

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL CENTER

2008 JAN 30 AM 10:54
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

SHEETZ POLITICAL ACTION COMMITTEE (SHEETZPAR)

ADDRESS (number and street)

5700 SIXTH AVE

Check if different than previously reported. (ACC)

ALTONA

PA

16602

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

00219121

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

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

Election on

MEM / DDD / YYYYYY

in the State of

(d) 30-Day POST-Election Report for the:

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

Election on

MEM / DDD / YYYYYY

in the State of

5. Covering Period

MEM ' 07 ' DDD ' 01 ' YYYYYY ' 2007

through

MEM ' 07 ' DDD ' 31 ' YYYYYY ' 2007

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

Type or Print Name of Treasurer

STANTON R. SHEETZ

Signature of Treasurer



Date

MEM ' 07 ' DDD ' 29 ' YYYYYY ' 2008

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

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SHEETZ PAC

Report Covering the Period: From:

07 ' 01 ' 2007

To:

12 ' 31 ' 2007

**COLUMN A
This Period**

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

6. (a) Cash on Hand January 1, 2007		23670.55
(b) Cash on Hand at Beginning of Reporting Period.....	28703.05	
(c) Total Receipts (from Line 19).....	11012.50	2209.500
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	39715.55	4576.555
7. Total Disbursements (from Line 31).....	15125.00	2117.500
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	24590.55	24590.55
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	00.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	00.00	

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

For further information contact:

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

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

28039610234

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

SHEETZ PAC

Report Covering the Period: From:

07 ' 01 ' 2007

To:

12 ' 31 ' 2007

I. Receipts

**COLUMN A
Total This Period**

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

11. Contributions (other than loans) From:

(a) Individuals/Persons Other
Than Political Committees

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

8580.00

17160.00

(ii) Unitemized.....

2432.50

4935.00

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

11012.50

22095.00

(b) Political Party Committees.....

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

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

11012.50

22095.00

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

13. All Loans Received.....

14. Loan Repayments Received.....

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

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

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

18. Transfers from Non-Federal and Levin Funds

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

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

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

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

11012.50

22095.00

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

11012.50

22095.00

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	11,012.50	22,095.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11,012.50	22,095.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	00.00	00.00

28039610237

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 0 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
SHEETZ POLITICAL ACTION Committee (SHEETZPAC)

Full Name (Last, First, Middle Initial)
A. **SHEETZ, Stephen G.**
Mailing Address
3511 Shawnee Ave.
City **Altoona** State **PA** Zip Code **16602**
FEC ID number of contributing federal political committee. **C**
Name of Employer **Sheetz, Inc.** Occupation **Chairman**
Receipt For:
 Primary General
 Other (specify) **Payroll deduction**
Aggregate Year-to-Date **2600.00**

Date of Receipt **7/12, 7/26, 8/9, 8/23, 9/7, 9/21, 10/5, 10/19, 11/1, 11/15, 11/29, 12/13, 12/26**
Amount of Each Receipt this Period
1,300.00

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

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

Full Name (Last, First, Middle Initial)
C. **SHEETZ, Stanton R.**
Mailing Address
191 Scenic Pine Drive
City **Hollidaysburg** State **PA** Zip Code **16648**
FEC ID number of contributing federal political committee. **C**
Name of Employer **Sheetz, Inc.** Occupation **President/CEO**
Receipt For:
 Primary General
 Other (specify) **Payroll deduction**
Aggregate Year-to-Date **2600.00**

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

SUBTOTAL of Receipts This Page (optional).....▶ **3,900.00**
TOTAL This Period (last page this line number only).....▶

28039610238

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 14

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

SHEETZ Political Action Committee (SHEETZ PAC)

Full Name (Last, First, Middle Initial)

A. McMAHON, Wm. DANIEL

Mailing Address

521 Summit Street

City

Gallitzin

State

PA

Zip Code

16641

FEC ID number of contributing federal political committee.

C

Name of Employer

Sheetz, Inc.

Occupation

Exec. V.P. - OPERATIONS

Receipt For:

Primary General

Other (specify) Payroll deduction

Aggregate Year-to-Date ▼

1,300.00

Date of Receipt

7/12, 7/26, 8/9, 8/23, 9/7, 9/21, 10/5, 10/19, 11/1, 11/15, 11/29, 12/13, 12/26

Amount of Each Receipt this Period

650.00

Full Name (Last, First, Middle Initial)

B. Sheetz, Joseph S.

Mailing Address

301 Cardinal Drive

City

Holidaysburg

State

PA

Zip Code

16648

FEC ID number of contributing federal political committee.

C

Name of Employer

Sheetz, Inc.

Occupation

Exec VP - FINANCE

Receipt For:

Primary General

Other (specify) Payroll deduction

Aggregate Year-to-Date ▼

1,300.00

Date of Receipt

as above

Amount of Each Receipt this Period

650.00

Full Name (Last, First, Middle Initial)

C. Sheetz, Randall A.

Mailing Address

RR2 Box 352

City

Holidaysburg

State

PA

Zip Code

16648

FEC ID number of contributing federal political committee.

C

Name of Employer

Sheetz, Inc.

Occupation

Exec VP - Marketing

Receipt For:

Primary General

Other (specify) Payroll deduction

Aggregate Year-to-Date ▼

1,040.00

Date of Receipt

as above

Amount of Each Receipt this Period

520.00

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

1,820.00

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

1,820.00

28039610239

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
SHEETZ POLITICAL ACTION Committee (SHEETZPAC)

Full Name (Last, First, Middle Initial)
A. CORTEZ, Robert Michael
 Mailing Address
1000 FORSHT DRIVE
 City **Duncansville** State **PA** Zip Code **16635**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **SHEETZ, INC.** Occupation **VP General Counsel**
 Receipt For:
 Primary General
 Other (specify) **payroll deduction**
 Aggregate Year-to-Date **7.80.00**

Date of Receipt **7/12, 7/26, 8/9, 8/23, 9/7, 9/21, 10/5, 10/19, 11/1, 11/15, 11/29, 12/13, 12/26**
 Amount of Each Receipt this Period
390.00

Full Name (Last, First, Middle Initial)
B. Cyman, Richard
 Mailing Address
370 CANARY DRIVE
 City **Hollidaysburg** State **PA** Zip Code **16648**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **Sheetz, Inc.** Occupation **VP-FACILITIES**
 Receipt For:
 Primary General
 Other (specify) **payroll deduction**
 Aggregate Year-to-Date **7.80.00**

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

Full Name (Last, First, Middle Initial)
C. FREEMAN, Philip Jr.
 Mailing Address
112 Country Club Road
 City **CRESSON** State **PA** Zip Code **16630**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **Sheetz, Inc.** Occupation **VP-HUMAN RESOURCES**
 Receipt For:
 Primary General
 Other (specify) **payroll deduction**
 Aggregate Year-to-Date **7.80.00**

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

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

28039610240

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 14

11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)

SHEETZ POLITICAL ACTION Committee (SHEETZPAC)

Full Name (Last, First, Middle Initial)

A. LORENZ, Michael

Mailing Address

230 Millview Drive

City

Pittsburgh

State

PA

Zip Code

15238

FEC ID number of contributing federal political committee.

C

Name of Employer

Sheetz Inc.

Occupation

Exec VP - Petroleum

Receipt For:

Primary General

Other (specify) payroll deduction

Aggregate Year-to-Date ▼

780.00

Date of Receipt

7/12, 7/26, 8/9, 8/23, 9/7, 9/21, 10/5, 10/19, 11/1, 11/15, 11/29, 12/13, 12/26

Amount of Each Receipt this Period

390.00

Full Name (Last, First, Middle Initial)

B. RYAN, RAYMOND

Mailing Address

1155 St. Augustine Road

City

DYSART

State

PA

Zip Code

16636

FEC ID number of contributing federal political committee.

C

Name of Employer

Sheetz, Inc.

Occupation

Exec VP - DISTRIBUTION CENTER

Receipt For:

Primary General

Other (specify) payroll deduction

Aggregate Year-to-Date ▼

780.00

Date of Receipt

as above

Amount of Each Receipt this Period

390.00

Full Name (Last, First, Middle Initial)

C. SHEETZ, TRAVIS

Mailing Address

156 Elm Street

City

Hollidaysburg

State

PA

Zip Code

16648

FEC ID number of contributing federal political committee.

C

Name of Employer

Sheetz, Inc.

Occupation

VP - OPERATIONS

Receipt For:

Primary General

Other (specify) payroll deduction

Aggregate Year-to-Date ▼

780.00

Date of Receipt

as above

Amount of Each Receipt this Period

390.00

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

1,170.00

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

1,170.00

28039610241

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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

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

Mailing Address
RR 4 Box 179 B

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

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

Name of Employer **Sheetz, Inc.** Occupation **Dir - Comptroller**

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

Aggregate Year-to-Date **520.00**

Date of Receipt **7/12, 7/26, 8/9, 8/23, 9/7, 9/21, 10/5, 10/19, 11/1, 11/15, 11/29, 12/13, 12/26**

Amount of Each Receipt this Period
260.00

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

Mailing Address
505 Clearview Drive

City **Harrisburg** State **PA** Zip Code **16648**

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

Name of Employer **Sheetz, Inc.** Occupation **Dir - Purchasing**

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

Aggregate Year-to-Date **520.00**

Date of Receipt **as above**

Amount of Each Receipt this Period
260.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) **520.00**

TOTAL This Period (last page this line number only) **8580.00**

28039610242

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 14

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

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

A. **OACS (OHIO ASSOC. OF CONVENIENCE STORES)**

Full Name (Last, First, Middle Initial)

Mailing Address: **50 W. BROAD ST. SUITE 2020**

City: **Columbus** State: **OH** Zip Code: **43215**

Purpose of Disbursement: **9/12/07 Fundraiser**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **PAC Contribution/Fundraiser**

State: _____ District: _____

Date of Disbursement: **09/04/2007**

Amount of Each Disbursement this Period: **1,000.00**

B. **TIM MURPHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address: **PO BOX 24551**

City: **Pittsburgh** State: **PA** Zip Code: **15234**

Purpose of Disbursement: **Golf Outing**

Candidate Name: **TIM MURPHY**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Contribution**

State: **PA** District: **18**

Date of Disbursement: **09/04/2007**

Amount of Each Disbursement this Period: **500.00**

C. **LOGAN FOR SENATE**

Full Name (Last, First, Middle Initial)

Mailing Address: **PO BOX 935**

City: **Monroeville** State: **PA** Zip Code: **15146-0935**

Purpose of Disbursement: **Contribution / fundraiser**

Candidate Name: **Sean LOGAN**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **fundraiser**

State: **PA** District: _____

Date of Disbursement: **09/04/2007**

Amount of Each Disbursement this Period: **250.00**

SUBTOTAL of Disbursements This Page (optional)..... **1,750.00**

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

28039610243

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

SHEETZ Political Action Committee (SHEETZPAC)

Full Name (Last, First, Middle Initial)

A. MURTHA for Congress Committee

Date of Disbursement

09 ' 04 ' 2007

Mailing Address

647 Main St. Suite 110

City

Johnstown

State

PA

Zip Code

15901

Purpose of Disbursement

Contribution

Candidate Name

Congressman John P. Murtha

Category/
Type

Amount of Each Disbursement this Period

200.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) *Contribution*

State: PA

District:

Full Name (Last, First, Middle Initial)

B. Chamber PAC

Date of Disbursement

09 ' 26 ' 2007

Mailing Address

417 Walnut St.

City

HARRISBURG

State

PA

Zip Code

17101

Purpose of Disbursement

PA Chamber 'Silver Sponsor'

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) *sponsorship*

State:

District:

Full Name (Last, First, Middle Initial)

C. Citizens for Arlen Specter

Date of Disbursement

09 ' 26 ' 2007

Mailing Address

203 Maryland Ave. NE

City

Washington

State

DC

Zip Code

20002

Purpose of Disbursement

10/08/07 - Luncheon / fundraiser

Candidate Name

Senator ARLEN SPECTER

Category/
Type

Amount of Each Disbursement this Period

250.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) *fundraise*

State: PA

District:

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

1,450.00

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

28039610244

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

SHEETZ Political Action Committee (SHEETZPAC)

Full Name (Last, First, Middle Initial)

A. *HOC (PA House Democratic Campaign Committee)*

Mailing Address

PO Box 555 FEDERAL SQUARE STATION

City

HARRISBURG

State

PA

Zip Code

17108

Purpose of Disbursement

10/29/07 - Reception/fundraiser

Candidate Name

Category/
Type

Date of Disbursement

10 / *19* / *2007*

Amount of Each Disbursement this Period

500.00

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) *fundraiser*

State:

District:

Full Name (Last, First, Middle Initial)

B. *SENATE REPUBLICAN Campaign Committee*

Mailing Address

PO Box 792

City

HARRISBURG

State

PA

Zip Code

17108-9962

Purpose of Disbursement

10/22/07 - Reception / fundraiser

Candidate Name

Category/
Type

Date of Disbursement

10 / *19* / *2007*

Amount of Each Disbursement this Period

1,000.00

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) *fundraiser*

State:

District:

Full Name (Last, First, Middle Initial)

C. *Bill Shuster for Congress*

Mailing Address

PO Box 27

City

Hollidaysburg

State

PA

Zip Code

166048

Purpose of Disbursement

11/9/07 - fundraiser

Candidate Name

Cong. Bill Shuster

Category/
Type

Date of Disbursement

11 / *06* / *2007*

Amount of Each Disbursement this Period

1,050.00

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) *fundraiser*

State:

District:

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

2,150.00

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

28039610245

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			PAGE <u>14</u> OF <u>14</u>		
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. Pennsylvania Republican Party		Date of Disbursement 11 / 06 / 2007
Mailing Address P/O R.A. Gleason, Jr. - Chairman PO Box 8		Amount of Each Disbursement this Period 5,000.00
City JOHNSTOWN	State PA	
Zip Code 15907	Category/ Type <input type="checkbox"/>	
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period <input type="checkbox"/>
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 checked="" type="checkbox"/> Other (specify) contribution	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement <input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>
Mailing Address _____		Amount of Each Disbursement this Period <input type="checkbox"/>
City _____	State _____	
Zip Code _____	Category/ Type <input type="checkbox"/>	
Purpose of Disbursement _____		Amount of Each Disbursement this Period <input type="checkbox"/>
Candidate Name _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement <input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>
Mailing Address _____		Amount of Each Disbursement this Period <input type="checkbox"/>
City _____	State _____	
Zip Code _____	Category/ Type <input type="checkbox"/>	
Purpose of Disbursement _____		Amount of Each Disbursement this Period <input type="checkbox"/>
Candidate Name _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	5,000.00
TOTAL This Period (last page this line number only).....	10,350.00

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed Exp</i>	Shipping Date <i>1/29/08</i>
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Jnp
 PREPARER

1/30/08
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