this Period  
2000

**B. Physical Therapy (PTPAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 1111 Fairfax St N

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 02 / 2011

**Transaction ID : SA11C-CN7869**

Amount of Each Receipt this Period  
1000

**C. Range Resources Energy Independence PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 545

City Harrisburg State PA Zip Code 17108

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2011

**Transaction ID : SA11C-CN7928**

Amount of Each Receipt this Period  
1000

**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 34 OF 121
	<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. Realtors PAC**

Full Name (Last, First, Middle Initial)  
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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11C-CN7880**

Amount of Each Receipt this Period  
 1000

**B. RJ Reynolds PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 718  
401 N. Main Street

City Winston Salem State NC Zip Code 27102

FEC ID number of contributing federal political committee. **C** C00042002

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11C-CN7976**

Amount of Each Receipt this Period  
 2500

**C. The Boeing Company PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1200 Wilson Blvd

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2011

**Transaction ID : SA11C-CN7930**

Amount of Each Receipt this Period  
 1000

**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 35 OF 121
	<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	

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)  
**The Home Depot Inc. PAC**

Mailing Address 101 Constitution Ave NW  
Suite 800 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11C-CN7954**

Amount of Each Receipt this Period  
5000

**B.** Full Name (Last, First, Middle Initial)  
**Truck PAC**

Mailing Address 430 1st St SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00002881**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2011

**Transaction ID : SA11C-CN7891**

Amount of Each Receipt this Period  
5000

**C.** Full Name (Last, First, Middle Initial)  
**Turkish Coalition USA PAC**

Mailing Address 1025 Connecticut Ave  
Suite 1000

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00432526**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11C-CN7958**

Amount of Each Receipt this Period  
1000

**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 36 OF 121
	<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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 01 2011

**Transaction ID : SA11C-CN7855**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**White Rose PAC**

Mailing Address PO Box 15040

City State Zip Code  
York PA 17405

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 29 2011

**Transaction ID : SA11C-CN7944**

Amount of Each Receipt this Period  
250

**C.** Full Name (Last, First, Middle Initial)  
**Dealers Election Action Comm**

Mailing Address 8400 Westpark Dr

City State Zip Code  
Mc Lean VA 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 29 2011

**Transaction ID : SA11C-CN7946**

Amount of Each Receipt this Period  
5000

**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 37 OF 121
	<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)  
**PPL People For Good Govt**

Mailing Address Two North Ninth St

City Allentown State PA Zip Code 18101

FEC ID number of contributing federal political committee. **C** C00228106

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2011

**Transaction ID : SA11C-CN7909**

Amount of Each Receipt this Period  
 1000

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

Mailing Address 4301 Wilson Blvd

City Arlington State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2011

**Transaction ID : SA11C-CN7902**

Amount of Each Receipt this Period  
 1000

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

Mailing Address 4301 Wilson Blvd

City Arlington State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2011

**Transaction ID : SA11C-CN7943**

Amount of Each Receipt this Period  
 1000

**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 38 OF 121
	<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)  
**ACSM-NSPS PAC**

Mailing Address 6 Montgomery Village Avenue  
Suite 403

City Gaithersburg State MD Zip Code 20879

FEC ID number of contributing federal political committee. **C** C00152892

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11C-CN7877**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**AECOM PAC**

Mailing Address 2101 Wilson Boulevard  
7th Floor

City Arlington State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00374447

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2011

**Transaction ID : SA11C-CN7903**

Amount of Each Receipt this Period  
 2000

**C.** Full Name (Last, First, Middle Initial)  
**Air Products Political Alliance PAC**

Mailing Address PO Box 441

City Trexlertown State PA Zip Code 18087

FEC ID number of contributing federal political committee. **C** C00127258

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11C-CN7874**

Amount of Each Receipt this Period  
 1000

**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 39 OF 121
	<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. Air Products Political Alliance PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 441  
 City Trexlertown State PA Zip Code 18087  
 FEC ID number of contributing federal political committee. **C** C00127258  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011  
**Transaction ID : SA11C-CN7875**  
 Amount of Each Receipt this Period  
 1000

**B. BusPAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 111 K Street NE - Ninth Floor  
 City Washington State DC Zip Code 20002  
 FEC ID number of contributing federal political committee. **C** C00004879  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 3500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011  
**Transaction ID : SA11C-CN7887**  
 Amount of Each Receipt this Period  
 2500

**C. Cruise Lines International Assoc**  
 Full Name (Last, First, Middle Initial)  
 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: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011  
**Transaction ID : SA11C-CN7886**  
 Amount of Each Receipt this Period  
 1000

**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 40 OF 121
	<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. Cruise Lines International Assoc**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2111 Wilson Blvd  
 8th Floor  
 City State Zip Code  
 Arlington VA 22201  
 FEC ID number of contributing federal political committee. **C C00432393**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 30 2011  
**Transaction ID : SA11C-CN7973**  
 Amount of Each Receipt this Period  
 1000

**B. Edison International**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2244 Walnut Grove Ave  
 City State Zip Code  
 Rosemead CA 91770  
 FEC ID number of contributing federal political committee. **C C00019653**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 19 2011  
**Transaction ID : SA11C-CN7906**  
 Amount of Each Receipt this Period  
 1000

**C. Federal Express**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 942 Shady Grove Rd S  
 City State Zip Code  
 Memphis TN 38120  
 FEC ID number of contributing federal political committee. **C C00068692**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 19 2011  
**Transaction ID : SA11C-CN7905**  
 Amount of Each Receipt this Period  
 2500

**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 41 OF 121
	<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. Kraft Foods Global Inc PAC**

Full Name (Last, First, Middle Initial)  
Kraft Foods Global Inc PAC

Mailing Address 975 F Street NW  
Suite 1000

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00077701**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11C-CN7879**

Amount of Each Receipt this Period  
1000

**B. National Beer Wholesalers Association**

Full Name (Last, First, Middle Initial)  
National Beer Wholesalers Association

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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11C-CN7871**

Amount of Each Receipt this Period  
2500

**C. NATSO PAC**

Full Name (Last, First, Middle Initial)  
NATSO PAC

Mailing Address 1737 King St  
Suite 200

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00097865**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11C-CN7873**

Amount of Each Receipt this Period  
2500

**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 42 OF 121
	<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. NFG FEDPAC**

Full Name (Last, First, Middle Initial)  
NFG FEDPAC

Mailing Address 10 Lafayette Square

City Buffalo State NY Zip Code 14203

FEC ID number of contributing federal political committee. **C** C00083758

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2011

**Transaction ID : SA11C-CN7917**

Amount of Each Receipt this Period  
 1000

**B. NRA-Political Victory Fund**

Full Name (Last, First, Middle Initial)  
NRA-Political Victory Fund

Mailing Address 11250 Waples Mill Rd

City Fairfax State VA Zip Code 22030

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2011

**Transaction ID : SA11C-CN7911**

Amount of Each Receipt this Period  
 1000

**C. NSSGA Rock**

Full Name (Last, First, Middle Initial)  
NSSGA Rock

Mailing Address 1605 King St

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2011

**Transaction ID : SA11C-CN7910**

Amount of Each Receipt this Period  
 1000

**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 43 OF 121
	<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. Political Educational Fund Of The BCTD**

Full Name (Last, First, Middle Initial)  
Mailing Address 815 16th Street NW  
Suite 600

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00003160**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2011

**Transaction ID : SA11C-CN7889**

Amount of Each Receipt this Period  
1000

**B. Spectra Energy DCP**

Full Name (Last, First, Middle Initial)  
Mailing Address 5400 Westheimer Ct

City Houston State TX Zip Code 77056

FEC ID number of contributing federal political committee. **C C00429662**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2011

**Transaction ID : SA11C-CN7974**

Amount of Each Receipt this Period  
1500

**C. Wine Spirits Wholesalers Of America**

Full Name (Last, First, Middle Initial)  
Mailing Address 805 15th St NW Suite 430

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00147173**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2011

**Transaction ID : SA11C-CN7890**

Amount of Each Receipt this Period  
1000

**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 44 OF 121
	<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)  
**YRC Worldwide Inc PAC**

Mailing Address 10990 Roe Avenue

City Overland Park State KS Zip Code 66211

FEC ID number of contributing federal political committee. **C** C00090209

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2011

**Transaction ID : SA11C-CN7878**

Amount of Each Receipt this Period  
 1000

**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)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

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)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	114000.00

**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 121
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" 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 Express**

Mailing Address **PO Box 1270**

City **Newark** State **NJ** Zip Code **07101**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **242.02**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 28 / 2011**

**Transaction ID : SA14-ER96**

Amount of Each Receipt this Period  
**242.02**

Expenditure Refund

**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) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

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) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

**242.02**

**242.02**

**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 46 OF 121	
	<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) <b>A. William Shuster</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2011
Mailing Address 455 Overlook Drive		Amount of Each Disbursement this Period 116.00 <b>Transaction ID : SB17-EX7771</b>
City Hollidaysburg State PA Zip Code 16648	Purpose of Disbursement Travel reimbursement Category/Type 002	
Candidate Name <b>William Shuster</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 09	Travel reimbursement
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary		

Full Name (Last, First, Middle Initial) <b>B. William Shuster</b>		Date of Disbursement MM / DD / YYYY 09 / 08 / 2011
Mailing Address 455 Overlook Drive		Amount of Each Disbursement this Period 361.62 <b>Transaction ID : SB17-EX7933</b>
City Hollidaysburg State PA Zip Code 16648	Purpose of Disbursement Travel Expenses for Fundraiser Category/Type 002	
Candidate Name <b>William Shuster</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 09	Travel Expenses for Fundraiser
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary		

Full Name (Last, First, Middle Initial) <b>c. William Shuster</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2011
Mailing Address 455 Overlook Drive		Amount of Each Disbursement this Period 291.79 <b>Transaction ID : SB17-EX8013</b>
City Hollidaysburg State PA Zip Code 16648	Purpose of Disbursement Mileage Reimbursement Category/Type 001	
Candidate Name <b>William Shuster</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 09	Mileage Reimbursement
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	769.41
<b>TOTAL</b> 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 47 OF 121			
	<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) <b>A. Ciocca Benton &amp; Okonak P.C.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2011		
Mailing Address 912 Pleasant Valley Blvd			Amount of Each Disbursement this Period 6199.25		
City Altoona	State PA	Zip Code 16602	Transaction ID : <b>SB17-EX7981</b>		
Purpose of Disbursement Accounting services		Category/ Type 001	Accounting services		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2011		
Mailing Address PO Box 15026			Amount of Each Disbursement this Period 213.79		
City Albany	State NY	Zip Code 12212	Transaction ID : <b>SB17-EX7827</b>		
Purpose of Disbursement Telephone		Category/ Type 001	Telephone		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2011		
Mailing Address PO Box 15026			Amount of Each Disbursement this Period 220.41		
City Albany	State NY	Zip Code 12212	Transaction ID : <b>SB17-EX7862</b>		
Purpose of Disbursement Telephone		Category/ Type 001	Telephone		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6633.45
<b>TOTAL</b> 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 48 OF 121			
	<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) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2011
Mailing Address PO Box 15026		Amount of Each Disbursement this Period 217.67
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Telephone	Category/Type 001	<b>Transaction ID : SB17-EX7991</b>
Candidate Name	Telephone	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PA UC Fund</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2011
Mailing Address PO Box 68568		Amount of Each Disbursement this Period 14.88
City Harrisburg	State PA Zip Code 17106	
Purpose of Disbursement 2nd Quarter 2011 UC tax	Category/Type 001	<b>Transaction ID : SB17-EX7834</b>
Candidate Name	Telephone	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Roger Osbaugh</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2011
Mailing Address 1153 Leisure Drive		Amount of Each Disbursement this Period 49.93
City Chambersburg	State PA Zip Code 17202	
Purpose of Disbursement Mileage & Expense reimbursement	Category/Type 001	<b>Transaction ID : SB17-EX7875</b>
Candidate Name	Telephone	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	282.48
<b>TOTAL</b> 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 49 OF 121	
	<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) <b>A. Roger Osbaugh</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2011
Mailing Address 1153 Leisure Drive		Amount of Each Disbursement this Period 73.55
City Chambersburg	State PA	
Purpose of Disbursement Travel expense reimbursement	Zip Code 17202	Travel expense reimbursement
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Roger Osbaugh</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address 1153 Leisure Drive		Amount of Each Disbursement this Period 98.14
City Chambersburg	State PA	
Purpose of Disbursement Mileage and expense reimbursement	Zip Code 17202	Mileage and expense reimbursement
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Roger Osbaugh</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2011
Mailing Address 1153 Leisure Drive		Amount of Each Disbursement this Period 268.98
City Chambersburg	State PA	
Purpose of Disbursement Mileage reimbursement	Zip Code 17202	Mileage reimbursement
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	440.67
<b>TOTAL</b> 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 50 OF 121			
	<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) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2011
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 901.33
City Lehigh Valley	State PA	Zip Code 18002
Purpose of Disbursement Telephone	Category/ Type 001	
Candidate Name	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Telephone	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2011
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 812.63
City Lehigh Valley	State PA	Zip Code 18002
Purpose of Disbursement Telephone	Category/ Type 001	
Candidate Name	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Telephone	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2011
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 868.20
City Lehigh Valley	State PA	Zip Code 18002
Purpose of Disbursement Telephone	Category/ Type 001	
Candidate Name	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Telephone	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2582.16
<b>TOTAL</b> 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 51 OF 121	
	<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) <b>A. ATLANTIC broadband</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2011	
Mailing Address Box 371801			Amount of Each Disbursement this Period 141.23	
City Pittsburgh	State PA	Zip Code 15250	Transaction ID : <b>SB17-EX7825</b>	
Purpose of Disbursement Internet Service		Category/ Type 001	Internet Service	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. ATLANTIC broadband</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2011	
Mailing Address Box 371801			Amount of Each Disbursement this Period 65.14	
City Pittsburgh	State PA	Zip Code 15250	Transaction ID : <b>SB17-EX7826</b>	
Purpose of Disbursement Internet Service		Category/ Type 001	Internet Service	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ATLANTIC broadband</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2011	
Mailing Address Box 371801			Amount of Each Disbursement this Period 141.23	
City Pittsburgh	State PA	Zip Code 15250	Transaction ID : <b>SB17-EX7866</b>	
Purpose of Disbursement Internet Service		Category/ Type 001	Internet Service	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	347.60
<b>TOTAL</b> 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 52 OF 121	
	<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) <b>A. ATLANTIC broadband</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2011
Mailing Address Box 371801		Amount of Each Disbursement this Period 61.89
City Pittsburgh	State PA	
Zip Code 15250	Purpose of Disbursement Internet Service	<b>Transaction ID : SB17-EX7880</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Internet Service
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ATLANTIC broadband</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2011
Mailing Address Box 371801		Amount of Each Disbursement this Period 141.23
City Pittsburgh	State PA	
Zip Code 15250	Purpose of Disbursement Internet Service	<b>Transaction ID : SB17-EX7989</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Internet Service
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ATLANTIC broadband</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2011
Mailing Address Box 371801		Amount of Each Disbursement this Period 61.89
City Pittsburgh	State PA	
Zip Code 15250	Purpose of Disbursement Internet Service	<b>Transaction ID : SB17-EX7990</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Internet Service
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	265.01
<b>TOTAL</b> 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 53 OF 121			
	<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) <b>A. CenPenn Realty LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2011
Mailing Address 513 Allegheny Street		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17-EX7829</b>
City Hollidaysburg	State PA Zip Code 16648	
Purpose of Disbursement July 2011 rent	Category/Type 001	July 2011 rent
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CenPenn Realty LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2011
Mailing Address 513 Allegheny Street		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17-EX7830</b>
City Hollidaysburg	State PA Zip Code 16648	
Purpose of Disbursement August 2011 rent	Category/Type 001	August 2011 rent
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CenPenn Realty LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2011
Mailing Address 513 Allegheny Street		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17-EX7885</b>
City Hollidaysburg	State PA Zip Code 16648	
Purpose of Disbursement September 2011 rent	Category/Type 001	September 2011 rent
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1500.00
<b>TOTAL</b> 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 54 OF 121	
	<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) <b>A. Jim Frank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address 1628 St. Francis Lane		Amount of Each Disbursement this Period 191.99
City Altoona	State PA	
Zip Code 16602		<b>Transaction ID : SB17-EX8001</b>
Purpose of Disbursement Mileage & Expense reimbursement	Category/ Type 001	
Candidate Name		Mileage & Expense reimbursement
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. S&amp;T Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2011
Mailing Address 1100 Logan Blvd		Amount of Each Disbursement this Period 30.00
City Altoona	State PA	
Zip Code 16602		<b>Transaction ID : SB17-EX7821</b>
Purpose of Disbursement Bank Service Charge	Category/ Type 001	
Candidate Name		Bank Service Charge
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. S&amp;T Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011
Mailing Address 1100 Logan Blvd		Amount of Each Disbursement this Period 30.00
City Altoona	State PA	
Zip Code 16602		<b>Transaction ID : SB17-EX7857</b>
Purpose of Disbursement Bank Service Charge	Category/ Type 001	
Candidate Name		Bank Service Charge
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	251.99
<b>TOTAL</b> 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 55 OF 121	
	<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) <b>A. S&amp;T Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address 1100 Logan Blvd		Amount of Each Disbursement this Period 30.00
City Altoona	State PA	
Zip Code 16602	Purpose of Disbursement Bank Service Charge	<b>Transaction ID : SB17-EX7944</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Bank Service Charge
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jennifer Mearkle</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2011
Mailing Address 3022 Broad Avenue		Amount of Each Disbursement this Period 150.00
City Altoona	State PA	
Zip Code 16601	Purpose of Disbursement 07/01/2011 to 07/31/2011 Payroll	<b>Transaction ID : SB17-EX7833</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	07/01/2011 to 07/31/2011 Payroll
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Jennifer Mearkle</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2011
Mailing Address 3022 Broad Avenue		Amount of Each Disbursement this Period 150.00
City Altoona	State PA	
Zip Code 16601	Purpose of Disbursement 08/01/2011 to 08/31/2011 Payroll	<b>Transaction ID : SB17-EX7932</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	08/01/2011 to 08/31/2011 Payroll
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	330.00
<b>TOTAL</b> 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 56 OF 121	
	<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) <b>A. Jennifer Mearkle</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address 3022 Broad Avenue		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : SB17-EX8000</b>
City Altoona State PA Zip Code 16601	Purpose of Disbursement 09/01/2011 to 09/30/2011 Payroll Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	09/01/2011 to 09/30/2011 Payroll

Full Name (Last, First, Middle Initial) <b>B. S&amp;T Bank - Payroll</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011
Mailing Address 1100 Logan Blvd		Amount of Each Disbursement this Period 16.59 <b>Transaction ID : SB17-EX7855</b>
City Altoona State PA Zip Code 16602	Purpose of Disbursement 2nd Quarter 2011 withholding tax Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	2nd Quarter 2011 withholding tax

Full Name (Last, First, Middle Initial) <b>c. S&amp;T Bank - Payroll</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2011
Mailing Address 1100 Logan Blvd		Amount of Each Disbursement this Period 31.61 <b>Transaction ID : SB17-EX7856</b>
City Altoona State PA Zip Code 16602	Purpose of Disbursement EFTPS - July 2011 Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	EFTPS - July 2011

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	198.20
<b>TOTAL</b> 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 57 OF 121			
	<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) <b>A. S&amp;T Bank - Payroll</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address 1100 Logan Blvd		Amount of Each Disbursement this Period 31.60
City Altoona	State PA Zip Code 16602	
Purpose of Disbursement EFTPS - August 2011	Category/Type 001	<b>Transaction ID : SB17-EX7945</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	EFTPS - August 2011
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2011
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 134.18
City Carol Stream	State IL Zip Code 60197	
Purpose of Disbursement Telephone	Category/Type 001	<b>Transaction ID : SB17-EX7837</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Telephone
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2011
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 134.18
City Carol Stream	State IL Zip Code 60197	
Purpose of Disbursement Telephone	Category/Type 001	<b>Transaction ID : SB17-EX7889</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Telephone
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	299.96
<b>TOTAL</b> 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 58 OF 121	
	<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) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 131.63
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telephone	<b>Transaction ID : SB17-EX8007</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Telephone
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ronald Nocco</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address 1416 Philadelphia Street		Amount of Each Disbursement this Period 305.89
City Indiana	State PA	
Zip Code 15701	Purpose of Disbursement Travel Expense Reimbursement	<b>Transaction ID : SB17-EX8010</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Travel Expense Reimbursement
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Fundraising By Net LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2011
Mailing Address 1101 Pennsylvania Avenue NW Fl 6		Amount of Each Disbursement this Period 11.90
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Bank Service Charge	<b>Transaction ID : SB17-EX7877</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Bank Service Charge
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	449.42
<b>TOTAL</b> 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 59 OF 121			
	<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) <b>A. Fundraising By Net LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2011
Mailing Address 1101 Pennsylvania Avenue NW FI 6			Amount of Each Disbursement this Period 20.00 <b>Transaction ID : SB17-EX7878</b>
City Washington	State DC	Zip Code 20004	
Purpose of Disbursement Bank Service Charge	Candidate Name		Bank Service Charge
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary		
State: District:	Category/Type 001		

Full Name (Last, First, Middle Initial) <b>B. Fundraising By Net LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2011
Mailing Address 1101 Pennsylvania Avenue NW FI 6			Amount of Each Disbursement this Period 0.38 <b>Transaction ID : SB17-EX7879</b>
City Washington	State DC	Zip Code 20004	
Purpose of Disbursement Bank Service Charge	Candidate Name		Bank Service Charge
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary		
State: District:	Category/Type 001		

Full Name (Last, First, Middle Initial) <b>c. Fundraising By Net LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2011
Mailing Address 1101 Pennsylvania Avenue NW FI 6			Amount of Each Disbursement this Period 29.50 <b>Transaction ID : SB17-EX7996</b>
City Washington	State DC	Zip Code 20004	
Purpose of Disbursement Bank Service Charge	Candidate Name		Bank Service Charge
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary		
State: District:	Category/Type 001		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	49.88
<b>TOTAL</b> 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 60 OF 121	
	<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) <b>A. Fundraising By Net LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2011	
Mailing Address 1101 Pennsylvania Avenue NW FI 6			Amount of Each Disbursement this Period 40.00	
City Washington	State DC	Zip Code 20004	Transaction ID : <b>SB17-EX7997</b>	
Purpose of Disbursement Bank Service Charge		Category/ Type 001	Bank Service Charge	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Fundraising By Net LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2011	
Mailing Address 1101 Pennsylvania Avenue NW FI 6			Amount of Each Disbursement this Period 0.38	
City Washington	State DC	Zip Code 20004	Transaction ID : <b>SB17-EX7998</b>	
Purpose of Disbursement Bank Service Charge		Category/ Type 001	Bank Service Charge	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Fundraising By Net LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2011	
Mailing Address 1101 Pennsylvania Avenue NW FI 6			Amount of Each Disbursement this Period 88.50	
City Washington	State DC	Zip Code 20004	Transaction ID : <b>SB17-EX8029</b>	
Purpose of Disbursement Bank Service Charge		Category/ Type 001	Bank Service Charge	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	128.88
<b>TOTAL</b> 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 61 OF 121	
	<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) <b>A. Fundraising By Net LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2011	
Mailing Address 1101 Pennsylvania Avenue NW FI 6			Amount of Each Disbursement this Period 120.00	
City Washington	State DC	Zip Code 20004	Transaction ID : SB17-EX8030	
Purpose of Disbursement Bank Service Charge		Category/ Type 001	Bank Service Charge	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Fundraising By Net LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2011	
Mailing Address 1101 Pennsylvania Avenue NW FI 6			Amount of Each Disbursement this Period 0.76	
City Washington	State DC	Zip Code 20004	Transaction ID : SB17-EX8031	
Purpose of Disbursement Bank Service Charge		Category/ Type 001	Bank Service Charge	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. American Express</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2011	
Mailing Address PO Box 1270			Amount of Each Disbursement this Period 9970.92	
City Newark	State NJ	Zip Code 07101	Transaction ID : SB17-EX7816	
Purpose of Disbursement Credit Card Paid by American Express		Category/ Type 003	Credit Card Paid by American Express	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10091.68
<b>TOTAL</b> 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 62 OF 121			
	<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) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2011
Mailing Address 1200 E Algonquin Road		Amount of Each Disbursement this Period 1072.40
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Airplane 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX7772 <b>[MEMO ITEM]</b> Airline Tickets
State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2011
Mailing Address 1200 E Algonquin Road		Amount of Each Disbursement this Period 502.70
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Airplane 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX7773 <b>[MEMO ITEM]</b> Airline Ticket
State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	

Full Name (Last, First, Middle Initial) <b>C. Sonoma Restaurant and Wine Bar</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2011
Mailing Address 223 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 897.75
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX7797 <b>[MEMO ITEM]</b> Fundraising Event
State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 63 OF 121			
	<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) <b>A. The Westin Book</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2011
Mailing Address 1114 Washington Boulevard		Amount of Each Disbursement this Period 389.85
City Detroit State MI Zip Code 48226	Purpose of Disbursement Lodging 002 Category/Type	
Candidate Name		Transaction ID : SB17-EX7774
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		[MEMO ITEM] Lodging

Full Name (Last, First, Middle Initial) <b>B. The Westin Book</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2011
Mailing Address 1114 Washington Boulevard		Amount of Each Disbursement this Period 389.85
City Detroit State MI Zip Code 48226	Purpose of Disbursement Lodging 002 Category/Type	
Candidate Name		Transaction ID : SB17-EX7775
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		[MEMO ITEM] Lodging

Full Name (Last, First, Middle Initial) <b>c. The Pickle</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2011
Mailing Address 88 E. Broad Street		Amount of Each Disbursement this Period 15.17
City Columbus State OH Zip Code 43215	Purpose of Disbursement Meals 002 Category/Type	
Candidate Name		Transaction ID : SB17-EX7778
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		[MEMO ITEM] Meals

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 64 OF 121			
	<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) <b>A. US Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2011
Mailing Address 525 Allegheny Street		Amount of Each Disbursement this Period 44.00
City Hollidaysburg	State PA Zip Code 16648	
Purpose of Disbursement Postage	Category/Type 001	<b>Transaction ID : SB17-EX7798</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Postage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wolfgang Puck</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2011
Mailing Address Building 6 - Ohare Field		Amount of Each Disbursement this Period 23.51
City Amf Ohare	State IL Zip Code 60666	
Purpose of Disbursement Meals	Category/Type 002	<b>Transaction ID : SB17-EX7799</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Meals
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Joynt</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2011
Mailing Address 650 N Dearborn Street		Amount of Each Disbursement this Period 24.00
City Chicago	State IL Zip Code 60654	
Purpose of Disbursement Meals	Category/Type 002	<b>Transaction ID : SB17-EX7800</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Meals
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 65 OF 121			
	<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) <b>A. Paradies</b>		Date of Disbursement MM / DD / YYYY 05 / 18 / 2011
Mailing Address National Airport		Amount of Each Disbursement this Period 16.82
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Office Expenses	Transaction ID : SB17-EX7802
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Supplies
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Chicago Taxi 1</b>		Date of Disbursement MM / DD / YYYY 05 / 18 / 2011
Mailing Address 3703 21st Street		Amount of Each Disbursement this Period 48.30
City Long Island City	State NY	
Zip Code 11101	Purpose of Disbursement Taxi/Car/Bus Expense	Transaction ID : SB17-EX7803
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Taxi
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Red Top Cab Co Of Arlington</b>		Date of Disbursement MM / DD / YYYY 05 / 18 / 2011
Mailing Address 1984 Issac Newton Square W		Amount of Each Disbursement this Period 11.95
City Reston	State VA	
Zip Code 20190	Purpose of Disbursement Taxi/Car/Bus Expense	Transaction ID : SB17-EX7804
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Taxi
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 66 OF 121			
	<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) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2011
Mailing Address 1200 E Algonquin Road		Amount of Each Disbursement this Period 14.00
City Elk Grove Village	State IL	Zip Code 60007
Purpose of Disbursement Airplane	Category/Type 002	
Candidate Name	Transaction ID : SB17-EX7779	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Airline Fees
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Quartino</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2011
Mailing Address 626 North State		Amount of Each Disbursement this Period 50.00
City Chicago	State IL	Zip Code 60610
Purpose of Disbursement Meals	Category/Type 002	
Candidate Name	Transaction ID : SB17-EX7780	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Meals
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Westin Book</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2011
Mailing Address 1114 Washington Boulevard		Amount of Each Disbursement this Period 283.80
City Detroit	State MI	Zip Code 48226
Purpose of Disbursement Lodging	Category/Type 002	
Candidate Name	Transaction ID : SB17-EX7776	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Lodging
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 67 OF 121			
	<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) <b>A. The Westin Book</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2011
Mailing Address 1114 Washington Boulevard		Amount of Each Disbursement this Period 35.68
City Detroit	State MI	Zip Code 48226
Purpose of Disbursement Lodging	Category/Type 002	
Candidate Name	Transaction ID : SB17-EX7777	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	[MEMO ITEM] Lodging
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	

Full Name (Last, First, Middle Initial) <b>B. Harry Caray's Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2011
Mailing Address 33 W Kinzie Street		Amount of Each Disbursement this Period 85.23
City Chicago	State IL	Zip Code 60654
Purpose of Disbursement Meals	Category/Type 002	
Candidate Name	Transaction ID : SB17-EX7805	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	[MEMO ITEM] Meals
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Data</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2011
Mailing Address 12525 Cingular Way		Amount of Each Disbursement this Period 25.00
City Alpharetta	State GA	Zip Code 30004
Purpose of Disbursement Telephone	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX7806	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	[MEMO ITEM] Telephone
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 68 OF 121	
	<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. Tavern At The Park**

Full Name (Last, First, Middle Initial)  
Mailing Address 130 E Randolph Street

City Chicago State IL Zip Code 60601

Purpose of Disbursement Meals  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) 2012 Primary

State: District:

Date of Disbursement: 05 / 19 / 2011

Amount of Each Disbursement this Period: 41.97

Transaction ID : SB17-EX7807

**[MEMO ITEM]**  
Meals

**B. Taxicab Transportation**

Full Name (Last, First, Middle Initial)  
Mailing Address 5200 N Otto Avenue

City Chicago State IL Zip Code 60656

Purpose of Disbursement Taxi/Car/Bus Expense  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) 2012 Primary

State: District:

Date of Disbursement: 05 / 20 / 2011

Amount of Each Disbursement this Period: 43.05

Transaction ID : SB17-EX7808

**[MEMO ITEM]**  
Taxi

**c. Omni Chicago Hotel**

Full Name (Last, First, Middle Initial)  
Mailing Address 676 North Michigan Avenue

City Chicago State IL Zip Code 60611

Purpose of Disbursement Lodging  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) 2012 Primary

State: District:

Date of Disbursement: 05 / 20 / 2011

Amount of Each Disbursement this Period: 416.42

Transaction ID : SB17-EX7809

**[MEMO ITEM]**  
Lodging

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 121			
	<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. Omni Chicago Hotel**

Full Name (Last, First, Middle Initial)  
Mailing Address 676 North Michigan Avenue

City Chicago State IL Zip Code 60611

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 05 / 20 / 2011

Amount of Each Disbursement this Period: 28.22

Transaction ID : SB17-EX7810

**[MEMO ITEM]**  
Lodging

**B. The Joynt**

Full Name (Last, First, Middle Initial)  
Mailing Address 650 N Dearborn Street

City Chicago State IL Zip Code 60654

Purpose of Disbursement Meals

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 05 / 20 / 2011

Amount of Each Disbursement this Period: 37.00

Transaction ID : SB17-EX7801

**[MEMO ITEM]**  
Meals

**c. Choice Taxi Association**

Full Name (Last, First, Middle Initial)  
Mailing Address 6550 N. Clark Street

City Chicago State IL Zip Code 60626

Purpose of Disbursement Taxi/Car/Bus Expense

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 05 / 20 / 2011

Amount of Each Disbursement this Period: 45.65

Transaction ID : SB17-EX7781

**[MEMO ITEM]**  
Taxi

**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 70 OF 121			
	<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) <b>A. Omni Chicago Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2011
Mailing Address 676 North Michigan Avenue		Amount of Each Disbursement this Period 12.59
City Chicago	State IL Zip Code 60611	
Purpose of Disbursement Lodging	Category/Type 002	Transaction ID : SB17-EX7782
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Lodging
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Omni Chicago Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2011
Mailing Address 676 North Michigan Avenue		Amount of Each Disbursement this Period 474.17
City Chicago	State IL Zip Code 60611	
Purpose of Disbursement Lodging	Category/Type 002	Transaction ID : SB17-EX7783
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Lodging
State: District:		

Full Name (Last, First, Middle Initial) <b>c. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2011
Mailing Address 5620 University Pkwy		Amount of Each Disbursement this Period 244.80
City Winston Salem	State NC Zip Code 27105	
Purpose of Disbursement Airplane	Category/Type 002	Transaction ID : SB17-EX7784
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Airline Ticket
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 71 OF 121			
	<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) <b>A. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2011
Mailing Address 5620 University Pkwy		Amount of Each Disbursement this Period 150.00
City Winston Salem	State NC	Zip Code 27105
Purpose of Disbursement Airplane	Category/Type 002	
Candidate Name	Transaction ID : SB17-EX7785	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Airline Fees
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Charleston Crab House</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2011
Mailing Address 41 S Market Street		Amount of Each Disbursement this Period 30.55
City Charleston	State SC	Zip Code 29401
Purpose of Disbursement Meals	Category/Type 002	
Candidate Name	Transaction ID : SB17-EX7786	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Meals
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Fast &amp; French Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2011
Mailing Address DbA Gaulart & Malicet 68 Devereaux Avenue		Amount of Each Disbursement this Period 30.00
City Charleston	State SC	Zip Code 29403
Purpose of Disbursement Meals	Category/Type 002	
Candidate Name	Transaction ID : SB17-EX7787	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Meals
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 72 OF 121			
	<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) <b>A. Halls Chophouse</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2011
Mailing Address 434 King Street		Amount of Each Disbursement this Period 445.10
City Charleston	State SC	
Zip Code 29403	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX7788
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Fundraising Event
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Belga Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2011
Mailing Address 514 Eighth Street SE		Amount of Each Disbursement this Period 116.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Meals	Transaction ID : SB17-EX7789
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Meals
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Marquee Limo Co</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2011
Mailing Address 1966 Sandcroft Drive		Amount of Each Disbursement this Period 40.00
City Charleston	State SC	
Zip Code 29407	Purpose of Disbursement Taxi/Car/Bus Expense	Transaction ID : SB17-EX7791
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Taxi Service
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 73 OF 121			
	<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) <b>A. Charleston Place Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2011
Mailing Address 205 Meeting Street		Amount of Each Disbursement this Period 6.10
City Charleston State SC Zip Code 29401	Purpose of Disbursement Meals	
Candidate Name	Category/Type 002	Transaction ID : SB17-EX7790
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		[MEMO ITEM] Meals

Full Name (Last, First, Middle Initial) <b>B. Union Street Public House</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2011
Mailing Address 121 S. Union Street		Amount of Each Disbursement this Period 620.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Meals	
Candidate Name	Category/Type 002	Transaction ID : SB17-EX7792
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		[MEMO ITEM] Staff Meeting

Full Name (Last, First, Middle Initial) <b>c. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2011
Mailing Address 10524 Sharpsburg Pike		Amount of Each Disbursement this Period 43.50
City Hagerstown State MD Zip Code 21740	Purpose of Disbursement Vehicle Expenses	
Candidate Name	Category/Type 001	Transaction ID : SB17-EX7793
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		[MEMO ITEM] Gasoline

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 74 OF 121			
	<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) <b>A. Samuel Becketts Irish Pub</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2011
Mailing Address 2800 S Randolph Street Unit 110		Amount of Each Disbursement this Period 185.00
City Arlington	State VA	
Zip Code 22206	Purpose of Disbursement Meals	Transaction ID : SB17-EX7794
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Meals
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Charleston Place Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2011
Mailing Address 205 Meeting Street		Amount of Each Disbursement this Period 1274.10
City Charleston	State SC	
Zip Code 29401	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX7795
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Fundraising Event
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Biergarten Haus</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2011
Mailing Address 1355 H Street		Amount of Each Disbursement this Period 57.67
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Meals	Transaction ID : SB17-EX7811
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Meals
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 75 OF 121			
	<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. Biergarten Haus**

Full Name (Last, First, Middle Initial)  
Mailing Address 1355 H Street

City Washington State DC Zip Code 20002

Purpose of Disbursement Meals  
Candidate Name

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

State: District:

Date of Disbursement: 06 / 04 / 2011

Amount of Each Disbursement this Period: 75.00

Transaction ID : SB17-EX7812

**[MEMO ITEM]**  
Meals

**B. Corporate Graphics**

Full Name (Last, First, Middle Initial)  
Mailing Address 5312 N Elston Avenue

City Chicago State IL Zip Code 60630

Purpose of Disbursement Office Expenses  
Candidate Name

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

State: District:

Date of Disbursement: 06 / 07 / 2011

Amount of Each Disbursement this Period: 583.00

Transaction ID : SB17-EX7813

**[MEMO ITEM]**  
Fundraising Expenses

**c. Levy Restaurant At MCI Center**

Full Name (Last, First, Middle Initial)  
Mailing Address 601 F Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement Fundraising  
Candidate Name

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

State: District:

Date of Disbursement: 06 / 09 / 2011

Amount of Each Disbursement this Period: 806.19

Transaction ID : SB17-EX7814

**[MEMO ITEM]**  
Fundraiser

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 121	
	<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) <b>A. Levy Restaurant At MCI Center</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2011	
Mailing Address 601 F Street NW			Amount of Each Disbursement this Period 165.18	
City Washington	State DC	Zip Code 20004	Transaction ID : SB17-EX7815	
Purpose of Disbursement Fundraising		Category/ Type 003	[MEMO ITEM] Fundraiser	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Shell Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2011	
Mailing Address 10524 Sharpsburg Pike			Amount of Each Disbursement this Period 69.65	
City Hagerstown	State MD	Zip Code 21740	Transaction ID : SB17-EX7796	
Purpose of Disbursement Vehicle Expenses		Category/ Type 001	[MEMO ITEM] Gasoline	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. American Express</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2011	
Mailing Address PO Box 1270			Amount of Each Disbursement this Period 1545.50	
City Newark	State NJ	Zip Code 07101	Transaction ID : SB17-EX7854	
Purpose of Disbursement Credit Card Paid by American Express		Category/ Type 002	Credit Card Paid by American Express	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1545.50
<b>TOTAL</b> 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 77 OF 121			
	<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) <b>A. Capitol Hill Club</b>			Date of Disbursement MM / DD / YYYY 06 / 15 / 2011
Mailing Address 300 First Street SE			Amount of Each Disbursement this Period 154.16
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Meals		Category/ Type 002	<b>Transaction ID : SB17-EX7841</b>  <b>[MEMO ITEM]</b> Various Meals
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>			Date of Disbursement MM / DD / YYYY 06 / 15 / 2011
Mailing Address 400 N Capitol Street NW			Amount of Each Disbursement this Period 218.00
City Washington	State DC	Zip Code 20001	
Purpose of Disbursement Train		Category/ Type 002	<b>Transaction ID : SB17-EX7842</b>  <b>[MEMO ITEM]</b> Train
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Amtrak</b>			Date of Disbursement MM / DD / YYYY 06 / 16 / 2011
Mailing Address 400 N Capitol Street NW			Amount of Each Disbursement this Period 218.00
City Washington	State DC	Zip Code 20001	
Purpose of Disbursement Train		Category/ Type 002	<b>Transaction ID : SB17-EX7843</b>  <b>[MEMO ITEM]</b> Train
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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 78 OF 121	
	<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) <b>A. Volta Live</b>		Date of Disbursement MM / DD / YYYY 06 / 17 / 2011
Mailing Address 2200 Wilson Blvd Suite 102-330		Amount of Each Disbursement this Period 250.00
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Campaign Consultant	<b>Transaction ID : SB17-EX7844</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Consulting Service
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Data</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2011
Mailing Address 12525 Cingular Way		Amount of Each Disbursement this Period 25.00
City Alpharetta	State GA	
Zip Code 30004	Purpose of Disbursement Telephone	<b>Transaction ID : SB17-EX7848</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Telephone
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Bull Feathers</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2011
Mailing Address 410 First Street SE		Amount of Each Disbursement this Period 49.80
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Meals	<b>Transaction ID : SB17-EX7849</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Meals
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 79 OF 121	
	<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) <b>A. Freedompay Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2011
Mailing Address 17 Campus Blvd Suite 100		Amount of Each Disbursement this Period 127.82
City Newtown Square	State PA	
Purpose of Disbursement Meals	Zip Code 19073	Transaction ID : SB17-EX7845
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Meals
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Lounge</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2011
Mailing Address 231 Pennsylvania Ave SE		Amount of Each Disbursement this Period 32.50
City Washington	State DC	
Purpose of Disbursement Meals	Zip Code 20003	Transaction ID : SB17-EX7850
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Meals
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Exxon</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2011
Mailing Address 542 South Center Street		Amount of Each Disbursement this Period 51.20
City Ebensburg	State PA	
Purpose of Disbursement Vehicle Expenses	Zip Code 15931	Transaction ID : SB17-EX7846
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Gasoline
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 80 OF 121	
	<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) <b>A. Al Crostino</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2011
Mailing Address 1324 U Street NW		Amount of Each Disbursement this Period 125.00
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement Meals	Transaction ID : SB17-EX7847
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Meals
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2011
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 38.00
City Newark	State NJ	
Zip Code 07101	Purpose of Disbursement Bank Service Charge	Transaction ID : SB17-EX7852
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Credit Card Fees
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Techworld</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2011
Mailing Address 999 Ninth Street NW		Amount of Each Disbursement this Period 14.00
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Parking And Tolls	Transaction ID : SB17-EX7851
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Parking Fees
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 81 OF 121			
	<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) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2011
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 242.02
City Newark State NJ Zip Code 07101	Purpose of Disbursement Bank Service Charge	Transaction ID : SB17-EX7853
Candidate Name	Category/Type 001	[MEMO ITEM] Credit Card Fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2011
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 18121.51
City Newark State NJ Zip Code 07101	Purpose of Disbursement Credit Card Paid by American Express	Transaction ID : SB17-EX7931
Candidate Name	Category/Type 002	Credit Card Paid by American Express
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Tom and Joes Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2011
Mailing Address 1201 13th Avenue		Amount of Each Disbursement this Period 19.86
City Altoona State PA Zip Code 16601	Purpose of Disbursement Meals	Transaction ID : SB17-EX7908
Candidate Name	Category/Type 002	[MEMO ITEM] Meals
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	18121.51
<b>TOTAL</b> 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 82 OF 121	
	<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) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2011
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 1819.17
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Meals	Category/Type 002	<b>Transaction ID : SB17-EX7890</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Various Meals
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nemaacolin Woodlands Resort &amp; Spa</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2011
Mailing Address 1001 LaFayette Drive		Amount of Each Disbursement this Period 3100.55
City Farmington	State PA Zip Code 15437	
Purpose of Disbursement Lodging	Category/Type 002	<b>Transaction ID : SB17-EX7893</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Lodging for NRCC event
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Federal City Caterers Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2011
Mailing Address 1119 12th Street NW		Amount of Each Disbursement this Period 1500.00
City Washington	State DC Zip Code 20005	
Purpose of Disbursement Fundraising	Category/Type 003	<b>Transaction ID : SB17-EX7913</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Fundraiser Catering
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 83 OF 121	
	<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) <b>A. National Pike Restaurant</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2011	
Mailing Address 3930 National Pike			Amount of Each Disbursement this Period 18.00	
City Farmington	State PA	Zip Code 15437	Transaction ID : SB17-EX7914	
Purpose of Disbursement Meals		Category/ Type 002	[MEMO ITEM] Meals	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Nemaconlin Woodlands Resort &amp; Spa</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2011	
Mailing Address 1001 LaFayette Drive			Amount of Each Disbursement this Period 42.16	
City Farmington	State PA	Zip Code 15437	Transaction ID : SB17-EX7915	
Purpose of Disbursement Meals		Category/ Type 002	[MEMO ITEM] Meals	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Nemaconlin Woodlands Resort &amp; Spa</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2011	
Mailing Address 1001 LaFayette Drive			Amount of Each Disbursement this Period 667.42	
City Farmington	State PA	Zip Code 15437	Transaction ID : SB17-EX7916	
Purpose of Disbursement Lodging		Category/ Type 002	[MEMO ITEM] Lodging	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 84 OF 121			
	<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. Nemacolin Woodlands Resort & Spa**

Full Name (Last, First, Middle Initial)  
Mailing Address 1001 LaFayette Drive

City Farmington State PA Zip Code 15437

Purpose of Disbursement Lodging  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) 2012 Primary

State: District:

Date of Disbursement: 07 / 17 / 2011

Amount of Each Disbursement this Period: 110.00

Transaction ID : SB17-EX7917

**[MEMO ITEM]**  
Lodging

**B. Omni William Penn Hotel**

Full Name (Last, First, Middle Initial)  
Mailing Address 530 William Penn Place

City Pittsburgh State PA Zip Code 15219

Purpose of Disbursement Lodging  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) 2012 Primary

State: District:

Date of Disbursement: 07 / 17 / 2011

Amount of Each Disbursement this Period: 272.15

Transaction ID : SB17-EX7918

**[MEMO ITEM]**  
Lodging

**C. Omni William Penn Hotel**

Full Name (Last, First, Middle Initial)  
Mailing Address 530 William Penn Place

City Pittsburgh State PA Zip Code 15219

Purpose of Disbursement Meals  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) 2012 Primary

State: District:

Date of Disbursement: 07 / 17 / 2011

Amount of Each Disbursement this Period: 9.95

Transaction ID : SB17-EX7919

**[MEMO ITEM]**  
Meals

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 85 OF 121	
	<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. Nemacolin Woodlands Resort & Spa**

Full Name (Last, First, Middle Initial)  
Mailing Address 1001 LaFayette Drive

City Farmington State PA Zip Code 15437

Purpose of Disbursement Lodging  
Candidate Name

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

State: District:

Date of Disbursement: 07 / 17 / 2011

Amount of Each Disbursement this Period: 493.50

Transaction ID : SB17-EX7894

**[MEMO ITEM]**  
Lodging

**B. Nemacolin Woodlands Resort & Spa**

Full Name (Last, First, Middle Initial)  
Mailing Address 1001 LaFayette Drive

City Farmington State PA Zip Code 15437

Purpose of Disbursement Lodging  
Candidate Name

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

State: District:

Date of Disbursement: 07 / 18 / 2011

Amount of Each Disbursement this Period: 777.95

Transaction ID : SB17-EX7895

**[MEMO ITEM]**  
Lodging

**C. Omni William Penn Hotel**

Full Name (Last, First, Middle Initial)  
Mailing Address 530 William Penn Place

City Pittsburgh State PA Zip Code 15219

Purpose of Disbursement Lodging  
Candidate Name

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

State: District:

Date of Disbursement: 07 / 18 / 2011

Amount of Each Disbursement this Period: 158.10

Transaction ID : SB17-EX7896

**[MEMO ITEM]**  
Lodging

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 121			
	<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) <b>A. Alla Famiglia</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2011
Mailing Address 804 E Warrington Avenue		Amount of Each Disbursement this Period 345.44
City Pittsburgh	State PA Zip Code 15210	
Purpose of Disbursement Fundraising	Candidate Name	Transaction ID : SB17-EX7920
Category/Type 003		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Fundraiser catering
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Data</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2011
Mailing Address 12525 Cingular Way		Amount of Each Disbursement this Period 25.00
City Alpharetta	State GA Zip Code 30004	
Purpose of Disbursement Telephone	Candidate Name	Transaction ID : SB17-EX7921
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Telephone
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Federal City Caterers Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2011
Mailing Address 1119 12th Street NW		Amount of Each Disbursement this Period 610.50
City Washington	State DC Zip Code 20005	
Purpose of Disbursement Fundraising	Candidate Name	Transaction ID : SB17-EX7922
Category/Type 003		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Fundraiser catering
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 87 OF 121			
	<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) <b>A. Pittsburgh Taxi</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2011
Mailing Address 1101 Beaver Avenue		Amount of Each Disbursement this Period 40.60
City Pittsburgh	State PA	Zip Code 15233
Purpose of Disbursement Taxi/Car/Bus Expense	Category/Type 002	
Candidate Name	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:	District:

Transaction ID : SB17-EX7923  
**[MEMO ITEM]**  
Taxi Service

Full Name (Last, First, Middle Initial) <b>B. Exxon</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2011
Mailing Address 542 South Center Street		Amount of Each Disbursement this Period 61.11
City Ebensburg	State PA	Zip Code 15931
Purpose of Disbursement Vehicle Expenses	Category/Type 001	
Candidate Name	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:	District:

Transaction ID : SB17-EX7897  
**[MEMO ITEM]**  
Gasoline

Full Name (Last, First, Middle Initial) <b>c. Schneiders Of Capitol Hill</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2011
Mailing Address 300 Massachusetts Avenue NE		Amount of Each Disbursement this Period 41.33
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Office Expenses	Category/Type 001	
Candidate Name	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:	District:

Transaction ID : SB17-EX7898  
**[MEMO ITEM]**  
Gifts

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 88 OF 121			
	<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) <b>A. The Mercersburg Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2011
Mailing Address 405 S Main Street		Amount of Each Disbursement this Period 712.20
City Mercersburg	State PA	
Zip Code 17236	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX7924
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Reception
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Benjamin Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2011
Mailing Address 125 East 50th Street		Amount of Each Disbursement this Period 3000.00
City New York	State NY	
Zip Code 10022	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX7925
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Fundraiser Deposit
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Sonoma Restaurant and Wine Bar</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2011
Mailing Address 223 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1316.70
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX7926
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Fundraiser Catering
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 89 OF 121	
	<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) <b>A. Freedompay Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2011
Mailing Address 17 Campus Blvd Suite 100		Amount of Each Disbursement this Period 72.90
City Newtown Square	State PA	
Zip Code 19073		Transaction ID : SB17-EX7899
Purpose of Disbursement Meals	Category/ Type 002	
Candidate Name		[MEMO ITEM] Meals
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Armands Chicago Pizza</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2011
Mailing Address 226 Massachusetts Avenue NE		Amount of Each Disbursement this Period 165.91
City Washington	State DC	
Zip Code 20002		Transaction ID : SB17-EX7900
Purpose of Disbursement Meals	Category/ Type 002	
Candidate Name		[MEMO ITEM] Members Meeting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Subway</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2011
Mailing Address 430 Eighth Street SE		Amount of Each Disbursement this Period 56.10
City Washington	State DC	
Zip Code 20003		Transaction ID : SB17-EX7901
Purpose of Disbursement Meals	Category/ Type 002	
Candidate Name		[MEMO ITEM] Meals
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 90 OF 121	
	<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) <b>A. Cafe Italia</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2011
Mailing Address 519 South 23rd Street		Amount of Each Disbursement this Period 112.00
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Meals	Transaction ID : <b>SB17-EX7930</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Constituent/Intern Meeting
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMEX Travel Online</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2011
Mailing Address 3150 Sabre Drive		Amount of Each Disbursement this Period 200.17
City Southlake	State TX	
Zip Code 76092	Purpose of Disbursement Airplane	Transaction ID : <b>SB17-EX7891</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Airline Tickets
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Chuckwagon</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2011
Mailing Address 305 N Kimberly Avenue		Amount of Each Disbursement this Period 45.00
City Somerset	State PA	
Zip Code 15501	Purpose of Disbursement Meals	Transaction ID : <b>SB17-EX7910</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Meals
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 91 OF 121			
	<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) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2011
Mailing Address 1200 E Algonquin Road		Amount of Each Disbursement this Period 615.60
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Airplane 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX7902  [MEMO ITEM] Airline tickets
State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	

Full Name (Last, First, Middle Initial) <b>B. Sheetz Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011
Mailing Address 5700 Sixth Avenue		Amount of Each Disbursement this Period 50.00
City Altoona State PA Zip Code 16602	Purpose of Disbursement Vehicle Expenses 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX7903  [MEMO ITEM] Gasoline
State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	

Full Name (Last, First, Middle Initial) <b>c. The Orchards</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2011
Mailing Address 1580 Orchard Drive		Amount of Each Disbursement this Period 331.07
City Chambersburg State PA Zip Code 17201	Purpose of Disbursement Meals 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX7911  [MEMO ITEM] Campaign meeting
State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 92 OF 121			
	<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) <b>A. Main Street Deli and Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2011
Mailing Address 177 South Main Street		Amount of Each Disbursement this Period 62.74
City Chambersburg	State PA	
Zip Code 17201	Purpose of Disbursement Meals	[MEMO ITEM] Meals
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Continental Airlines Elec Ticketing</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2011
Mailing Address 600 Jefferson Street		Amount of Each Disbursement this Period 479.40
City Houston	State TX	
Zip Code 77002	Purpose of Disbursement Airplane	[MEMO ITEM] Airline Tickets
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Continental Airlines Elec Ticketing</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2011
Mailing Address 600 Jefferson Street		Amount of Each Disbursement this Period 25.00
City Houston	State TX	
Zip Code 77002	Purpose of Disbursement Airplane	[MEMO ITEM] Airline Fees
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 93 OF 121	
	<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) <b>A. Bull Feathers</b>		Date of Disbursement MM / DD / YYYY 08 / 11 / 2011
Mailing Address 410 First Street SE		Amount of Each Disbursement this Period 76.69
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Meals	Transaction ID : SB17-EX7929
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Meals
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Pit O'Briens</b>		Date of Disbursement MM / DD / YYYY 08 / 11 / 2011
Mailing Address Lndside Bldg Mezzanine B1		Amount of Each Disbursement this Period 54.00
City Pittsburgh	State PA	
Zip Code 15231	Purpose of Disbursement Meals	Transaction ID : SB17-EX7904
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Meals
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sunoco</b>		Date of Disbursement MM / DD / YYYY 08 / 11 / 2011
Mailing Address 1700 Seventh Avenue		Amount of Each Disbursement this Period 45.65
City Altoona	State PA	
Zip Code 16602	Purpose of Disbursement Vehicle Expenses	Transaction ID : SB17-EX7905
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Gasoline
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 94 OF 121			
	<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) <b>A. Hertz Rent-A-Car</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2011
Mailing Address 520 East Plank Road		Amount of Each Disbursement this Period 79.75
City Altoona State PA Zip Code 16602	Purpose of Disbursement Taxi/Car/Bus Expense	
Candidate Name	Category/Type 002	<b>Transaction ID : SB17-EX7906</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		<b>[MEMO ITEM]</b> Car Rental

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2011
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 293.89
City Washington State DC Zip Code 20003	Purpose of Disbursement Meals	
Candidate Name	Category/Type 002	<b>Transaction ID : SB17-EX7892</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		<b>[MEMO ITEM]</b> Various Meals

Full Name (Last, First, Middle Initial) <b>C. Hertz Rent-A-Car</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2011
Mailing Address 520 East Plank Road		Amount of Each Disbursement this Period 24.95
City Altoona State PA Zip Code 16602	Purpose of Disbursement Taxi/Car/Bus Expense	
Candidate Name	Category/Type 002	<b>Transaction ID : SB17-EX7907</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		<b>[MEMO ITEM]</b> Car Rental fees

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 95 OF 121			
	<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) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2011
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 3083.61
City Newark	State NJ	
Zip Code 07101	Purpose of Disbursement Credit Card Paid by American Express	Transaction ID : SB17-EX7982
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Credit Card Paid by American Express
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2011
Mailing Address 1200 E Algonquin Road		Amount of Each Disbursement this Period 25.00
City Elk Grove Village	State IL	
Zip Code 60007	Purpose of Disbursement Airplane	Transaction ID : SB17-EX7950
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Airline Charges
State: District:		

Full Name (Last, First, Middle Initial) <b>c. La Botte</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2011
Mailing Address 620 Santa Monica Blvd		Amount of Each Disbursement this Period 135.00
City Santa Monica	State CA	
Zip Code 90401	Purpose of Disbursement Meals	Transaction ID : SB17-EX7951
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Meals
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3083.61
<b>TOTAL</b> 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 96 OF 121			
	<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. The Ambrose**

Full Name (Last, First, Middle Initial)  
Mailing Address 1255 20th Street

City Santa Monica State CA Zip Code 90404

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 08 / 15 / 2011

Amount of Each Disbursement this Period: 837.90

Transaction ID : SB17-EX7952

**[MEMO ITEM]**  
Lodging

**B. United Airlines**

Full Name (Last, First, Middle Initial)  
Mailing Address 1200 E Algonquin Road

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Airplane

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 08 / 16 / 2011

Amount of Each Disbursement this Period: 25.00

Transaction ID : SB17-EX7953

**[MEMO ITEM]**  
Airline charges

**C. Hertz Rent-A-Car**

Full Name (Last, First, Middle Initial)  
Mailing Address 520 East Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement Taxi/Car/Bus Expense

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 08 / 16 / 2011

Amount of Each Disbursement this Period: 458.15

Transaction ID : SB17-EX7954

**[MEMO ITEM]**  
Car Rental

**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 97 OF 121			
	<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) <b>A. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2011
Mailing Address 2521 Pacific Highway		Amount of Each Disbursement this Period 34.60
City San Diego	State CA Zip Code 92101	
Purpose of Disbursement Vehicle Expenses	Category/Type 001	<b>Transaction ID : SB17-EX7955</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Gasoline
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2011
Mailing Address 1200 E Algonquin Road		Amount of Each Disbursement this Period 100.00
City Elk Grove Village	State IL Zip Code 60007	
Purpose of Disbursement Airplane	Category/Type 002	<b>Transaction ID : SB17-EX7956</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Airline Charges
State: District:		

Full Name (Last, First, Middle Initial) <b>c. LJ Transportation Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2011
Mailing Address 1460 Morena Blvd		Amount of Each Disbursement this Period 36.00
City San Diego	State CA Zip Code 92110	
Purpose of Disbursement Taxi/Car/Bus Expense	Category/Type 002	<b>Transaction ID : SB17-EX7957</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Taxi
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 98 OF 121			
	<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) <b>A. AT&amp;T Data</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2011
Mailing Address 12525 Cingular Way		Amount of Each Disbursement this Period 25.00
City Alpharetta	State GA	Zip Code 30004
Purpose of Disbursement Telephone	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX7964	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Telephone
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hertz Rent-A-Car</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2011
Mailing Address 520 East Plank Road		Amount of Each Disbursement this Period 24.95
City Altoona	State PA	Zip Code 16602
Purpose of Disbursement Taxi/Car/Bus Expense	Category/Type 002	
Candidate Name	Transaction ID : SB17-EX7958	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Car Rental Fees
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Rex</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2011
Mailing Address 2401 Montana Avenue		Amount of Each Disbursement this Period 350.00
City Billings	State MT	Zip Code 59101
Purpose of Disbursement Meals	Category/Type 002	
Candidate Name	Transaction ID : SB17-EX7959	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Campaign Dinner
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 99 OF 121	
	<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. Bull Feathers**

Full Name (Last, First, Middle Initial)  
Mailing Address 410 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Meals  
Candidate Name

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

State: District:

Date of Disbursement: 08 / 23 / 2011

Amount of Each Disbursement this Period: 210.00

Transaction ID : SB17-EX7965

**[MEMO ITEM]**  
Meals

**B. Apple Store**

Full Name (Last, First, Middle Initial)  
Mailing Address 1100 S Hayes Street Lot P04-A

City Arlington State VA Zip Code 22202

Purpose of Disbursement Office Expenses  
Candidate Name

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

State: District:

Date of Disbursement: 08 / 27 / 2011

Amount of Each Disbursement this Period: 68.15

Transaction ID : SB17-EX7966

**[MEMO ITEM]**  
Computer Supplies

**c. Sheetz Inc**

Full Name (Last, First, Middle Initial)  
Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement Vehicle Expenses  
Candidate Name

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

State: District:

Date of Disbursement: 08 / 28 / 2011

Amount of Each Disbursement this Period: 57.00

Transaction ID : SB17-EX7960

**[MEMO ITEM]**  
Gasoline

**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 100 OF 121	
	<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) <b>A. Capitol Lounge</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2011
Mailing Address 231 Pennsylvania Ave SE		Amount of Each Disbursement this Period 300.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Meals	Transaction ID : SB17-EX7967
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Meals
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Tom and Joes Restaurant</b>		Date of Disbursement MM / DD / YYYY 09 / 02 / 2011
Mailing Address 1201 13th Avenue		Amount of Each Disbursement this Period 35.64
City Altoona	State PA	
Zip Code 16601	Purpose of Disbursement Meals	Transaction ID : SB17-EX7963
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Meals
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Get Go</b>		Date of Disbursement MM / DD / YYYY 09 / 02 / 2011
Mailing Address 200 Sophia Drive		Amount of Each Disbursement this Period 57.82
City Altoona	State PA	
Zip Code 16602	Purpose of Disbursement Vehicle Expenses	Transaction ID : SB17-EX7961
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	[MEMO ITEM] Gasoline
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 101 OF 121	
	<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. Life Style**

Full Name (Last, First, Middle Initial)  
Mailing Address 108 E. Pitt Street

City Bedford State PA Zip Code 15522

Purpose of Disbursement Meals  
Candidate Name

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

State: District:

Date of Disbursement: 09 / 10 / 2011

Amount of Each Disbursement this Period: 286.20

Transaction ID : SB17-EX7962

**[MEMO ITEM]**  
Campaign Dinner

**B. Bull Feathers**

Full Name (Last, First, Middle Initial)  
Mailing Address 410 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Meals  
Candidate Name

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

State: District:

Date of Disbursement: 09 / 12 / 2011

Amount of Each Disbursement this Period: 17.20

Transaction ID : SB17-EX7968

**[MEMO ITEM]**  
Meals

**c. First Commonwealth Bank**

Full Name (Last, First, Middle Initial)  
Mailing Address Credit Card Dept  
PO Box 0537

City Indiana State PA Zip Code 15701

Purpose of Disbursement Credit Card Paid by First Commonwealth Bank  
Candidate Name

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

State: District:

Date of Disbursement: 07 / 14 / 2011

Amount of Each Disbursement this Period: 113.00

Transaction ID : SB17-EX7824

Credit Card Paid by First Commonwealth Bank

**SUBTOTAL** of Disbursements This Page (optional) ..... 113.00

**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 102 OF 121			
	<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. Stan's Restaurant**

Full Name (Last, First, Middle Initial)  
Mailing Address 1029 Vermont Avenue NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Meals  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) 2012 Primary

State: District:

Date of Disbursement: 06 / 09 / 2011

Amount of Each Disbursement this Period: 113.00

Transaction ID : SB17-EX7823

**[MEMO ITEM]**  
Meals

**B. First Commonwealth Bank**

Full Name (Last, First, Middle Initial)  
Mailing Address Credit Card Dept  
PO Box 0537

City Indiana State PA Zip Code 15701

Purpose of Disbursement Credit Card Paid by First Commonwealth Bank  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) 2012 Primary

State: District:

Date of Disbursement: 08 / 16 / 2011

Amount of Each Disbursement this Period: 103.00

Transaction ID : SB17-EX7865

Credit Card Paid by First Commonwealth Bank

**c. First Commonwealth Bank**

Full Name (Last, First, Middle Initial)  
Mailing Address Credit Card Dept  
PO Box 0537

City Indiana State PA Zip Code 15701

Purpose of Disbursement Bank Service Charge  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) 2012 Primary

State: District:

Date of Disbursement: 06 / 30 / 2011

Amount of Each Disbursement this Period: 15.00

Transaction ID : SB17-EX7864

**[MEMO ITEM]**  
Annual Credit Card Fee

**SUBTOTAL** of Disbursements This Page (optional) ..... 103.00

**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 103 OF 121			
	<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) <b>A. US Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2011
Mailing Address 525 Allegheny Street		Amount of Each Disbursement this Period 88.00
City Hollidaysburg	State PA Zip Code 16648	
Purpose of Disbursement Postage	Category/Type 001	<b>Transaction ID : SB17-EX7863</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	<b>[MEMO ITEM]</b> Postage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sean Joyce</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address 617 Maryland Avenue NE		Amount of Each Disbursement this Period 600.00
City Washington	State DC Zip Code 20002	
Purpose of Disbursement Campaign services	Category/Type 001	<b>Transaction ID : SB17-EX7999</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Campaign services
State: District:		

Full Name (Last, First, Middle Initial) <b>c. JHZ Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2011
Mailing Address PO Box 412		Amount of Each Disbursement this Period 3000.00
City Harrisburg	State PA Zip Code 17108	
Purpose of Disbursement Fundraising Campaign Consulting	Category/Type 003	<b>Transaction ID : SB17-EX7770</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Fundraising Campaign Consulting
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3600.00
<b>TOTAL</b> 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 104 OF 121	
	<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) <b>A. JHZ Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2011
Mailing Address PO Box 412		Amount of Each Disbursement this Period 3000.00
City Harrisburg	State PA	
Zip Code 17108	Purpose of Disbursement Fundraising Campaign Consulting	<b>Transaction ID : SB17-EX7869</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Fundraising Campaign Consulting
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JHZ Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address PO Box 412		Amount of Each Disbursement this Period 3000.00
City Harrisburg	State PA	
Zip Code 17108	Purpose of Disbursement Fundraising Campaign Consulting	<b>Transaction ID : SB17-EX7940</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Fundraising Campaign Consulting
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Elizabeth Conatser</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2011
Mailing Address PO Box 29576		Amount of Each Disbursement this Period 4000.00
City Washington	State DC	
Zip Code 20017	Purpose of Disbursement Fundraising Consulting Fee - July 2011	<b>Transaction ID : SB17-EX7831</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Fundraising Consulting Fee - July 2011
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10000.00
<b>TOTAL</b> 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 105 OF 121	
	<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) <b>A. Elizabeth Conatser</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2011
Mailing Address PO Box 29576		Amount of Each Disbursement this Period 4000.00
City Washington	State DC	
Zip Code 20017	Purpose of Disbursement Fundraising Consulting Fee - August 2011	<b>Transaction ID : SB17-EX7832</b>
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Fundraising Consulting Fee - August 2011
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Elizabeth Conatser</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2011
Mailing Address PO Box 29576		Amount of Each Disbursement this Period 466.84
City Washington	State DC	
Zip Code 20017	Purpose of Disbursement Fundraising supplies	<b>Transaction ID : SB17-EX7882</b>
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Fundraising supplies
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Elizabeth Conatser</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2011
Mailing Address PO Box 29576		Amount of Each Disbursement this Period 4000.00
City Washington	State DC	
Zip Code 20017	Purpose of Disbursement Fundraising Consulting Fee - September 2011	<b>Transaction ID : SB17-EX7883</b>
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Fundraising Consulting Fee - September 2011
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8466.84
<b>TOTAL</b> 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 106 OF 121	
	<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) <b>A. 401 Group LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2011
Mailing Address 401 North Second Street		Amount of Each Disbursement this Period 817.94
City Harrisburg	State PA Zip Code 17101	
Purpose of Disbursement Invitations & Postage	Category/Type 001	<b>Transaction ID : SB17-EX7993</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Invitations & Postage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. New Century Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2011
Mailing Address 2931 E. Dublin-Granville Rd Suite 190		Amount of Each Disbursement this Period 2000.00
City Columbus	State OH Zip Code 43231	
Purpose of Disbursement Fundraising Consulting & Event Logistics	Category/Type 003	<b>Transaction ID : SB17-EX7868</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Fundraising Consulting & Event Logistics
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</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	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2817.94
<b>TOTAL</b> This Period (last page this line number only).....	72472.19

**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 107 OF 121	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bill Shuster for Congress**

Full Name (Last, First, Middle Initial) <b>A. Morrison Cove Blair Co. Republican Club</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2011
Mailing Address Fred Foreman 305 Campbell Avenue		Amount of Each Disbursement this Period 48.00
City Altoona	State PA Zip Code 16602	
Purpose of Disbursement Annual Pig Roast tickets	Candidate Name	Transaction ID : SB21-EX7859
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 012	Annual Pig Roast tickets

Full Name (Last, First, Middle Initial) <b>B. Juniata Co Republican Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address c/o Richelle Strawser 363 Kaufmann Road		Amount of Each Disbursement this Period 100.00
City Thompsettown	State PA Zip Code 17094	
Purpose of Disbursement Columbus Day Dinner donation	Candidate Name	Transaction ID : SB21-EX8003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 012	Columbus Day Dinner donation

Full Name (Last, First, Middle Initial) <b>C. Bedford Co. Republican Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2011
Mailing Address Tonya Clark 681 Brantner Road		Amount of Each Disbursement this Period 250.00
City Breezewood	State PA Zip Code 15533	
Purpose of Disbursement Coffee with the Candidates	Candidate Name	Transaction ID : SB21-EX7988
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 012	Coffee with the Candidates

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	398.00
<b>TOTAL</b> 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 108 OF 121	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bill Shuster for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bedford Co. Republican Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address Tonya Clark 681 Brantner Road		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB21-EX8008</b>
City Breezewood	State PA Zip Code 15533	
Purpose of Disbursement Table Sponsor - Fall Dinner	Category/Type 012	Table Sponsor - Fall Dinner
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bedford Co. Chamber Of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address 137 East Pitt Street		Amount of Each Disbursement this Period 15.00 <b>Transaction ID : SB21-EX7938</b>
City Bedford	State PA Zip Code 15522	
Purpose of Disbursement Flight 93 event ticket	Category/Type 012	Flight 93 event ticket
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mifflin Co Republican Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address John Breneman 1449 North River Road		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB21-EX8002</b>
City Granville	State PA Zip Code 17029	
Purpose of Disbursement Fall Banquet Donation	Category/Type 012	Fall Banquet Donation
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	615.00
<b>TOTAL</b> 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 109 OF 121	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bill Shuster for Congress**

Full Name (Last, First, Middle Initial) <b>A. Franklin Co Republican Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2011
Mailing Address Suite 293 South Gate Mall		Amount of Each Disbursement this Period 410.00
City Chambersburg	State PA	
Zip Code 17201	Purpose of Disbursement Table & Program Sponsor	<b>Transaction ID : SB21-EX7995</b>
Candidate Name	Category/ Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Table & Program Sponsor
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Indiana Co Republican Executive Comm</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2011
Mailing Address c/o Louise Hildebrand 5145 Redwood Drive		Amount of Each Disbursement this Period 100.00
City Indiana	State PA	
Zip Code 15701	Purpose of Disbursement GOP Summer Picnic	<b>Transaction ID : SB21-EX7860</b>
Candidate Name	Category/ Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	GOP Summer Picnic
State: District:		

Full Name (Last, First, Middle Initial) <b>c. National MS Society</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address Keystone Branch 506 Third Avenue		Amount of Each Disbursement this Period 250.00
City Duncansville	State PA	
Zip Code 16635	Purpose of Disbursement Sand Sponsor and tickets	<b>Transaction ID : SB21-EX7941</b>
Candidate Name	Category/ Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Sand Sponsor and tickets
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	760.00
<b>TOTAL</b> 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 110 OF 121	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bill Shuster for Congress**

Full Name (Last, First, Middle Initial) <b>A. Committee to Elect Steven Howsare</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address 123 Miner's Lane		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : SB21-EX8004</b>
City Alum Bank	State PA Zip Code 15521	
Purpose of Disbursement Political contribution	Category/Type 011	Political contribution
Candidate Name <b>Committee to Elect Steven Howsare</b>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. John Sullivan for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address PO Box 470840		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21-EX8015</b>
City Tulsa	State OK Zip Code 74147	
Purpose of Disbursement Political Contribution	Category/Type 011	Political Contribution
Candidate Name <b>John Sullivan</b>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: OK District: 01		

Full Name (Last, First, Middle Initial) <b>c. Swiss Club of Altoona</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address 1224 Tyler Avenue		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB21-EX7935</b>
City Altoona	State PA Zip Code 16602	
Purpose of Disbursement Hole Sponsorship	Category/Type 012	Hole Sponsorship
Candidate Name	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1300.00
<b>TOTAL</b> 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 111 OF 121	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bill Shuster for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kiwanis Club Of Altoona</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address c/o David M. Scott PO Box 255		Amount of Each Disbursement this Period 100.00
City Altoona	State PA	
Zip Code 16603	Purpose of Disbursement Bronze Sponsor	<b>Transaction ID : SB21-EX8011</b>
Candidate Name	Category/ Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Bronze Sponsor
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Citizens For Ruddock Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2011
Mailing Address 465 Edgewood Avenue		Amount of Each Disbursement this Period 100.00
City Indiana	State PA	
Zip Code 15701	Purpose of Disbursement Political contribution non federal	<b>Transaction ID : SB21-EX7822</b>
Candidate Name <b>Citizens For Ruddock Committee</b>	Category/ Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Political contribution non federal
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Dreams Go On Trail Ride</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address c/o Betsy Lehman 315 Quince Court		Amount of Each Disbursement this Period 200.00
City Hollidaysburg	State PA	
Zip Code 16648	Purpose of Disbursement Trail Marker Sponsor	<b>Transaction ID : SB21-EX7943</b>
Candidate Name	Category/ Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Trail Marker Sponsor
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	400.00
<b>TOTAL</b> 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 112 OF 121	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bill Shuster for Congress**

Full Name (Last, First, Middle Initial) <b>A. Somerset County Friends Of NRA</b>			Date of Disbursement MM / DD / YYYY 08 / 16 / 2011
Mailing Address c/o Sharon Ackerman 357 Berkleys Mill Road			Amount of Each Disbursement this Period 110.00
City Meyersdale	State PA	Zip Code 15552	
Purpose of Disbursement Donations		Category/ Type 012	<b>Transaction ID : SB21-EX7871</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary		Donations
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Committee to Elect Carl Walker Metzgar</b>			Date of Disbursement MM / DD / YYYY 09 / 23 / 2011
Mailing Address 203 East Main Street			Amount of Each Disbursement this Period 250.00
City Somerset	State PA	Zip Code 15501	
Purpose of Disbursement Pig Roast Fundraiser		Category/ Type 012	<b>Transaction ID : SB21-EX7994</b>
Candidate Name <b>Committee to Elect Carl Walker Metzgar</b>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary		Pig Roast Fundraiser
State: District:			

Full Name (Last, First, Middle Initial) <b>c. David's Wholesale/Moda</b>			Date of Disbursement MM / DD / YYYY 07 / 22 / 2011
Mailing Address 2221 NE 164th Street #1100			Amount of Each Disbursement this Period 189.00
City North Miami Beach	State FL	Zip Code 33160	
Purpose of Disbursement Donations		Category/ Type 012	<b>Transaction ID : SB17-EX7909</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary		<b>[MEMO ITEM]</b> Backpack donation
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	360.00
<b>TOTAL</b> 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 113 OF 121	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bill Shuster for Congress**

Full Name (Last, First, Middle Initial) <b>A. Friends Of Bill Higgins</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address PO Box 217		Amount of Each Disbursement this Period 200.00
City Bedford	State PA	Zip Code 15522
Purpose of Disbursement Political Contribution	Category/ Type 011	<b>Transaction ID : SB21-EX8005</b>
Candidate Name <b>Friends Of Bill Higgins</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary
State: District:	Political Contribution	

Full Name (Last, First, Middle Initial) <b>B. Joyce Murtha Breast Care Center</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address c/o Windber Medical Center 600 Somerset Avenue		Amount of Each Disbursement this Period 140.00
City Windber	State PA	Zip Code 15963
Purpose of Disbursement Tickets for Cancer Benefit	Category/ Type 012	<b>Transaction ID : SB21-EX7934</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary
State: District:	Tickets for Cancer Benefit	

Full Name (Last, First, Middle Initial) <b>C. HRCC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2011
Mailing Address PO Box 11787		Amount of Each Disbursement this Period 10000.00
City Harrisburg	State PA	Zip Code 17108
Purpose of Disbursement Contribution to PA State Republican Committee	Category/ Type 011	<b>Transaction ID : SB21-EX7948</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary
State: District:	Contribution to PA State Republican Committee	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10340.00
<b>TOTAL</b> 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 114 OF 121	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bill Shuster for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tuscarora Area Chamber Of Commerce</b>		Date of Disbursement MM / DD / YYYY 09 / 23 / 2011
Mailing Address 19 North Main Street PO Box 161		Amount of Each Disbursement this Period 105.00 <b>Transaction ID : SB21-EX7987</b>
City Mercersburg State PA Zip Code 17236	Purpose of Disbursement Tee Sponsor Candidate Name Category/Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	State: District:	Tee Sponsor

Full Name (Last, First, Middle Initial) <b>B. Chris Gibson For Congress</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2011
Mailing Address PO Box 234		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21-EX8016</b>
City Saratoga Springs State NY Zip Code 12866	Purpose of Disbursement Political Contribution Candidate Name Chris Gibson Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	State: NY District: 20	Political Contribution

Full Name (Last, First, Middle Initial) <b>c. The Committee To Elect Daniel For DA</b>		Date of Disbursement MM / DD / YYYY 08 / 03 / 2011
Mailing Address 450 Church Street		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB21-EX7858</b>
City Indiana State PA Zip Code 15701	Purpose of Disbursement Contribution to Non-federal candidate Candidate Name The Committee To Elect Daniel For DA Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	State: District:	Contribution to Non-federal candidate

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1405.00
<b>TOTAL</b> 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 115 OF 121	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bill Shuster for Congress**

Full Name (Last, First, Middle Initial) <b>A. Friends Of Mike Eakin</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2011
Mailing Address 202 State Street c/o David Feidt Treasurer		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB21-EX7861</b>
City Harrisburg State PA Zip Code 17101	Purpose of Disbursement Political contribution 011 Category/Type	
Candidate Name <b>Friends Of Mike Eakin</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Political contribution
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gloria Gates Memorial Foundation</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2011
Mailing Address DSI-ITI LLC 5000 Sixth Avenue Suite 1		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB21-EX7884</b>
City Altoona State PA Zip Code 16602	Purpose of Disbursement Tee Sponsorship 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Tee Sponsorship
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Indiana Co Dairy Promotion Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2011
Mailing Address c/o Chris Nehrig 237 East Elm Street		Amount of Each Disbursement this Period 1400.00 <b>Transaction ID : SB21-EX7949</b>
City Homer City State PA Zip Code 15748	Purpose of Disbursement Cheese Auction fundraiser 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Cheese Auction fundraiser
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4000.00
<b>TOTAL</b> 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 116 OF 121	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bill Shuster for Congress**

Full Name (Last, First, Middle Initial) <b>A. Judy Biggert For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2011
Mailing Address PO Box 637		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21-EX7971</b>
City Hinsdale	State IL	
Zip Code 60521	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name <b>Judy Biggert</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	State: IL District: 13	Political Contribution

Full Name (Last, First, Middle Initial) <b>B. Denham For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2011
Mailing Address 2150 River Plaza Dr - #150		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21-EX7972</b>
City Sacramento	State CA	
Zip Code 95833	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name <b>Jeff Denham</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	State: CA District: 19	Political Contribution

Full Name (Last, First, Middle Initial) <b>c. Dold For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2011
Mailing Address PO Box 8145		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21-EX7973</b>
City Northfield	State IL	
Zip Code 60093	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name <b>Bob Dold</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	State: IL District: 10	Political Contribution

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3000.00
<b>TOTAL</b> 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 117 OF 121	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bill Shuster for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gibbs For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2011
Mailing Address 6992 TR 466		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21-EX7974</b>
City State Zip Code Lakeville OH 44638	Purpose of Disbursement Political Contribution	
Candidate Name <b>Bob Gibbs</b>	Category/ Type 011	Political Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	

Full Name (Last, First, Middle Initial) <b>B. Michael Grimm For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2011
Mailing Address PO Box 270		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21-EX7975</b>
City State Zip Code Staten Island NY 10310	Purpose of Disbursement Political Contribution	
Candidate Name <b>Michael Grimm</b>	Category/ Type 011	Political Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	

Full Name (Last, First, Middle Initial) <b>c. Bill Johnson For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2011
Mailing Address PO Box 14496		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21-EX7976</b>
City State Zip Code Poland OH 44514	Purpose of Disbursement Political Contribution	
Candidate Name <b>Bill Johnson</b>	Category/ Type 011	Political Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 06	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3000.00
<b>TOTAL</b> 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 118 OF 121	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bill Shuster for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jim Renacci For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2011
Mailing Address 150 Smokerise Drive		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21-EX7977</b>
City Wadsworth State OH Zip Code 44281	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name <b>Jim Renacci</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Political Contribution
State: OH District: 16		

Full Name (Last, First, Middle Initial) <b>B. Scott Rigell For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2011
Mailing Address 915 First Colonial Road Suite 100		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21-EX7978</b>
City Virginia Beach State VA Zip Code 23464	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name <b>Scott Rigell</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Political Contribution
State: VA District: 02		

Full Name (Last, First, Middle Initial) <b>c. Jon Runyan For Congress Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2011
Mailing Address PO Box 225		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21-EX7979</b>
City Colonia State NJ Zip Code 07067	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name <b>Jon Runyan</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	Political Contribution
State: NJ District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3000.00
<b>TOTAL</b> 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 119 OF 121	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bill Shuster for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bobby Schilling For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2011
Mailing Address 367 Avenue Of The Cities Suite D		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21-EX7980</b>
City East Moline	State IL Zip Code 61244	
Purpose of Disbursement Political Contribution	011	Political Contribution
Candidate Name <b>Bobby Schilling</b> Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: IL District: 17		

Full Name (Last, First, Middle Initial) <b>B. Citizens For Kirt Morris</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address 215 Hawthorne Drive		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB21-EX8006</b>
City Everett	State PA Zip Code 15537	
Purpose of Disbursement Political Contribution	011	Political Contribution
Candidate Name <b>Citizens For Kirt Morris</b> Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Citizens For Spangler</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address PO Box 321		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB21-EX8009</b>
City Somerset	State PA Zip Code 15501	
Purpose of Disbursement Political Contribution	011	Political Contribution
Candidate Name <b>Citizens For Spangler</b> Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1200.00
<b>TOTAL</b> 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 120 OF 121	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bill Shuster for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kinzinger For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address PO Box 487		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21-EX8014</b>
City New Lenox	State IL	
Zip Code 60451	Purpose of Disbursement Political Contribution	Political Contribution
Candidate Name <b>Adam Kinzinger for Congress</b>	Category/ Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: IL District: 11		

Full Name (Last, First, Middle Initial) <b>B. McCotter Congressional Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address PO Box 530788		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21-EX8017</b>
City Livonia	State MI	
Zip Code 48153	Purpose of Disbursement Political Contribution	Political Contribution
Candidate Name <b>Thad McCotter</b>	Category/ Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2012 Primary	
State: MI District: 11		

Full Name (Last, First, Middle Initial) <b>C.</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
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	31778.00



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Bill Shuster for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**MK Catering Inc**

Mailing Address 5724 Lafayette Place

City State Zip Code  
 Hyattsville MD 20781

Nature of Debt (Purpose):  
 Invoice: Fundraiser Catering Solitatio

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10-INV7863</b>	
.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
3189.20	.00	3189.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Davis & Harman LLP**

Mailing Address The Willard - Suite 1200  
 1455 Pennsylvania Avenue NW

City State Zip Code  
 Washington DC 20004

Nature of Debt (Purpose):  
 Invoice: Evening Room Rental Fee Solitic

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10-INV7864</b>	
.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
500.00	.00	500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	3689.20
2) <b>TOTALS</b> This Period (last page this line number only) .....	3689.20
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	3689.20