

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

X

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)

X

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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 PAUL A KILGORE

Signature of Treasurer PAULA KILGORE

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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 3 (Revised 02/2003)

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))....	266675.00	1357803.41
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	266675.00	1357803.41
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	127369.26	714684.91
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1318.81
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	127369.26	713366.10
8. Cash on Hand at Close of Reporting Period (from Line 27).....	566248.92	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

BILL SHUSTER FOR CONGRESS

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	77450.00	546998.82
(ii) Unitemized.....	225.00	21459.81
(iii) TOTAL of contributions from individuals ▶	77675.00	568458.63
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	189000.00	789344.78
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	266675.00	1357803.41
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	10542.56
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	1318.81
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	266675.00	1369664.78

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	127369.26	714684.91
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	57976.50	254914.50
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	185345.76	969599.41

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	484919.68
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	266675.00
25. SUBTOTAL (add Line 23 and Line 24).....	751594.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	185345.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	566248.92

**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 133
	<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	

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)
TERRY M ASTLEFORD

Mailing Address 543 SCHOOLHOUSE RD

City JOHNSTOWN State PA Zip Code 15904

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2012

Transaction ID : SA11Al.101595

Amount of Each Receipt this Period
250.00

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

Mailing Address 20 LOUDONVILLE RD.

City ALBANY State NY Zip Code 12204

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2012

Transaction ID : SA11Al.101639

Amount of Each Receipt this Period
1000.00

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

Mailing Address 10702 HOPEWELL RD

City WILLIAMSPORT State MD Zip Code 21795

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

Name of Employer BOWMAN GROUP Occupation PARTNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11Al.101859

Amount of Each Receipt this Period
2500.00

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 6 OF 133
	<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)
BILL K BREWSTER

Mailing Address PO BOX 459

City State Zip Code
BATESVILLE TX 78829

FEC ID number of contributing federal political committee.

Name of Employer Occupation
CAPITOL HILL CONSULTING GROUP CHAIRMAN

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11Al.101614

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JAMES E BUTTS

Mailing Address 2590 CASCO POINT RD.

City State Zip Code
ORONO MN 55391

FEC ID number of contributing federal political committee.

Name of Employer Occupation
CH ROBINSON WORLDWIDE SENIOR VICE PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11Al.101615

Amount of Each Receipt this Period

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

Mailing Address 224 FALCON RIDGE RD

City State Zip Code
GREAT FALLS VA 22066

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11Al.101641

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 133
	<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)
CLOUGH, HARBOUR & ASSOCIATES LLP

Mailing Address PO BOX 5269

City ALBANY State NY Zip Code 12205

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2012

Transaction ID : SA11AI.101765

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JEFFREY P HANS

Mailing Address 1187 THORN RUN EXTENSION STE. 210

City CORAOPOLIS State PA Zip Code 15108

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

Name of Employer Occupation
CLOUGH, HARBOUR & ASSOCIATES LLP VICE PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2012

Transaction ID : SA11AI.101871

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
PARTNERSHIP: CLOUGH, HARBOUR & ASSOCIATES LLP

C. Full Name (Last, First, Middle Initial)
DAVID J COLLINS

Mailing Address 500 BRAIM RD.

City GREENFIELD CENTER State NY Zip Code 12833

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2012

Transaction ID : SA11AI.101633

Amount of Each Receipt this Period
1000.00

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 8 OF 133
	<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)
DARRELL L. CONNER

Mailing Address 3105 WYNFORD DR

City State Zip Code
FAIRFAX VA 22031

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

Name of Employer Occupation
K&L GATES GOVERNMENT AFFAIRS COUNSELOR

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 31 2012

Transaction ID : SA11AI.101528

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
PAUL A COONEY

Mailing Address PO BOX 246

City State Zip Code
CRESSON PA 16630

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

Name of Employer Occupation
COONEY BROS. COAL CO MANAGING PARTNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 18 2012

Transaction ID : SA11AI.101791

Amount of Each Receipt this Period
200.00

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

Mailing Address 9417 BYEFORDE RD

City State Zip Code
KENSINGTON MD 20895

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

Name of Employer Occupation
CADOTAG ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 31 2012

Transaction ID : SA11AI.101526

Amount of Each Receipt this Period
1000.00

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

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

2200.00

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

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

FOR LINE NUMBER: PAGE 9 OF 133
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CAROL DILLER

Mailing Address 3458 EDENVILLE RD

City State Zip Code
CHAMBERSBURG PA 17201

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

Name of Employer Occupation
FRANKLIN COUNTY CONTROLLER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11Al.101861

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
CAROL DILLER

Mailing Address 2356 MAJESTIC COURT

City State Zip Code
CHAMBERSBURG PA 17202

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11Al.101858

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JEFFREY L DISTEFANO

Mailing Address 659 KRUMKILL RD.

City State Zip Code
ALBANY NY 12203

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

Name of Employer Occupation
HARRISON & BURROWES OWNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2012

Transaction ID : SA11Al.101640

Amount of Each Receipt this Period
1000.00

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 10 OF 133
	<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)
DANA L DORNSIFE

Mailing Address 417 CLIFFSIDE DR.

City	State	Zip Code
DANVILLE	CA	94526

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

Name of Employer	Occupation
LAZAREX CANCER FOUNDATION	EXECUTIVE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11Al.101805

Amount of Each Receipt this Period
2500.00

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

Mailing Address 417 CLIFFSIDE DR.

City	State	Zip Code
DANVILLE	CA	94526

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

Name of Employer	Occupation
THE HERRICK CORP.	MANAGER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11Al.101806

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
CHARLES F ENGEL

Mailing Address 103 5TH AVE.

City	State	Zip Code
NEW YORK CITY	NY	12866

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

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2012

Transaction ID : SA11Al.101637

Amount of Each Receipt this Period
1000.00

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 11 OF 133
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

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

Mailing Address 165 HIGHFIELD LN N

City CHAMBERSBURG State PA Zip Code 17201

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

Name of Employer E-LYNXX CORPORATION Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2012

Transaction ID : SA11Al.101785

Amount of Each Receipt this Period
500.00

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

Mailing Address 165 HIGHFIELD LN N

City CHAMBERSBURG State PA Zip Code 17201

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2012

Transaction ID : SA11Al.101784

Amount of Each Receipt this Period
2500.00

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

Mailing Address 3333 NE 32ND AVE., STE. 1501

City FORT LAUDERDALE State FL Zip Code 33308

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11Al.101840

Amount of Each Receipt this Period
2500.00

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 12 OF 133
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS L HENDRICKS

Mailing Address 4597 WESEX CT.

City ALEXANDRIA	State VA	Zip Code 22310
--------------------	-------------	-------------------

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

Name of Employer AIRLINES FOR AMERICA	Occupation VICE PRESIDENT
--	------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2012

Transaction ID : SA11Al.101616

Amount of Each Receipt this Period
500.00

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

Mailing Address 354 ALEXANDER SPRING RD. STE. 1

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

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11Al.101857

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
HUNTON & WILLIAMS, LLP

Mailing Address 1900 K ST NW

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11Al.101835

Amount of Each Receipt this Period
1500.00

NO ITEMIZATION NECESSARY

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 13 OF 133
	<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 F. KAMINSKI

Mailing Address 15866 EAST AVENUE

City State Zip Code
BLUE RIDGE SUMMIT PA 17214

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2012

Transaction ID : SA11Al.101607

Amount of Each Receipt this Period
300.00

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

Mailing Address PO BOX 4621

City State Zip Code
LAGUNA BEACH CA 92652

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

Name of Employer Occupation
KLING VENTURES OWNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2012

Transaction ID : SA11Al.101620

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
LLOYD R LAWRENCE JR

Mailing Address 345 PATRICK ST S

City State Zip Code
ALEXANDRIA VA 22314

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

Name of Employer Occupation
BOB LAWRENCE & ASSOCIATES PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2012

Transaction ID : SA11Al.101618

Amount of Each Receipt this Period
1000.00

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 133
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LISA M MARRELLO

Mailing Address 727 SACHEM CIR.

City SLINGERLANDS State NY Zip Code 12159

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

Name of Employer WILSON ELSEER MOSKOWITZ EDELMAN Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11AI.101804

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JAMES C MAY

Mailing Address PO BOX 1176

City REHOBOTH BEACH State DE Zip Code 19971

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

Name of Employer THE MAY GROUP, LLC Occupation PARTNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2012

Transaction ID : SA11AI.101617

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MICHAEL W MCLANAHAN

Mailing Address 1111 PINE ST

City HOLLIDAYSBURG State PA Zip Code 16648

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

Name of Employer MCLANAHAN CORPORATION Occupation BUSINESSMAN

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2012

Transaction ID : SA11AI.101781

Amount of Each Receipt this Period
1000.00

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 133
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRIAN C. MCNEW

Mailing Address 1658 BLACK GAP ROAD

City FAYETTEVILLE State PA Zip Code 17222

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

Name of Employer EARTHNET ENERGY Occupation OWNER

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 / 2012

Transaction ID : SA11Al.101864

Amount of Each Receipt this Period
 3000.00

B. Full Name (Last, First, Middle Initial)
MATTHEW P. MCTISH

Mailing Address 5728 RICKY RIDGE TRL

City OREFIELD State PA Zip Code 18069

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

Name of Employer MCTISH, KUNKEL & ASSOCIATES Occupation CONSULTING ENGINEER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2012

Transaction ID : SA11Al.101512

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
DAVID J. MCTISH

Mailing Address 2056 AUTUMN RIDGE RD

City MACUNGIE State PA Zip Code 18062

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2012

Transaction ID : SA11Al.101513

Amount of Each Receipt this Period
 2500.00

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 16 OF 133
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRIAN R MEARA

Mailing Address 3626 217TH ST.

City BAYSIDE State NY Zip Code 11361

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

Name of Employer SELF EMPLOYED Occupation PR EXECUTIVE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2012

Transaction ID : SA11AI.101638

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
BRIAN L MELLOTT

Mailing Address 951 THE TERRACE.

City HAGERSTOWN State MD Zip Code 21742

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

Name of Employer H.B. MELLOTT ESTATES, INC Occupation EXECUTIVE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2012

Transaction ID : SA11AI.101787

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
EDITH R MELLOTT

Mailing Address 302 2ND ST S
PO BOX 188

City MC CONNELLSBURG State PA Zip Code 17233

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2012

Transaction ID : SA11AI.101786

Amount of Each Receipt this Period
500.00

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 17 OF 133
	<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)
CRAIG J NITTERHOUSE

Mailing Address 1785 FALLING SPG RD

City State Zip Code
CHAMBERSBURG PA 17201

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

Name of Employer Occupation
FRANKLIN STORAGE INC. PARTNER/OWNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2012

Transaction ID : SA11AI.101862

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
PAGE P NITTERHOUSE

Mailing Address 1785 FALLING SPG RD

City State Zip Code
CHAMBERSBURG PA 17201

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2012

Transaction ID : SA11AI.101863

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DAVID D OSIKOWICZ

Mailing Address PO BOX 343

City State Zip Code
PUNXSUTAWNEY PA 15767

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

Name of Employer Occupation
VALIER COAL YARD OWNER/COAL MINER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 31 / 2012

Transaction ID : SA11AI.101514

Amount of Each Receipt this Period
1000.00

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 18 OF 133
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
R. KATHLEEN PERINI

Mailing Address 13601 PARADISE CHURCH RD

City HAGERSTOWN State MD Zip Code 21742

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
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11A1.101867

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
SHAWN M. PILLA

Mailing Address PO BOX 201

City CONNELLSVILLE State PA Zip Code 15425

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2012

Transaction ID : SA11A1.101598

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
JEFFREY N REEDER

Mailing Address 10970 MCFARLAND RD

City MERCERSBURG State PA Zip Code 17236

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

Name of Employer UNIVERSAL PROJECTS INC Occupation BUSINESSMAN

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11A1.101866

Amount of Each Receipt this Period
2500.00

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 19 OF 133
	<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)
JOSEPH RESCHINI

Mailing Address 200 CARPENTER AVE N

City State Zip Code
INDIANA PA 15701

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

Name of Employer Occupation
THE RESCHINI GROUP COO/INSURANCE AGENCY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2012

Transaction ID : SA11AI.101798

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
BARRY D RHOADS

Mailing Address 6793 FATHER JOHN CT

City State Zip Code
MC LEAN VA 22101

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

Name of Employer Occupation
CASSIDY & ASSOCIATES GOVERNMENT RELATIONS

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 20 / 2012

Transaction ID : SA11AI.101444

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
GEORGE A RIFENBURG

Mailing Address 129 DATER HILL RD.

City State Zip Code
TROY NY 12180

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 27 / 2012

Transaction ID : SA11AI.101632

Amount of Each Receipt this Period
1000.00

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 20 OF 133
	<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)
L MICHAEL ROSS

Mailing Address 330 OVERHILL DR

City State Zip Code
CHAMBERSBURG PA 17202

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

Name of Employer Occupation
FRANKLIN CO AREA DEV CORP PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11AI.101860

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
S.R. WOJDAK & ASSOCIATES, LP

Mailing Address 30 NORTH THIRD STREET SUITE 950

City State Zip Code
HARRISBURG PA 17101

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2012

Transaction ID : SA11AI.101445

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. STEPHEN R WOJDAK

Mailing Address 30 NORTH THIRD STREET SUITE 950

City State Zip Code
HARRISBURG PA 17101

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

Name of Employer Occupation
S.R. WOJDAK & ASSOCIATES, LP PARTNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2012

Transaction ID : SA11AI.101447

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
PARTNERSHIP: S.R. WOJDAK & ASSOCIATES, LP

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 21 OF 133
(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)
JOSHUA M SALTZMAN

Mailing Address 1105 JEFFERSON AVE.

City State Zip Code
ST. MICHAELS MD 21663

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

Name of Employer Occupation
AIRLINES FOR AMERICA VP, GLOBAL GOVERNMENT AFFAIRS

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11AI.101793

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
SUSAN E SALZMANN

Mailing Address 4 SEBASTIAN WAY

City State Zip Code
CARLISLE PA 17013

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11AI.101855

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
HARRY K SICKLER JR.

Mailing Address PO BOX 12

City State Zip Code
TYRONE PA 16686

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

Name of Employer Occupation
HARRY K. SICKLER ASSOCIATES CPA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2012

Transaction ID : SA11AI.101790

Amount of Each Receipt this Period
200.00

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 133
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES P SMITH JR.

Mailing Address 12 EAGLES WAY

City MIDDLETOWN State NY Zip Code 10940

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2012

Transaction ID : SA11AI.101636

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ROBERT E. STEM

Mailing Address 700 NW 41ST ST.

City OKLAHOMA CITY State OK Zip Code 73118

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

Name of Employer CAPITOL GAINS, LLC Occupation CONSULTANT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11AI.101856

Amount of Each Receipt this Period
2500.00

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

Mailing Address 3 AURORA AVE.

City SARATOGA SPRINGS State NY Zip Code 12866

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

Name of Employer CAPITAL ADVOCATES LLC Occupation GOV'T BUSINESS CONSULTING

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2012

Transaction ID : SA11AI.101635

Amount of Each Receipt this Period
500.00

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 23 OF 133
	<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)
CDR MARTIN E TORREY

Mailing Address 10 ARBOR LN

City State Zip Code
CLIFTON PARK NY 12065

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

Name of Employer Occupation
SELF EMPLOYED CONSULTANT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 27 / 2012

Transaction ID : SA11A1.101634

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
GARY LEE TREECE

Mailing Address RD #2 BOX 98-1

City State Zip Code
MARTINSBURG PA 16662

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

Name of Employer Occupation
PENN METAL FABRICATORS MANAGER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2012

Transaction ID : SA11A1.101779

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
ANNA M TREECE

Mailing Address 351 BRUMBAUGH RD.

City State Zip Code
ROARING SPRING PA 16673

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2012

Transaction ID : SA11A1.101780

Amount of Each Receipt this Period
500.00

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 24 OF 133
	<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)
DAVID J URBAN

Mailing Address 10100 MEYER POINT TER

City POTOMAC State MD Zip Code 20854

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

Name of Employer AMERICAN CONTINENTAL GROUP LLC Occupation CONSULTANT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2012

Transaction ID : SA11Al.101644

Amount of Each Receipt this Period
2500.00

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

Mailing Address 198 PINNACLE CIR.

City SOMERSET State PA Zip Code 15501

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2012

Transaction ID : SA11Al.101789

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
J JOSEPH ZIMMERMAN

Mailing Address 2257 CASTLEGREEN DR

City GREENCASTLE State PA Zip Code 17225

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

Name of Employer VALLEY QUARRIES INC Occupation EXECUTIVE VICE PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2012

Transaction ID : SA11Al.101782

Amount of Each Receipt this Period
2000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 133
	<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)
CAROL L ZIMMERMAN

Mailing Address 2257 CASTLEGREEN DR

City GREENCASTLE State PA Zip Code 17225

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
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2012

Transaction ID : SA11Al.101783

Amount of Each Receipt this Period
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D 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 M / D 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).....

1000.00

77450.00

**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 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ABX AIR INC PAC

Mailing Address 145 HUNTER DRIVE

City State Zip Code
WILMINGTON OH 45177

FEC ID number of contributing federal political committee. **C** C00238311

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101820

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
AIRCRAFT OWNERS PILOTS ASSOCIATION PAC

Mailing Address 421 AVIATION WAY

City State Zip Code
FREDERICK MD 21701

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101796

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ALLIED PILOTS ASSOCIATION

Mailing Address 14600 TRINITY BLVD-SUITE 500

City State Zip Code
FORT WORTH TX 76155

FEC ID number of contributing federal political committee. **C** C00267849

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101811

Amount of Each Receipt this Period
1500.00

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 27 OF 133
	<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)
ALPHA NATURAL RESOURCES PAC

Mailing Address 999 CORPORATE BLVD
SUITE 300

City State Zip Code
LINTHICUM HEIGHTS MD 21090

FEC ID number of contributing federal political committee. **C C00348524**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2012

Transaction ID : SA11C.101833

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
ALTRIA GROUP INC.

Mailing Address 101 CONSTITUTION AVE NW

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00089136**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2012

Transaction ID : SA11C.101800

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN CHEMISTRY COUNCIL PAC

Mailing Address 700 2ND STREET, NE
ATTN: DONALD EVANS

City State Zip Code
WASHINGTON DC 20002

FEC ID number of contributing federal political committee. **C C00252338**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2012

Transaction ID : SA11C.101854

Amount of Each Receipt this Period
1500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF ENGINEERING PAC

Mailing Address 1015 15TH ST NW SUITE 802

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer	Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2012

Transaction ID : SA11C.101521

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN GAS ASSOCIATION PAC (GASPAC)

Mailing Address 400 N CAPITOL ST NW STE 450

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer	Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2012

Transaction ID : SA11C.101524

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN IRON AND STEEL INSTITUTE POLITICAL ACTION COMMITTEE (STEEL PAC)

Mailing Address 1140 CONNECTICUT AVENUE, NW SUITE 705

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee. **C** C00295097

Name of Employer	Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101847

Amount of Each Receipt this Period
2000.00

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 29 OF 133
	<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 MEDICAL ASSOCIATION PAC

Mailing Address 25 MASSACHUSETTS AVE NW
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00000422**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101797

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN SHIPPING GROUP MARINE RESOURCES GROUP PAC (ASG-MRG PAC)

Mailing Address 32001 32ND AVE S STE 200

City FEDERAL WAY State WA Zip Code 98001

FEC ID number of contributing federal political committee. **C C00411694**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2012

Transaction ID : SA11C.101522

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN TRAFFIC SAFETY SERVICES ASSOC

Mailing Address 15 RIVERSIDE PARKWAY
SUITE 100

City FREDERICKSBURG State VA Zip Code 22406

FEC ID number of contributing federal political committee. **C C00281717**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2012

Transaction ID : SA11C.101613

Amount of Each Receipt this Period
500.00

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 30 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN WATERWAYS OPERATORS PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2012
Mailing Address 801 QUINCY ST N SUITE 200		Transaction ID : SA11C.101523
City ARLINGTON State VA Zip Code 22203	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00034678	Name of Employer Occupation	Amount of Each Receipt this Period 2500.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) B. AMO VOLUNTARY POLITICAL ACTION FUND		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2012
Mailing Address 2 W DIXIE HWY		Transaction ID : SA11C.101516
City DANIA BEACH State FL Zip Code 33004	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00027532	Name of Employer Occupation	Amount of Each Receipt this Period 2000.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7500.00	

Full Name (Last, First, Middle Initial) C. AMO VOLUNTARY POLITICAL ACTION FUND		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2012
Mailing Address 2 W DIXIE HWY		Transaction ID : SA11C.101525
City DANIA BEACH State FL Zip Code 33004	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00027532	Name of Employer Occupation	Amount of Each Receipt this Period 2500.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7500.00	

SUBTOTAL of Receipts This Page (optional).....	7000.00
TOTAL This Period (last page this line number only).....	7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 133
	<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)
AMO VOLUNTARY POLITICAL ACTION FUND

Mailing Address 2 W DIXIE HWY

City DANIA BEACH State FL Zip Code 33004

FEC ID number of contributing federal political committee. **C** C00027532

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 8000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101827

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
ARCADIS US, INC. PAC

Mailing Address 630 PLAZA DR SUITE 100

City HIGHLANDS RANCH State CO Zip Code 80129

FEC ID number of contributing federal political committee. **C** C00388983

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2012

Transaction ID : SA11C.101519

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
ARCELORMITTAL USA LLC GOOD GOVERNMENT COMMITTEE

Mailing Address 1808 EYE STREET NW
5TH FLOOR

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00104109

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101845

Amount of Each Receipt this Period
 1000.00

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 32 OF 133
	<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)
ARCH COAL INC. POLITICAL ACTION COMMITTEE (ARCHPAC)

Mailing Address **CITYPLACE ONE**

City **ST. LOUIS** State **MO** Zip Code **63141**

FEC ID number of contributing federal political committee. **C C00167668**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2012

Transaction ID : SA11C.101802

Amount of Each Receipt this Period
2000.00

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

Mailing Address **2000 MARKET ST**

City **PHILADELPHIA** State **PA** Zip Code **19103**

FEC ID number of contributing federal political committee. **C C00182980**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 31 / 2012

Transaction ID : SA11C.101520

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ASSOCIATED GENERAL CONTRACTORS PAC

Mailing Address **2300 WILSON BLVD, SUITE 400**

City **ARLINGTON** State **VA** Zip Code **22201**

FEC ID number of contributing federal political committee. **C C00082917**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 24 / 2012

Transaction ID : SA11C.101627

Amount of Each Receipt this Period
2500.00

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 33 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ASSOCIATION OF AMERICAN RAILROADS

Mailing Address 425 THIRD STREET SW
SUITE 1000

City WASHINGTON State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C C00280743**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101836

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ATLAS AIR WORLDWIDE HOLDINGS INC. PAC

Mailing Address 2000 WESTCHESTER AVE

City PURCHASE State NY Zip Code 10677

FEC ID number of contributing federal political committee. **C C00478099**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101843

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
BROTHERHOOD OF LOCOMOTIVE ENGINEERS

Mailing Address 1370 ONTARIO ST

City CLEVELAND State OH Zip Code 44113

FEC ID number of contributing federal political committee. **C C00099234**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101825

Amount of Each Receipt this Period
1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 133
	<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)
BUILD PAC

Mailing Address 1201 15TH ST NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000901

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 / 27 / 2012

Transaction ID : SA11C.101630

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 14420 ALBERMARLE POINT PL. STE. 21

City CHANTILLY State VA Zip Code 20151

FEC ID number of contributing federal political committee. **C** C00398222

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
 07 / 31 / 2012

Transaction ID : SA11C.101517

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
CENTERPOINT ENERGY, INC. POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 4567

City HOUSTON State TX Zip Code 77210

FEC ID number of contributing federal political committee. **C** C00333534

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
 07 / 31 / 2012

Transaction ID : SA11C.101533

Amount of Each Receipt this Period
 1000.00

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 35 OF 133
	<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)
CH2M HILL COMPANIES LTD PAC

Mailing Address 9191 S JAMAICA STREET

City State Zip Code
ENGLEWOOD CO 80112

FEC ID number of contributing federal political committee. **C** C00143305

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2012

Transaction ID : SA11C.101537

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
CLIFFS NATURAL RESOURCES INC. POLITICAL ACTION COMMITTEE (CLIFFSPAC)

Mailing Address 1100 SUPERIOR AVENUE
ROOM 1500

City State Zip Code
CLEVELAND, OH 44114

FEC ID number of contributing federal political committee. **C** C00039016

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101846

Amount of Each Receipt this Period
1000.00

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

Mailing Address 101 CONSTITUTION AVE NW
SUITE 500 EAST

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00109819

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101807

Amount of Each Receipt this Period
2000.00

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 36 OF 133
	<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)
COALPAC

Mailing Address **101 CONSTITUTION AVE NW
SUITE 500 EAST**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00109819**

Name of Employer _____ Occupation _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **4000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2012

Transaction ID : SA11C.101808

Amount of Each Receipt this Period
 _____ **2000.00**

B. Full Name (Last, First, Middle Initial)
COMCAST CORPORATION

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
 _____ **10000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 20 / 2012

Transaction ID : SA11C.101612

Amount of Each Receipt this Period
 _____ **4000.00**

C. Full Name (Last, First, Middle Initial)
CON-WAY INC PAC

Mailing Address **2211 OLD EARHART ROAD
SUITE 100**

City **ANN ARBOR** State **MI** Zip Code **48105**

FEC ID number of contributing federal political committee. **C C00110759**

Name of Employer _____ Occupation _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **3500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 17 / 2012

Transaction ID : SA11C.101438

Amount of Each Receipt this Period
 _____ **1000.00**

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

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

_____ **7000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 133
	<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)
CONSOL ENERGY INC

Mailing Address 1000 CONSOL ENERGY DR

City State Zip Code
CANONSBURG PA 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
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 31 2012

Transaction ID : SA11C.101515

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
CONTINENTAL AIRLINES INC PAC

Mailing Address 600 JEFFERSON STE. HQJCA 19TH FLOOR

City State Zip Code
HOUSTON TX 77002

FEC ID number of contributing federal political committee. **C C00101766**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 21 2012

Transaction ID : SA11C.101717

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
COVINGTON & BURLING LLP PAC

Mailing Address 1201 PENNSYLVANIA AVENUE NW

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C C00462630**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2012

Transaction ID : SA11C.101838

Amount of Each Receipt this Period
2500.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 133
	<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)
CROWLEY MARITIME CORPORATION FEDERAL PAC

Mailing Address 9487 REGENCY SQUARE BLVD.

City JACKSONVILLE State FL Zip Code 32225

FEC ID number of contributing federal political committee. **C** C00147231

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
 07 / 31 / 2012

Transaction ID : SA11C.101535

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
CSX CORP GOOD GOVT FUND

Mailing Address 1331 PENNSYLVANIA AVE NW
SUITE 560 NATIONAL PLACE

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101818

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMM

Mailing Address 8400 WESTPARK DR

City MC LEAN State VA Zip Code 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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2012

Transaction ID : SA11C.101619

Amount of Each Receipt this Period
 2000.00

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 39 OF 133
	<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)
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
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101814

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
DEERE AND COMPANY PAC (AKA JOHN DEERE PAC)

Mailing Address ONE JOHN DEERE PLACE

City State Zip Code
MOLINE IL 61265

FEC ID number of contributing federal political committee. **C** C00204099

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101822

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
DUANE MORRIS LLP GOVERNMENT COMMITTEE

Mailing Address 30 17TH ST S

City State Zip Code
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00364133

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2012

Transaction ID : SA11C.101605

Amount of Each Receipt this Period
1000.00

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 40 OF 133
	<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)
EAGLE FORUM PAC

Mailing Address **PO BOX 618**

City **ALTON** State **IL** Zip Code **62002**

FEC ID number of contributing federal political committee. **C C70002423**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 27 / 2012

Transaction ID : SA11C.101629

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ECOLAB INC. POLITICAL ACTION COMMITTEE

Mailing Address **370 WABASH STREET N.**

City **ST. PAUL** State **MN** Zip Code **55102**

FEC ID number of contributing federal political committee. **C C00101485**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2012

Transaction ID : SA11C.101842

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
EXXON MOBIL CORPORATION

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
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 14 / 2012

Transaction ID : SA11C.101599

Amount of Each Receipt this Period
3000.00

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 41 OF 133
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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 State Zip Code
AKRON OH 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
8500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2012

Transaction ID : SA11C.101832

Amount of Each Receipt this Period
3500.00

B. Full Name (Last, First, Middle Initial)
FORD MOTOR CO CIVIC ACTION FUND

Mailing Address 1350 I STREET NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C00046474**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2012

Transaction ID : SA11C.101821

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
FORD MOTOR CO CIVIC ACTION FUND

Mailing Address 1350 I STREET NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C00046474**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2012

Transaction ID : SA11C.101850

Amount of Each Receipt this Period
1500.00

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 42 OF 133
	<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)
FRANKLIN CO REAGAN COALITION

Mailing Address PO BOX 240

City MARION State PA Zip Code 17235

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101865

Amount of Each Receipt this Period
 2500.00

PERMISSIBLE FUNDS

B. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS VOLUNTARY PAC

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
6500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101816

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY PAC

Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 1100

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2012

Transaction ID : SA11C.101597

Amount of Each Receipt this Period
 2500.00

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 43 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY PAC

Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 1100

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101795

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
GEOFF DAVIS FOR CONGRESS

Mailing Address PO BOX 17192

City FT MITCHELL State KY Zip Code 41017

FEC ID number of contributing federal political committee. **C** C00369470

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2012

Transaction ID : SA11C.101437

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
GLOVER PARK PAC, INC.

Mailing Address 607 14TH ST. NW
SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00466094

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101810

Amount of Each Receipt this Period
1000.00

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 44 OF 133
	<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)
HOLCIM (US) INC.

Mailing Address 201 JONES RD

City WALTHAM State MA Zip Code 02451

FEC ID number of contributing federal political committee. **C** C00213348

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 / 27 / 2012

Transaction ID : SA11C.101642

Amount of Each Receipt this Period
 1000.00

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101794

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
INTERSTATE NATURAL GAS ASSOC.

Mailing Address 10 G ST NE SUITE 700

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00116145

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
 07 / 31 / 2012

Transaction ID : SA11C.101531

Amount of Each Receipt this Period
 2000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 133
	<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)
JETBLUE AIRWAYS CORPORATION CREWMEMBER GOOD GOVERNMENT FUND (JETBLUE PAC)

Mailing Address 118-29 QUEENS BOULEVARD

City State Zip Code
FOREST HILLS NY 11375

FEC ID number of contributing federal political committee. **C** C00484584

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101828

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JOHNSON & JOHNSON POLITICAL ACTION COMMITTEE

Mailing Address ONE JOHNSON & JOHNSON PLAZA

City State Zip Code
NEW BRUNSWICK NJ 08933

FEC ID number of contributing federal political committee. **C** C00010983

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101830

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
JOY GLOBAL INC

Mailing Address PO BOX 554

City State Zip Code
MILWAUKEE WI 53201

FEC ID number of contributing federal political committee. **C** C00232546

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101844

Amount of Each Receipt this Period
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 133
	<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)
K&L GATES LLP PAC

Mailing Address 1601 K STREET NW

City State Zip Code
WASHINGTON DC 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
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2012

Transaction ID : SA11C.101529

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
KELLEY DRYE & WARREN POLITICAL ACTION COMMITTEE

Mailing Address 3050 K STREET NW SUITE 400

City State Zip Code
WASHINGTON DC 20007

FEC ID number of contributing federal political committee. **C C00301929**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101831

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
KLEINFELDER GROUP POLITICAL ACTION COMMITTEE

Mailing Address 5015 SHOREHAM PLACE

City State Zip Code
SAN DIEGO CA 92122

FEC ID number of contributing federal political committee. **C C00463943**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2012

Transaction ID : SA11C.101593

Amount of Each Receipt this Period
1000.00

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: PAGE 47 OF 133
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MAERSK INC GOOD GOVT FUND PAC

Mailing Address 1530 WILSON BLVD STE. 650

City State Zip Code
ARLINGTON VA 22209

FEC ID number of contributing federal political committee. **C C00217471**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 31 2012

Transaction ID : SA11C.101536

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MARINE ENGINEERS' BENEFICIAL ASSOCIATION (MEBA PAF)

Mailing Address 444 NORTH CAPITOL ST NW
STE 800

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00279380**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 31 2012

Transaction ID : SA11C.101530

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MASTERS, MATES AND PILOTS POLITICAL CONTRIBUTION FUND

Mailing Address 700 MARITIME BLVD

City State Zip Code
LINTHICUM HEIGHTS MD 21090

FEC ID number of contributing federal political committee. **C C00073056**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 07 2012

Transaction ID : SA11C.101592

Amount of Each Receipt this Period
1000.00

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 48 OF 133
	<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)
MID-ATLANTIC LABORERS POLITICAL LEAGUE

Mailing Address 12355 SUNRISE VALLEY DRIVE
SUITE 550

City RESTON State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C70005103

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101799

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
MINEPAC, A POLITICAL ACTION COMMITTEE OF THE NATIONAL MINING ASSOCIATION

Mailing Address 101 CONSTITUION AVE, NW
SUITE 500 EAST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00304634

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101809

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1600 DUKE ST

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00126763

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101817

Amount of Each Receipt this Period
5000.00

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 49 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF TRAILER MANUFACTURERS POLITICAL ACTION COMMITTEE

Mailing Address 1320 SW TOPEKA BOULEVARD

City TOPEKA State KS Zip Code 66612

FEC ID number of contributing federal political committee. **C** C00490987

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2012

Transaction ID : SA11C.101611

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASPHALT PAVEMENT ASSOCIATION PAC (NAPA-PAC)

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 600 WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00444539

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2012

Transaction ID : SA11C.101610

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL EMERGENCY MEDICINE PAC

Mailing Address 2121 K ST NW SUITE 325

City WASHINGTON State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101826

Amount of Each Receipt this Period
 1000.00

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 50 OF 133
	<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)
NCTA PAC

Mailing Address **25 MASSACHUSETTS AVENUE NEW SUITE 100**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00010082**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2012

Transaction ID : SA11C.101852

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
NFIB SAFE TRUST

Mailing Address **1201 F ST NW SUITE 200**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00101105**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 27 / 2012

Transaction ID : SA11C.101631

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NORFOLK SOUTHERN CORP GOOD GOVT FUND

Mailing Address **THREE COMMERCIAL PL**

City **NORFOLK** State **VA** Zip Code **23510**

FEC ID number of contributing federal political committee. **C C00009282**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2012

Transaction ID : SA11C.101801

Amount of Each Receipt this Period
5000.00

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 51 OF 133
	<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)
NRA-POLITICAL VICTORY FUND

Mailing Address 11250 WAPLES MILL RD

City State Zip Code
FAIRFAX VA 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
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101813

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
NSSGA ROCKPAC

Mailing Address 1605 KING ST

City State Zip Code
ALEXANDRIA VA 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
7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2012

Transaction ID : SA11C.101788

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
OFFICE OF THE COMMISSIONER OF MAJOR LEAGUE BASEBALL POLITICAL ACTION COMMITTEE

Mailing Address 1050 CONNECTICUT AVE NW STE 1100

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00368142

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101841

Amount of Each Receipt this Period
5000.00

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: PAGE 52 OF 133
(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)
OLD DOMINION FREIGHT LINE INC POLITICAL ACTION COMMITTEE (OLD DOMINION PAC)

Mailing Address 500 OLD DOMINION WAY

City State Zip Code
THOMASVILLE NC 27360

FEC ID number of contributing federal political committee. **C** C00496836

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : SA11C.101851

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
ONEOK EMPLOYEES PAC

Mailing Address PO BOX 871

City State Zip Code
TULSA OK 74102

FEC ID number of contributing federal political committee. **C** C00215384

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : SA11C.101839

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
OSHKOSH CORPORATION EMPLOYEES

Mailing Address PO BOX 2566

City State Zip Code
OSHKOSH WI 54903

FEC ID number of contributing federal political committee. **C** C00304477

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : SA11C.101834

Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional)..... 5500.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 133
	<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)
OUTDOOR ADVERTISING ASSOC OF AMERICA PAC

Mailing Address 1850 M ST NW
SUITE 1040

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00045781**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101868

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
PARSONS BRINCKERHOFF INC PAC

Mailing Address 1401 K STREET NW
SUITE 701

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00287003**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2012

Transaction ID : SA11C.101518

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
PECKHAM INDUSTRIES, INC. FEDERAL PAC

Mailing Address 20 HAARLEM AVENUE

City WHITE PLAINS State NY Zip Code 10603

FEC ID number of contributing federal political committee. **C C00343681**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2012

Transaction ID : SA11C.101643

Amount of Each Receipt this Period
1000.00

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 54 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial)
PEOPLE PAC (PACCAR INC EMPLOYEES ORGANIZED FOR POLITICAL LEADERSHIP AND EDUCATION PAC)

A. Mailing Address 777 106TH AVE NE
PO BOX 1518

City State Zip Code
BELLEVUE WA 98009

FEC ID number of contributing federal political committee. **C** C00034355

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101812

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
PICKERING FOR CONGRESS

Mailing Address PO BOX 4297

City State Zip Code
BRANDON MS 39047

FEC ID number of contributing federal political committee. **C** C00308577

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2012

Transaction ID : SA11C.101532

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
PORTLAND CEMENT ASSOCIATION INC

Mailing Address 500 NEW JERSEY AVE NW
SEVENTH FLOOR

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00237065

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2012

Transaction ID : SA11C.101596

Amount of Each Receipt this Period
 1000.00

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 55 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RAYTHEON PAC

Mailing Address 1100 WILSON BOULEVARD SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101803

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
RETAILPAC

Mailing Address 325 7TH ST NW
LIBERTY PLACE SUITE 1100

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00040329**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101853

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
RJ REYNOLDS PAC

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
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101819

Amount of Each Receipt this Period
2500.00

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 56 OF 133
	<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. SEAFARERS POLITICAL ACTIVITY DONATION

Full Name (Last, First, Middle Initial)
Mailing Address 5201 AUTH WAY

City State Zip Code
CAMP SPRINGS MD 20746

FEC ID number of contributing federal political committee. **C C00004325**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2012

Transaction ID : SA11C.101527

Amount of Each Receipt this Period
2500.00

B. SOCIETY OF INDEPENDENT GASOLINE

Full Name (Last, First, Middle Initial)
Mailing Address 11911 FREEDOM DR SUITE 590

City State Zip Code
RESTON VA 20190

FEC ID number of contributing federal political committee. **C C00120030**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101824

Amount of Each Receipt this Period
2000.00

C. SOUTHERN COMPANY EMPLOYEES

Full Name (Last, First, Middle Initial)
Mailing Address 601 PENNSYLVANIA AVE NW

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C C00144774**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101823

Amount of Each Receipt this Period
2500.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SOUTHWEST AIRLINES PILOTS' ASSOCIATION POLITICAL ACTION COMMITTEE (SWAPA PAC)

Mailing Address 1450 EMPIRE CENTRAL DR SUITE 737

City State Zip Code
DALLAS TX 75247

FEC ID number of contributing federal political committee. **C** C00360669

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101829

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
SYCUAN BAND OF THE KUMEYAAY NATION

Mailing Address 5459 SYCUAN ROAD

City State Zip Code
EL CAJON CA 92019

FEC ID number of contributing federal political committee. **C** C90009143

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2012

Transaction ID : SA11C.101534

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY PAC

Mailing Address 1200 WILSON BLVD

City State Zip Code
ARLINGTON VA 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
8000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2012

Transaction ID : SA11C.101608

Amount of Each Receipt this Period
1000.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 58 OF 133
(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)
THE BOEING COMPANY PAC

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
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101849

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP FFEG

Mailing Address 600 THIRTEENTH STREET, NW
SUITE 340

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2012

Transaction ID : SA11C.101609

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATION INC GOOD GOV'T

Mailing Address 1300 I ST NW
SUITE 400 W

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11C.101815

Amount of Each Receipt this Period
 2000.00

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

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

9000.00

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

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

FOR LINE NUMBER: PAGE 59 OF 133
(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)
WALT DISNEY CO EMPLOYEES PAC

Mailing Address 1150 17TH ST NW SUITE 400

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00197749

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 30 2012

Transaction ID : SA11C.101848

Amount of Each Receipt this Period
1500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D 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 M / D 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).....

1500.00

189000.00

**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 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. 401 GROUP LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address 401 NORTH SECOND STREET		Amount of Each Disbursement this Period 848.91 Transaction ID : SB17.101714
City HARRISBURG	State PA	
Zip Code 17101	Purpose of Disbursement POSTAGE & PRINTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address PO BOX 1270		Amount of Each Disbursement this Period 34905.75 Transaction ID : SB17.101421
City NEWARK	State NJ	
Zip Code 07101	Purpose of Disbursement SEE BELOW	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 1200 E ALGONQUIN ROAD		Amount of Each Disbursement this Period 1071.08 Transaction ID : SB17.101471
City ELK GROVE VILLAGE	State IL	
Zip Code 60007	Purpose of Disbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	35754.66
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 61 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012	
Mailing Address 300 FIRST STREET SE			Amount of Each Disbursement this Period 876.95	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.101472	
Purpose of Disbursement		Category/Type 001		
Candidate Name		[MEMO ITEM] EVENT CATERING		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. THE SOURCE			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012	
Mailing Address 575 PENNSYLVANIA AVENUE NW			Amount of Each Disbursement this Period 348.54	
City WASHINGTON	State DC	Zip Code 20001	Transaction ID : SB17.101473	
Purpose of Disbursement		Category/Type 001		
Candidate Name		[MEMO ITEM] EVENT CATERING		
Office Sought: <input type="checkbox"/> 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. HYATT HOTELS			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012	
Mailing Address 100 HERON BLVD			Amount of Each Disbursement this Period 4397.64	
City CAMBRIDGE	State MD	Zip Code 21613	Transaction ID : SB17.101474	
Purpose of Disbursement		Category/Type 001		
Candidate Name		[MEMO ITEM] LODGING		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OCEANAIRE RESTAURANT		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 1201 F STREET NW		Amount of Each Disbursement this Period 210.00
City WASHINGTON	State DC Zip Code 20004	
Purpose of Disbursement	Category/Type 001	Transaction ID : SB17.101475 [MEMO ITEM] MEETING EXPENSE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address PO BOX 619612 MD 2400		Amount of Each Disbursement this Period 1206.40
City DALLAS	State TX Zip Code 75261	
Purpose of Disbursement	Category/Type 001	Transaction ID : SB17.101476 [MEMO ITEM] AIRFARE
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. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 5620 UNIVERSITY PKWY		Amount of Each Disbursement this Period 1440.50
City WINSTON SALEM	State NC Zip Code 27105	
Purpose of Disbursement	Category/Type 001	Transaction ID : SB17.101477 [MEMO ITEM] AIRFARE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHICAGO TAXI 1		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 3703 21ST STREET		Amount of Each Disbursement this Period 150.60
City LONG ISLAND CITY	State NY	
Zip Code 11101	Purpose of Disbursement 001	Transaction ID : SB17.101479
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] CAB FARE
State: District:		

Full Name (Last, First, Middle Initial) B. FRESH FIELDS WHOLE FOODS MARKET		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 2323 WISCONSIN AVENUE NW		Amount of Each Disbursement this Period 159.20
City WASHINGTON	State DC	
Zip Code 20007	Purpose of Disbursement 001	Transaction ID : SB17.101480
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] EVENT CATERING
State: District:		

Full Name (Last, First, Middle Initial) C. SAN PIETRO		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 18 E 54TH ST.		Amount of Each Disbursement this Period 334.21
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement 001	Transaction ID : SB17.101483
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] EVENT CATERING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OMNI CHICAGO HOTEL		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 676 NORTH MICHIGAN AVENUE		Amount of Each Disbursement this Period 2209.83
City CHICAGO State IL Zip Code 60611	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101486 [MEMO ITEM] LODGING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. EXXON		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 542 SOUTH CENTER STREET		Amount of Each Disbursement this Period 7.04
City EBENSBURG State PA Zip Code 15931	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101492 [MEMO ITEM] FUEL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. AMTRAK		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 400 N CAPITOL STREET NW		Amount of Each Disbursement this Period 237.00
City WASHINGTON State DC Zip Code 20001	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101493 [MEMO ITEM] TRAIN TICKETS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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 65 OF 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ACQUA AL 2		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 212 7TH STREET SOUTHEAST		Amount of Each Disbursement this Period 657.80
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101494
Office Sought: <input type="checkbox"/> 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:		[MEMO ITEM] EVENT CATERING

Full Name (Last, First, Middle Initial) B. FREEDOMPAY INC		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 17 CAMPUS BLVD SUITE 100		Amount of Each Disbursement this Period 50.00
City NEWTOWN SQUARE State PA Zip Code 19073	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101495
Office Sought: <input type="checkbox"/> 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:		[MEMO ITEM] MEALS

Full Name (Last, First, Middle Initial) C. SHEETZ INC		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 5700 SIXTH AVENUE		Amount of Each Disbursement this Period 64.40
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101496
Office Sought: <input type="checkbox"/> 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:		[MEMO ITEM] FUEL

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 66 OF 133			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address PO BOX 371461		Amount of Each Disbursement this Period 79.07
City PITTSBURGH	State PA	
Zip Code 15250	Purpose of Disbursement 001	Transaction ID : SB17.101497
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] SHIPPING
State: District:		

Full Name (Last, First, Middle Initial) B. VIRGIN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 65 BLEECKER ST. #6		Amount of Each Disbursement this Period 398.80
City NEW YORK	State NY	
Zip Code 10012	Purpose of Disbursement 001	Transaction ID : SB17.101500
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] AIRFARE
State: District:		

Full Name (Last, First, Middle Initial) C. HERTZ RENT-A-CAR		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 520 EAST PLANK ROAD		Amount of Each Disbursement this Period 247.54
City ALTOONA	State PA	
Zip Code 16602	Purpose of Disbursement 001	Transaction ID : SB17.101502
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] CAR RENTAL
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MARRIOTT		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 111 CRAWFORD AVENUE		Amount of Each Disbursement this Period 1142.11
City CONSHOHOCKEN	State PA Zip Code 19428	
Purpose of Disbursement	Category/Type 001	Transaction ID : SB17.101503 [MEMO ITEM] LODGING
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. THE BENJAMIN HOTEL		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
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	Category/Type 001	Transaction ID : SB17.101504 [MEMO ITEM] LODGING
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. THE WESTIN		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 1114 WASHINGTON BOULEVARD		Amount of Each Disbursement this Period 205.84
City DETROIT	State MI Zip Code 48226	
Purpose of Disbursement	Category/Type 001	Transaction ID : SB17.101505 [MEMO ITEM] LODGING
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 133		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BULLFEATHERS		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 410 FIRST STREET SE		Amount of Each Disbursement this Period 340.72
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101506 [MEMO ITEM] EVENT CATERING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T DATA		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 12525 CINGULAR WAY		Amount of Each Disbursement this Period 25.00
City ALPHARETTA State GA Zip Code 30004	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101507 [MEMO ITEM] INTERNET
Office Sought: <input type="checkbox"/> 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. RUBY TUESDAY RESTAURANT		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 106 SIERRA DRIVE		Amount of Each Disbursement this Period 85.00
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101550 [MEMO ITEM] MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 5620 UNIVERSITY PKWY		Amount of Each Disbursement this Period 202.00
City WINSTON SALEM	State NC	
Zip Code 27105	Purpose of Disbursement	Transaction ID : SB17.101551
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] AIRFARE
State: District:		

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 300 FIRST STREET SE		Amount of Each Disbursement this Period 46.73
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement	Transaction ID : SB17.101561
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEETING EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) C. ACQUA AL 2		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 212 7TH STREET SOUTHEAST		Amount of Each Disbursement this Period 260.00
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement	Transaction ID : SB17.101563
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] EVENT CATERING
State: District:		

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMTRAK		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 400 N CAPITOL STREET NW		Amount of Each Disbursement this Period 197.00
City WASHINGTON State DC Zip Code 20001	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101564
Office Sought: <input type="checkbox"/> 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:		[MEMO ITEM] TRAVEL EXPENSE

Full Name (Last, First, Middle Initial) B. EATALY		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 200 5TH AVENUE		Amount of Each Disbursement this Period 46.00
City NEW YORK State NY Zip Code 10010	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101567
Office Sought: <input type="checkbox"/> 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:		[MEMO ITEM] MEETING EXPENSE

Full Name (Last, First, Middle Initial) C. THE NEW YORK PALACE		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 455 MADISON AVENUE		Amount of Each Disbursement this Period 780.02
City NEW YORK State NY Zip Code 10022	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101569
Office Sought: <input type="checkbox"/> 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:		[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 71 OF 133			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHELL OIL		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 10524 SHARPSBURG PIKE		Amount of Each Disbursement this Period 48.51
City HAGERSTOWN State MD Zip Code 21740	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101570 [MEMO ITEM] FUEL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. HILTON - FORT LAUDERDALE		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 1870 GRIFFIN ROAD		Amount of Each Disbursement this Period 337.87
City DANIA State FL Zip Code 33004	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101571 [MEMO ITEM] LODGING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SCHNEIDERS OF CAPITOL HILL		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 300 MASSACHUSETTS AVENUE NE		Amount of Each Disbursement this Period 202.96
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101572 [MEMO ITEM] EVENT EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. POSTMASTER		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 525 ALLEGHENY STREET		Amount of Each Disbursement this Period 90.00
City HOLLIDAYSBURG	State PA	
Zip Code 16648	Purpose of Disbursement 001	Transaction ID : SB17.101576
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] POSTAGE
State: District:		

Full Name (Last, First, Middle Initial) B. DAVID'S WHOLESALE/MODA		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 2221 NE 164TH STREET #1100		Amount of Each Disbursement this Period 143.03
City NORTH MIAMI BEACH	State FL	
Zip Code 33160	Purpose of Disbursement 001	Transaction ID : SB17.101577
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] EVENT CATERING
State: District:		

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address PO BOX 371461		Amount of Each Disbursement this Period 111.66
City PITTSBURGH	State PA	
Zip Code 15250	Purpose of Disbursement 001	Transaction ID : SB17.101578
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] SHIPPING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 133			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 20d	<input type="checkbox"/> 19c 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JUSTIN'S CAFE			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012	
Mailing Address 1025 1ST ST. SE			Amount of Each Disbursement this Period 200.01	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.101581	
Purpose of Disbursement		Category/Type 001		
Candidate Name		[MEMO ITEM] EVENT CATERING		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. BULLFEATHERS			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012	
Mailing Address 410 FIRST STREET SE			Amount of Each Disbursement this Period 195.42	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.101583	
Purpose of Disbursement		Category/Type 001		
Candidate Name		[MEMO ITEM] EVENT CATERING		
Office Sought: <input type="checkbox"/> 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. BRASSERIE BECK			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012	
Mailing Address 1101 K STREET NW			Amount of Each Disbursement this Period 3917.25	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SB17.101584	
Purpose of Disbursement		Category/Type 001		
Candidate Name		[MEMO ITEM] EVENT CATERING		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 133			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. W MILLAR AND COMPANY CATERING			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012	
Mailing Address 1335 14TH STREET NW			Amount of Each Disbursement this Period 308.18	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SB17.101585	
Purpose of Disbursement		Category/ Type 001	[MEMO ITEM] EVENT CATERING	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. DAYS INN			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012	
Mailing Address 3306 PLEASANT VALLEY BLVD			Amount of Each Disbursement this Period 234.68	
City ALTOONA	State PA	Zip Code 16602	Transaction ID : SB17.101587	
Purpose of Disbursement		Category/ Type 001	[MEMO ITEM] LODGING	
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. AT&T DATA			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012	
Mailing Address 12525 CINGULAR WAY			Amount of Each Disbursement this Period 25.00	
City ALPHARETTA	State GA	Zip Code 30004	Transaction ID : SB17.101590	
Purpose of Disbursement		Category/ Type 001	[MEMO ITEM] INTERNET	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 133			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. REPUBLICAN PARTY OF HARRISBURG			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 112 STATE STREET			Amount of Each Disbursement this Period 800.00
City HARRISBURG	State PA	Zip Code 17101	
Purpose of Disbursement	Category/Type 001		Transaction ID : SB17.101591 [MEMO ITEM] EVENT TICKETS
Candidate Name REPUBLICAN PARTY OF HARRISBURG	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. HILTON - FORT LAUDERDALE			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 1870 GRIFFIN ROAD			Amount of Each Disbursement this Period 1013.61
City DANIA	State FL	Zip Code 33004	
Purpose of Disbursement	Category/Type 001		Transaction ID : SB17.101727 [MEMO ITEM] LODGING
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. FIOLA			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 601 PENNSYLVANIA AVENUE NW			Amount of Each Disbursement this Period 180.00
City WASHINGTON	State DC	Zip Code 20004	
Purpose of Disbursement	Category/Type 001		Transaction ID : SB17.101728 [MEMO ITEM] MEETING EXPENSE
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NEMACOLIN WOODLANDS RESORT & SPA		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 1001 LAFAYETTE DRIVE		Amount of Each Disbursement this Period 4472.08
City FARMINGTON State PA Zip Code 15437	Purpose of Disbursement 001	
Candidate Name		Transaction ID : SB17.101729 [MEMO ITEM] LODGING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address PO BOX 1270		Amount of Each Disbursement this Period 13812.97
City NEWARK State NJ Zip Code 07101	Purpose of Disbursement SEE BELOW 001	
Candidate Name		Transaction ID : SB17.101662
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. SHEETZ INC		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 5700 SIXTH AVENUE		Amount of Each Disbursement this Period 36.00
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement 001	
Candidate Name		Transaction ID : SB17.101731 [MEMO ITEM] FUEL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	13812.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ALLA FAMIGLIA		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 804 E WARRINGTON AVENUE		Amount of Each Disbursement this Period 225.00
City PITTSBURGH	State PA	
Zip Code 15210	Purpose of Disbursement 001	Transaction ID : SB17.101732
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] EVENT CATERING
State: District:		

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 300 FIRST STREET SE		Amount of Each Disbursement this Period 1605.32
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement 001	Transaction ID : SB17.101733
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] EVENT CATERING
State: District:		

Full Name (Last, First, Middle Initial) C. DEL FRISCO GRILLE		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 50 ROCKEFELLER PLAZA		Amount of Each Disbursement this Period 1930.98
City NEW YORK	State NY	
Zip Code 10020	Purpose of Disbursement 001	Transaction ID : SB17.101734
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] EVENT CATERING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 133			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JETBLUE		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 118-29 QUEENS BLVD.		Amount of Each Disbursement this Period 277.40
City FOREST HILLS	State NY	
Zip Code 11375	Purpose of Disbursement 001	Transaction ID : SB17.101735
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] AIRFARE
State: District:		

Full Name (Last, First, Middle Initial) B. MODERN LIQUORS		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 1200 9TH STREET NW		Amount of Each Disbursement this Period 968.41
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement 001	Transaction ID : SB17.101736
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] EVENT BEVERAGES
State: District:		

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 5620 UNIVERSITY PKWY		Amount of Each Disbursement this Period 1515.60
City WINSTON SALEM	State NC	
Zip Code 27105	Purpose of Disbursement 001	Transaction ID : SB17.101737
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] AIRFARE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement MM / DD / YYYY 09 / 05 / 2012
Mailing Address PO BOX 15026		Amount of Each Disbursement this Period 31.79
City ALBANY State NY Zip Code 12212	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101738 [MEMO ITEM] CELL PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SHELL OIL		Date of Disbursement MM / DD / YYYY 09 / 05 / 2012
Mailing Address 10524 SHARPSBURG PIKE		Amount of Each Disbursement this Period 720.94
City HAGERSTOWN State MD Zip Code 21740	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.101739 [MEMO ITEM] FUEL
Office Sought: <input type="checkbox"/> 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. REPUBLICAN PARTY OF HARRISBURG		Date of Disbursement MM / DD / YYYY 09 / 05 / 2012
Mailing Address 112 STATE STREET		Amount of Each Disbursement this Period 400.00
City HARRISBURG State PA Zip Code 17101	Purpose of Disbursement 001 Category/Type	
Candidate Name REPUBLICAN PARTY OF HARRISBURG		Transaction ID : SB17.101740 [MEMO ITEM] EVENT TICKETS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CF FOLKS		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 1225 19TH ST. NW		Amount of Each Disbursement this Period 430.93
City WASHINGTON	State DC	
Zip Code 20036	Purpose of Disbursement 001	Transaction ID : SB17.101742
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] EVENT CATERING
State: District:		

Full Name (Last, First, Middle Initial) B. HYE HOLDE		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 1516 CORAPOLIS HEIGHTS RD.		Amount of Each Disbursement this Period 310.00
City CORAOPOLIS	State PA	
Zip Code 15108	Purpose of Disbursement 001	Transaction ID : SB17.101743
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] EVENT CATERING
State: District:		

Full Name (Last, First, Middle Initial) C. FAIRMONT		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 510 MARKET STREET		Amount of Each Disbursement this Period 336.41
City PITTSBURGH	State PA	
Zip Code 15222	Purpose of Disbursement 001	Transaction ID : SB17.101744
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] LODGING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GODADDY.COM		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 14455 N. HAYDEN RD STE 219		Amount of Each Disbursement this Period 104.99
City SCOTTSDALE	State AZ	
Zip Code 85260	Purpose of Disbursement 001	Transaction ID : SB17.101746
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] WEB HOSTING
State: District:		

Full Name (Last, First, Middle Initial) B. DOUBLETREE HOTEL		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 11915 EL CAMINO REAL		Amount of Each Disbursement this Period 1000.00
City SAN DIEGO	State CA	
Zip Code 92130	Purpose of Disbursement 001	Transaction ID : SB17.101748
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] LODGING
State: District:		

Full Name (Last, First, Middle Initial) C. BULLFEATHERS		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 410 FIRST STREET SE		Amount of Each Disbursement this Period 191.81
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement 001	Transaction ID : SB17.101749
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEETING EXPENSE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SIRO'S		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 168 LINCOLN AVE.		Amount of Each Disbursement this Period 1129.35
City SARATOGA SPRINGS	State NY	
Zip Code 12866	Purpose of Disbursement 001	Transaction ID : SB17.101751
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] EVENT CATERING
State: District:		

Full Name (Last, First, Middle Initial) B. SOUTHWEST AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 2702 LOVE FIELD DR.		Amount of Each Disbursement this Period 210.80
City DALLAS	State TX	
Zip Code 75235	Purpose of Disbursement 001	Transaction ID : SB17.101752
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] AIRFARE
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address PO BOX 619612 MD 2400		Amount of Each Disbursement this Period 314.60
City DALLAS	State TX	
Zip Code 75261	Purpose of Disbursement 001	Transaction ID : SB17.101753
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] AIRFARE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 133			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 05 / 2012
Mailing Address PO BOX 371461		Amount of Each Disbursement this Period 27.03
City PITTSBURGH	State PA	
Zip Code 15250	Purpose of Disbursement 001	Transaction ID : SB17.101757
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] SHIPPING
State: District:		

Full Name (Last, First, Middle Initial) B. COPPER KETTLE		Date of Disbursement MM / DD / YYYY 09 / 05 / 2012
Mailing Address 94 PEABODY STREET		Amount of Each Disbursement this Period 237.85
City NASHVILLE	State TN	
Zip Code 37210	Purpose of Disbursement 001	Transaction ID : SB17.101758
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] EVENT CATERING
State: District:		

Full Name (Last, First, Middle Initial) C. OCEANAIRE RESTAURANT		Date of Disbursement MM / DD / YYYY 09 / 05 / 2012
Mailing Address 1201 F STREET NW		Amount of Each Disbursement this Period 53.27
City WASHINGTON	State DC	
Zip Code 20004	Purpose of Disbursement 001	Transaction ID : SB17.101759
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEETING EXPENSE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 133			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AU BON PAIN			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012		
Mailing Address 53 STATE STREET			Amount of Each Disbursement this Period 212.65		
City BOSTON	State MA	Zip Code 02109	Transaction ID : SB17.101760		
Purpose of Disbursement		Category/ Type 001	[MEMO ITEM] EVENT CATERING		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B. ATLANTIC BROADBAND			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012		
Mailing Address BOX 371801			Amount of Each Disbursement this Period 63.75		
City PITTSBURGH	State PA	Zip Code 15250	Transaction ID : SB17.101417		
Purpose of Disbursement INTERNET		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C. ATLANTIC BROADBAND			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2012		
Mailing Address BOX 371801			Amount of Each Disbursement this Period 68.75		
City PITTSBURGH	State PA	Zip Code 15250	Transaction ID : SB17.101458		
Purpose of Disbursement INTERNET		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....	132.50
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 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ATLANTIC BROADBAND		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2012
Mailing Address BOX 371801		Amount of Each Disbursement this Period 63.75 Transaction ID : SB17.101621
City PITTSBURGH	State PA	
Zip Code 15250	Purpose of Disbursement INTERNET	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ATLANTIC BROADBAND		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address BOX 371801		Amount of Each Disbursement this Period 63.75 Transaction ID : SB17.101718
City PITTSBURGH	State PA	
Zip Code 15250	Purpose of Disbursement INTERNET	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. BEDFORD CO REPUBLICAN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address C/O THOMAS GRANCE, TREASURER 157 EAST FIRST AVENUE		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.101719
City EVERETT	State PA	
Zip Code 15537	Purpose of Disbursement EVENT TICKETS	Category/ Type 001
Candidate Name BEDFORD CO REPUBLICAN COMMITTEE	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	627.50
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 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BISHOP GUILFOYLE H.S. ATHLETIC DEPT		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address ATTN: MRS LYNN ADAMS 2400 PLEASANT VALLEY BLVD		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.101422
City ALTOONA	State PA	
Zip Code 16602	Purpose of Disbursement ADVERTISING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. BLAIR CO REPUBLICAN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2012
Mailing Address C/O BETH BRITZ 1009 NEWRY LANE		Amount of Each Disbursement this Period 23.00 Transaction ID : SB17.101508
City DUNCANSVILLE	State PA	
Zip Code 16635	Purpose of Disbursement EVENT TICKETS	Category/ Type 001
Candidate Name BLAIR CO REPUBLICAN COMMITTEE	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. NANCY BULL		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 322 RIDGE AVENUE		Amount of Each Disbursement this Period 49.99 Transaction ID : SB17.101428
City WAYNESBORO	State PA	
Zip Code 17268	Purpose of Disbursement GOLF BALLS	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	472.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 87 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NANCY BULL		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2012
Mailing Address 322 RIDGE AVENUE		Amount of Each Disbursement this Period 136.68 Transaction ID : SB17.101602
City WAYNESBORO State PA Zip Code 17268	Purpose of Disbursement MILEAGE REIMBURSEMENT/POSTAGE Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CENPENN REALTY LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 513 ALLEGHENY STREET		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.101397
City HOLLIDAYSBURG State PA Zip Code 16648	Purpose of Disbursement RENT EXPENSE Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CENPENN REALTY LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address 513 ALLEGHENY STREET		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.101545
City HOLLIDAYSBURG State PA Zip Code 16648	Purpose of Disbursement RENT EXPENSE Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1136.68
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 88 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CENPENN REALTY LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 513 ALLEGHENY STREET		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.101651
City HOLLIDAYSBURG	State PA	
Zip Code 16648	Purpose of Disbursement RENT EXPENSE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CENTRAL BLAIR RECREATION COMMISSION		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2012
Mailing Address 2101 FIFTH AVENUE		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.101459
City ALTOONA	State PA	
Zip Code 16602	Purpose of Disbursement EVENT TICKETS	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ELIZABETH CONATSER		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 1525 KEARNEY STREET NE		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.101398
City WASHINGTON	State DC	
Zip Code 20017	Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4600.00
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 89 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELIZABETH CONATSER		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address 1525 KEARNEY STREET NE		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.101540
City WASHINGTON State DC Zip Code 20017	Purpose of Disbursement FUNDRAISING CONSULTING 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ELIZABETH CONATSER		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 1525 KEARNEY STREET NE		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.101646
City WASHINGTON State DC Zip Code 20017	Purpose of Disbursement FUNDRAISING CONSULTING 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. COPY RITE & BANNER ZONE		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2012
Mailing Address 301 ALLEGHENY STREET		Amount of Each Disbursement this Period 17.28 Transaction ID : SB17.101600
City HOLLIDAYSBURG State PA Zip Code 16648	Purpose of Disbursement PRINTING 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8017.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 90 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DREAMS GO ON TRAIL RIDE			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012	
Mailing Address C/O BETSY LEHMAN 315 QUINCE COURT			Amount of Each Disbursement this Period 200.00	
City HOLLIDAYSBURG	State PA	Zip Code 16648	Transaction ID : SB17.101663	
Purpose of Disbursement ADVERTISING		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ELECTEKUSA			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012	
Mailing Address PO BOX 23715			Amount of Each Disbursement this Period 2289.44	
City CHAGRIN FALLS	State OH	Zip Code 44023	Transaction ID : SB17.101425	
Purpose of Disbursement SOFTWARE		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ELECTEKUSA			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012	
Mailing Address PO BOX 23715			Amount of Each Disbursement this Period 2376.86	
City CHAGRIN FALLS	State OH	Zip Code 44023	Transaction ID : SB17.101557	
Purpose of Disbursement SOFTWARE		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	4866.30
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 91 OF 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELECTEKUSA		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 2285.48 Transaction ID : SB17.101692
City CHAGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement SOFTWARE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. BRUCE R ERB		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 109 AJAY COURT		Amount of Each Disbursement this Period 1774.08 Transaction ID : SB17.101764
City HOLLIDAYSBURG	State PA	
Zip Code 16648	Purpose of Disbursement HOTEL REIMBURSEMENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. EXCELLENCE IN PUBLIC SERVICE		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 43 S. NINTH STREET		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.101560
City INDIANA	State PA	
Zip Code 15701	Purpose of Disbursement EVENT TICKETS	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4309.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 133	
	<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. EXCELLENCE IN PUBLIC SERVICE

Full Name (Last, First, Middle Initial)
Mailing Address 43 S. NINTH STREET

City INDIANA State PA Zip Code 15701

Purpose of Disbursement
EVENT TICKETS

Candidate Name

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

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 07 / 2012

Amount of Each Disbursement this Period
250.00

Transaction ID : SB17.101580

Category/Type: 001

B. FAYETTE CO ASSOC OF TWP SUPERVISORS

Full Name (Last, First, Middle Initial)
Mailing Address LEIGH KLINK, FCATO SECRETARY
PO BOX 87

City NEW SALEM State PA Zip Code 15468

Purpose of Disbursement
ADVERTISING

Candidate Name

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

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 06 / 2012

Amount of Each Disbursement this Period
100.00

Transaction ID : SB17.101558

Category/Type: 001

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
CAR WASH

Candidate Name

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

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 11 / 2012

Amount of Each Disbursement this Period
34.67

Transaction ID : SB17.101418

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 384.67

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 93 OF 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FIRST COMMONWEALTH BANK		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address CREDIT CARD DEPT PO BOX 0537		Amount of Each Disbursement this Period 45.40
City INDIANA State PA Zip Code 15701	Purpose of Disbursement CAR WASH	
Candidate Name	001 Category/Type	Transaction ID : SB17.101439
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. FIRST COMMONWEALTH BANK		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2012
Mailing Address CREDIT CARD DEPT PO BOX 0537		Amount of Each Disbursement this Period 218.34
City INDIANA State PA Zip Code 15701	Purpose of Disbursement SEE BELOW-NO ITEMIZATION NECESSARY	
Candidate Name	001 Category/Type	Transaction ID : SB17.101624
Office Sought: <input type="checkbox"/> 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. FIRST COMMONWEALTH BANK		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2012
Mailing Address CREDIT CARD DEPT PO BOX 0537		Amount of Each Disbursement this Period 22.83
City INDIANA State PA Zip Code 15701	Purpose of Disbursement PARKING	
Candidate Name	001 Category/Type	Transaction ID : SB17.101626
Office Sought: <input type="checkbox"/> 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).....	286.57
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 94 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FIRST COMMONWEALTH BANK		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address CREDIT CARD DEPT PO BOX 0537		Amount of Each Disbursement this Period 18.00 Transaction ID : SB17.101707
City INDIANA State PA Zip Code 15701	Purpose of Disbursement SEE BELOW-NO ITEMIZATION NECESSARY 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FIRST COMMONWEALTH BANK		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address CREDIT CARD DEPT PO BOX 0537		Amount of Each Disbursement this Period 138.00 Transaction ID : SB17.101709
City INDIANA State PA Zip Code 15701	Purpose of Disbursement SEE BELOW-NO ITEMIZATION NECESSARY 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FRANKLIN CO AREA DEV CORP.		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address 1900 WAYNE ROAD		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.101697
City CHAMBERSBURG State PA Zip Code 17202	Purpose of Disbursement EVENT TICKETS 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	556.00
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 95 OF 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FUNDRAISING BY NET LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2012
Mailing Address 1101 PENNSYLVANIA AVENUE NW FL 6			Amount of Each Disbursement this Period 70.38 Transaction ID : SB17.101446
City WASHINGTON	State DC	Zip Code 20004	
Purpose of Disbursement TRANSACTION FEES	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. FUNDRAISING BY NET LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 1101 PENNSYLVANIA AVENUE NW FL 6			Amount of Each Disbursement this Period 174.13 Transaction ID : SB17.101645
City WASHINGTON	State DC	Zip Code 20004	
Purpose of Disbursement TRANSACTION FEES	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. FUNDRAISING BY NET LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2012
Mailing Address 1101 PENNSYLVANIA AVENUE NW FL 6			Amount of Each Disbursement this Period 35.13 Transaction ID : SB17.101869
City WASHINGTON	State DC	Zip Code 20004	
Purpose of Disbursement TRANSACTION FEES	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	279.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 96 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BRENT GATES		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 310 PENN STREET SUITE 200		Amount of Each Disbursement this Period 35.20
City HOLLIDAYSBURG State PA Zip Code 16648	Purpose of Disbursement MILEAGE REIMBURSEMENT Category/Type 001	
Candidate Name		Transaction ID : SB17.101666
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. KELLEY HALLIWELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 700 S. COURTHOUSE ROAD #508		Amount of Each Disbursement this Period 250.00
City ARLINGTON State VA Zip Code 22204	Purpose of Disbursement SALARY Category/Type 001	
Candidate Name		Transaction ID : SB17.101400
Office Sought: <input type="checkbox"/> 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. KELLEY HALLIWELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2012
Mailing Address 700 S. COURTHOUSE ROAD #508		Amount of Each Disbursement this Period 152.27
City ARLINGTON State VA Zip Code 22204	Purpose of Disbursement MILEAGE REIMBURSEMENT Category/Type 001	
Candidate Name		Transaction ID : SB17.101463
Office Sought: <input type="checkbox"/> 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).....	437.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KELLEY HALLIWELL		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address 700 S. COURTHOUSE ROAD #508		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.101542
City ARLINGTON State VA Zip Code 22204	Purpose of Disbursement SALARY 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. KELLEY HALLIWELL		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 700 S. COURTHOUSE ROAD #508		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.101648
City ARLINGTON State VA Zip Code 22204	Purpose of Disbursement SALARY 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. KELLEY HALLIWELL		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 700 S. COURTHOUSE ROAD #508		Amount of Each Disbursement this Period 1036.40 Transaction ID : SB17.101653
City ARLINGTON State VA Zip Code 22204	Purpose of Disbursement SEE BELOW 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1536.40
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 98 OF 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. 32 EAST		Date of Disbursement MM / DD / YYYY 09 / 04 / 2012
Mailing Address 32 EAST ATLANTIC AVE.		Amount of Each Disbursement this Period 341.96
City DELRAY BEACH	State FL	
Zip Code 33444	Purpose of Disbursement 001	Transaction ID : SB17.101654
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] EVENT CATERING
State: District:		

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 04 / 2012
Mailing Address 5620 UNIVERSITY PKWY		Amount of Each Disbursement this Period 25.00
City WINSTON SALEM	State NC	
Zip Code 27105	Purpose of Disbursement 001	Transaction ID : SB17.101657
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] AIRFARE
State: District:		

Full Name (Last, First, Middle Initial) C. ENTERPRISE RENTACAR		Date of Disbursement MM / DD / YYYY 09 / 04 / 2012
Mailing Address 2408 LAND O LAKES BLVD		Amount of Each Disbursement this Period 233.46
City LAND O LAKES	State FL	
Zip Code 34639	Purpose of Disbursement 001	Transaction ID : SB17.101658
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] CAR RENTAL
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 99 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE SEAGATE HOTEL		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 1000 EAST ATLANTIC AVE.		Amount of Each Disbursement this Period 236.74
City DELRAY BEACH State FL Zip Code 33483	Purpose of Disbursement 001	
Candidate Name		Transaction ID : SB17.101660
Office Sought: <input type="checkbox"/> 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:		[MEMO ITEM] LODGING

Full Name (Last, First, Middle Initial) B. KELLEY HALLIWELL		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address 700 S. COURTHOUSE ROAD #508		Amount of Each Disbursement this Period 563.36
City ARLINGTON State VA Zip Code 22204	Purpose of Disbursement SEE BELOW 001	
Candidate Name		Transaction ID : SB17.101672
Office Sought: <input type="checkbox"/> 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. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address 5620 UNIVERSITY PKWY		Amount of Each Disbursement this Period 140.00
City WINSTON SALEM State NC Zip Code 27105	Purpose of Disbursement 001	
Candidate Name		Transaction ID : SB17.101673
Office Sought: <input type="checkbox"/> 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:		[MEMO ITEM] AIRFARE

SUBTOTAL of Disbursements This Page (optional).....	563.36
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. POSTCARD INN ON THE BEACH		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address 6300 GULF BLVD.		Amount of Each Disbursement this Period 200.48
City ST. PETE BEACH	State FL Zip Code 33706	
Purpose of Disbursement	Category/Type 001	Transaction ID : SB17.101675
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)	[MEMO ITEM] LODGING
State: District:		

Full Name (Last, First, Middle Initial) B. DOUBLETREE HOTEL		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address 11915 EL CAMINO REAL		Amount of Each Disbursement this Period 166.88
City SAN DIEGO	State CA Zip Code 92130	
Purpose of Disbursement	Category/Type 001	Transaction ID : SB17.101676
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)	[MEMO ITEM] LODGING
State: District:		

Full Name (Last, First, Middle Initial) C. HUNTINGDON COUNTY GOP		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address PO BOX 61		Amount of Each Disbursement this Period 100.00
City HUNTINGDON	State PA Zip Code 16652	
Purpose of Disbursement ADVERTISING	Category/Type 001	Transaction ID : SB17.101701
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).....	100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. INDIANA COUNTY FOP #33			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address PO BOX 142			Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17.101416
City INDIANA	State PA	Zip Code 15701	
Purpose of Disbursement ADVERTISING	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. INTERSTATE NATURAL GAS ASSOC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 10 G ST NE SUITE 700			Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.101419
City WASHINGTON	State DC	Zip Code 20002	
Purpose of Disbursement EVENT FACILITY RENTAL	Candidate Name INTERSTATE NATURAL GAS ASSOC.		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. JHZ CONSULTING			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2012
Mailing Address PO BOX 412			Amount of Each Disbursement this Period 3252.96 Transaction ID : SB17.101461
City HARRISBURG	State PA	Zip Code 17108	
Purpose of Disbursement FUNDRAISING CONSULTING	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	3530.46
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 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JHZ CONSULTING			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2012	
Mailing Address PO BOX 412			Amount of Each Disbursement this Period 3000.00	
City HARRISBURG	State PA	Zip Code 17108	Transaction ID : SB17.101601	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. JHZ CONSULTING			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012	
Mailing Address PO BOX 412			Amount of Each Disbursement this Period 3000.00	
City HARRISBURG	State PA	Zip Code 17108	Transaction ID : SB17.101711	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. MR. SEAN JOYCE			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012	
Mailing Address 1002 F STREET NE			Amount of Each Disbursement this Period 600.00	
City WASHINGTON	State DC	Zip Code 20002	Transaction ID : SB17.101396	
Purpose of Disbursement SALARY		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	6600.00
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 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. SEAN JOYCE			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012	
Mailing Address 1002 F STREET NE			Amount of Each Disbursement this Period 342.80	
City WASHINGTON	State DC	Zip Code 20002	Transaction ID : SB17.101669	
Purpose of Disbursement AIRFARE REIMBURSEMENT		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. MR. SEAN JOYCE			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2012	
Mailing Address 1002 F STREET NE			Amount of Each Disbursement this Period 363.30	
City WASHINGTON	State DC	Zip Code 20002	Transaction ID : SB17.101702	
Purpose of Disbursement SEE BELOW		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. DILLARDS			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2012	
Mailing Address 1798 TAMIAMI TRAIL NORTH			Amount of Each Disbursement this Period 278.52	
City NAPLES	State FL	Zip Code 34102	Transaction ID : SB17.101706	
Purpose of Disbursement		Category/ Type 001	[MEMO ITEM] CLOTHING	
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).....	706.10
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 104 OF 133			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MCGUIREWOODS LLP			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012	
Mailing Address 2001 K STREET NW STE. 400			Amount of Each Disbursement this Period 1000.00	
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : SB17.101402	
Purpose of Disbursement LEGAL FEES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. MCGUIREWOODS LLP			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012	
Mailing Address 2001 K STREET NW STE. 400			Amount of Each Disbursement this Period 1000.00	
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : SB17.101544	
Purpose of Disbursement LEGAL FEES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. MCGUIREWOODS LLP			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012	
Mailing Address 2001 K STREET NW STE. 400			Amount of Each Disbursement this Period 1000.00	
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : SB17.101650	
Purpose of Disbursement LEGAL FEES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3000.00
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 105 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MCGUIREWOODS LLP		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 2001 K STREET NW STE. 400		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.101721
City WASHINGTON State DC Zip Code 20006	Purpose of Disbursement LEGAL FEES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MS. JENNIFER MEARKLE		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 3022 BROAD AVE		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.101399
City ALTOONA State PA Zip Code 16601	Purpose of Disbursement SALARY 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MS. JENNIFER MEARKLE		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2012
Mailing Address 3022 BROAD AVE		Amount of Each Disbursement this Period 132.00 Transaction ID : SB17.101509
City ALTOONA State PA Zip Code 16601	Purpose of Disbursement MILEAGE REIMBURSEMENT 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1332.00
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 106 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MS. JENNIFER MEARKLE		Date of Disbursement MM / DD / YYYY 08 / 01 / 2012
Mailing Address 3022 BROAD AVE		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.101541
City ALTOONA State PA Zip Code 16601	Purpose of Disbursement SALARY Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MS. JENNIFER MEARKLE		Date of Disbursement MM / DD / YYYY 09 / 04 / 2012
Mailing Address 3022 BROAD AVE		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.101647
City ALTOONA State PA Zip Code 16601	Purpose of Disbursement SALARY Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MORRISON COVE BLAIR CO. REPUBLICAN CLUB		Date of Disbursement MM / DD / YYYY 08 / 20 / 2012
Mailing Address FRED FOREMAN 305 CAMPBELL AVENUE		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.101623
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement EVENT TICKETS Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	500.00
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 107 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NATIONAL MS SOCIETY			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012	
Mailing Address KEYSTONE BRANCH 506 THIRD AVENUE			Amount of Each Disbursement this Period 275.00	
City DUNCANSVILLE	State PA	Zip Code 16635	Transaction ID : SB17.101700	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. ROGER OSBAUGH			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2012	
Mailing Address 1153 LEISURE DR			Amount of Each Disbursement this Period 43.45	
City CHAMBERSBURG	State PA	Zip Code 17201	Transaction ID : SB17.101464	
Purpose of Disbursement CELL PHONE MINUTES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. ROGER OSBAUGH			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012	
Mailing Address 1153 LEISURE DR			Amount of Each Disbursement this Period 78.26	
City CHAMBERSBURG	State PA	Zip Code 17201	Transaction ID : SB17.101555	
Purpose of Disbursement MILEAGE REIMBURSEMENT		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	396.71
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 108 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ROGER OSBAUGH		Date of Disbursement MM / DD / YYYY 08 / 14 / 2012
Mailing Address 1153 LEISURE DR		Amount of Each Disbursement this Period 4,567,890.12 33.00 Transaction ID : SB17.101603
City CHAMBERSBURG	State PA	
Zip Code 17201	Purpose of Disbursement MILEAGE REIMBURSEMENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ROGER OSBAUGH		Date of Disbursement MM / DD / YYYY 09 / 05 / 2012
Mailing Address 1153 LEISURE DR		Amount of Each Disbursement this Period 4,567,890.12 393.30 Transaction ID : SB17.101661
City CHAMBERSBURG	State PA	
Zip Code 17201	Purpose of Disbursement MILEAGE REIMBURSEMENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ROGER OSBAUGH		Date of Disbursement MM / DD / YYYY 09 / 24 / 2012
Mailing Address 1153 LEISURE DR		Amount of Each Disbursement this Period 4,567,890.12 19.91 Transaction ID : SB17.101722
City CHAMBERSBURG	State PA	
Zip Code 17201	Purpose of Disbursement MILEAGE REIMBURSEMENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	446.21
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 109 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PENNSYLVANIA STATE UNIVERSITY		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address 127 BRYCE JORDAN CENTER		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.101694
City UNIVERSITY PARK	State PA	
Zip Code 16802	Purpose of Disbursement EVENT FACILITY RENTAL	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. RED MAVERICK MEDIA LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 401 N. SECOND STREET		Amount of Each Disbursement this Period 1265.34 Transaction ID : SB17.101426
City HARRISBURG	State PA	
Zip Code 17101	Purpose of Disbursement ELECTION DAY CARDS	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. RED MAVERICK MEDIA LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2012
Mailing Address 401 N. SECOND STREET		Amount of Each Disbursement this Period 6500.00 Transaction ID : SB17.101628
City HARRISBURG	State PA	
Zip Code 17101	Purpose of Disbursement DIRECT MAIL FUNDRAISING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	10765.34
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 110 OF 133			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RED MAVERICK MEDIA LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012	
Mailing Address 401 N. SECOND STREET			Amount of Each Disbursement this Period 6500.00	
City HARRISBURG	State PA	Zip Code 17101	Transaction ID : SB17.101712	
Purpose of Disbursement DIRECT MAIL FUNDRAISING		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. S&T BANK			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012	
Mailing Address 1100 LOGAN BLVD			Amount of Each Disbursement this Period 50.00	
City ALTOONA	State PA	Zip Code 16602	Transaction ID : SB17.101548	
Purpose of Disbursement BANK FEES		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. S&T BANK			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012	
Mailing Address 1100 LOGAN BLVD			Amount of Each Disbursement this Period 30.00	
City ALTOONA	State PA	Zip Code 16602	Transaction ID : SB17.101549	
Purpose of Disbursement BANK FEES		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	6580.00
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 111 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. S&T BANK		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address 1100 LOGAN BLVD		Amount of Each Disbursement this Period 50.00
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement BANK FEES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : SB17.101678

Full Name (Last, First, Middle Initial) B. S&T BANK		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address 1100 LOGAN BLVD		Amount of Each Disbursement this Period 30.00
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement BANK FEES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : SB17.101679

Full Name (Last, First, Middle Initial) C. S&T BANK		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 1100 LOGAN BLVD		Amount of Each Disbursement this Period 50.00
City ALTOONA State PA Zip Code 16602	Purpose of Disbursement BANK FEES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : SB17.101766

SUBTOTAL of Disbursements This Page (optional).....	130.00
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 112 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. S&T BANK		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address 1100 LOGAN BLVD		Amount of Each Disbursement this Period 30.00
City ALTOONA	State PA Zip Code 16602	
Purpose of Disbursement BANK FEES	Category/Type 001	Transaction ID : SB17.101767
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. WILLIAM SHUSTER		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 455 OVERLOOK DR		Amount of Each Disbursement this Period 381.32
City HOLLIDAYSBURG	State PA Zip Code 16648	
Purpose of Disbursement CAB FARE REIMBURSEMENT	Category/Type 001	Transaction ID : SB17.101424
Candidate Name WILLIAM MR. SHUSTER		
Office Sought: <input checked="" type="checkbox"/> 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: PA District: 09		

Full Name (Last, First, Middle Initial) C. WILLIAM SHUSTER		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 455 OVERLOOK DR		Amount of Each Disbursement this Period 20.00
City HOLLIDAYSBURG	State PA Zip Code 16648	
Purpose of Disbursement EVENT TICKET REIMBURSEMENT	Category/Type 001	Transaction ID : SB17.101556
Candidate Name WILLIAM MR. SHUSTER		
Office Sought: <input checked="" type="checkbox"/> 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: PA District: 09		

SUBTOTAL of Disbursements This Page (optional).....	431.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WILLIAM SHUSTER		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address 455 OVERLOOK DR		Amount of Each Disbursement this Period 10.33 Transaction ID : SB17.101696
City HOLLIDAYSBURG	State PA	
Zip Code 16648	Purpose of Disbursement FOOD & BEVERAGE	Category/ Type 001
Candidate Name WILLIAM MR. SHUSTER	Office Sought: <input checked="" type="checkbox"/> 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: PA District: 09	

Full Name (Last, First, Middle Initial) B. WILLIAM SHUSTER		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 455 OVERLOOK DR		Amount of Each Disbursement this Period 538.58 Transaction ID : SB17.101720
City HOLLIDAYSBURG	State PA	
Zip Code 16648	Purpose of Disbursement SEE BELOW	Category/ Type 001
Candidate Name WILLIAM MR. SHUSTER	Office Sought: <input checked="" type="checkbox"/> 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: PA District: 09	

Full Name (Last, First, Middle Initial) C. NEMACOLIN WOODLANDS RESORT & SPA		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 1001 LAFAYETTE DRIVE		Amount of Each Disbursement this Period 399.36 Transaction ID : SB17.101723
City FARMINGTON	State PA	
Zip Code 15437	Purpose of Disbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM] LODGING

SUBTOTAL of Disbursements This Page (optional) 548.91
TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ROBERT SIMMS		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2012
Mailing Address 70 I STREET SE #719		Amount of Each Disbursement this Period 263.18 Transaction ID : SB17.101415
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement MILEAGE, CELL PHONE, LODGING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ROBERT SIMMS		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012
Mailing Address 70 I STREET SE #719		Amount of Each Disbursement this Period 149.00 Transaction ID : SB17.101677
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement RNC REIMBURSEMENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. REBEKAH SUNGALA		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 545 OLD NATIONAL PIKE		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.101401
City BROWNSVILLE	State PA	
Zip Code 15417	Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2412.18
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. REBEKAH SUNGALA		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 545 OLD NATIONAL PIKE		Amount of Each Disbursement this Period 638.73 Transaction ID : SB17.101423
City BROWNSVILLE	State PA	
Zip Code 15417	Purpose of Disbursement SEE BELOW	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address PO BOX 371461		Amount of Each Disbursement this Period 61.97 Transaction ID : SB17.101466
City PITTSBURGH	State PA	
Zip Code 15250	Purpose of Disbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM] SHIPPING

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address PLANK ROAD/ORCHARD PLAZA		Amount of Each Disbursement this Period 89.03 Transaction ID : SB17.101468
City ALTOONA	State PA	
Zip Code 16602	Purpose of Disbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM] POSTERS

SUBTOTAL of Disbursements This Page (optional).....	638.73
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 116 OF 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COURTYARD BY MARRIOTT			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012	
Mailing Address 2 CONVENTION CENTER BLVD			Amount of Each Disbursement this Period 2012 162.41	
City ALTOONA	State PA	Zip Code 16602	Transaction ID : SB17.101469	
Purpose of Disbursement		001 Category/ Type		
Candidate Name			[MEMO ITEM] LODGING	
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. REBEKAH SUNGALA			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012	
Mailing Address 545 OLD NATIONAL PIKE			Amount of Each Disbursement this Period 2012 306.00	
City BROWNSVILLE	State PA	Zip Code 15417	Transaction ID : SB17.101470	
Purpose of Disbursement		001 Category/ Type		
Candidate Name			[MEMO ITEM] MILEAGE REIMBURSEMENT	
Office Sought:	<input type="checkbox"/> 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. REBEKAH SUNGALA			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012	
Mailing Address 545 OLD NATIONAL PIKE			Amount of Each Disbursement this Period 2012 2000.00	
City BROWNSVILLE	State PA	Zip Code 15417	Transaction ID : SB17.101543	
Purpose of Disbursement SALARY		001 Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	2000.00
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 117 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. REBEKAH SUNGALA		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 545 OLD NATIONAL PIKE		Amount of Each Disbursement this Period 5.00 Transaction ID : SB17.101559
City BROWNSVILLE State PA Zip Code 15417	Purpose of Disbursement EVENT TICKET REIMBURSEMENT Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. REBEKAH SUNGALA		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2012
Mailing Address 545 OLD NATIONAL PIKE		Amount of Each Disbursement this Period 658.59 Transaction ID : SB17.101625
City BROWNSVILLE State PA Zip Code 15417	Purpose of Disbursement MILEAGE REIMBURSEMENT Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. REBEKAH SUNGALA		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 545 OLD NATIONAL PIKE		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.101649
City BROWNSVILLE State PA Zip Code 15417	Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2663.59
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 118 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TWENTY-FIRST CENTURY GROUP			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012	
Mailing Address 434 NEW JERSEY AVENUE SE			Amount of Each Disbursement this Period 990.00	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.101427	
Purpose of Disbursement EVENT CATERING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012	
Mailing Address PO BOX 15026			Amount of Each Disbursement this Period 1881.09	
City ALBANY	State NY	Zip Code 12212	Transaction ID : SB17.101403	
Purpose of Disbursement CELL PHONE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012	
Mailing Address PO BOX 15026			Amount of Each Disbursement this Period 228.81	
City ALBANY	State NY	Zip Code 12212	Transaction ID : SB17.101441	
Purpose of Disbursement CELL PHONE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3099.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement MM / DD / YYYY 08 / 14 / 2012
Mailing Address PO BOX 15026		Amount of Each Disbursement this Period 232.60 Transaction ID : SB17.101604
City ALBANY State NY Zip Code 12212	Purpose of Disbursement CELL PHONE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. VERIZON		Date of Disbursement MM / DD / YYYY 09 / 05 / 2012
Mailing Address PO BOX 15026		Amount of Each Disbursement this Period 1077.84 Transaction ID : SB17.101665
City ALBANY State NY Zip Code 12212	Purpose of Disbursement CELL PHONE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. VERIZON		Date of Disbursement MM / DD / YYYY 09 / 13 / 2012
Mailing Address PO BOX 15026		Amount of Each Disbursement this Period 230.56 Transaction ID : SB17.101695
City ALBANY State NY Zip Code 12212	Purpose of Disbursement CELL PHONE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1541.00
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 120 OF 133	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address PO BOX 15026		Amount of Each Disbursement this Period 968.05 Transaction ID : SB17.101763
City ALBANY State NY Zip Code 12212	Purpose of Disbursement CELL PHONE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B.		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 Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

SUBTOTAL of Disbursements This Page (optional).....	968.05
TOTAL This Period (last page this line number only).....	126165.05

**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 121 OF 133	
	<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) A. ADAM HASNER FOR US HOUSE		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address PO BOX 276093		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101448
City BOCA RATON State FL Zip Code 33427	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name ADAM HASNER	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)	
State: FL District: 22		

Full Name (Last, First, Middle Initial) B. ANN MARIE BUERKLE FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address PO BOX 219		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.101685
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name ANN MARIE BUERKLE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 24		

Full Name (Last, First, Middle Initial) C. ANN WAGNER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address PO BOX 50		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101538
City BALLWIN State MO Zip Code 63022	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name ANN L WAGNER	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)	
State: MO District: 02		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
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 122 OF 133	
	<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) A. ARCHER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address PO BOX 122		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101451
City BETTENDORF	State IA	
Zip Code 52722	Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011
Candidate Name JOHN H JR ARCHER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

Full Name (Last, First, Middle Initial) B. BASS VICTORY COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address PO BOX 3451		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101687
City CONCORD	State NH	
Zip Code 03302	Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011
Candidate Name CHARLES F. BASS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NH District: 02	

Full Name (Last, First, Middle Initial) C. BOBBY SCHILLING FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address 367 AVENUE OF THE CITIES SUITE D		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101681
City EAST MOLINE	State IL	
Zip Code 61244	Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011
Candidate Name ROBERT T. SCHILLING	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 17	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
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 123 OF 133	
	<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) A. CANSECO FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address 10004 WURZBACH ROAD #366		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101690
City SAN ANTONIO State TX Zip Code 78230	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name FRANCISCO RAUL QUICO CANSECO		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.101680
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 23		

Full Name (Last, First, Middle Initial) B. CHRIS GIBSON FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address PO BOX 234		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.101680
City SARATOGA SPRINGS State NY Zip Code 12866	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name CHRISTOPHER P GIBSON		Amount of Each Disbursement this Period 300.00 Transaction ID : SB21.101460
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 19		

Full Name (Last, First, Middle Initial) C. CITIZENS FOR STALLEY		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2012
Mailing Address 248 STARDUST DRIVE		Amount of Each Disbursement this Period 300.00 Transaction ID : SB21.101460
City JOHNSTOWN State PA Zip Code 15904	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name CITIZENS FOR STALLEY		Amount of Each Disbursement this Period 3300.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3300.00
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 124 OF 133			
	<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) A. COFFMAN FOR CONGRESS 2012		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address 9249 SOUTH BROADWAY #200-501		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101682
City HIGHLANDS RANCH	State CO	
Purpose of Disbursement POLITICAL CONTRIBUTION	011	Category/ Type
Candidate Name MICHAEL COFFMAN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CO	District: 06	

Full Name (Last, First, Middle Initial) B. COLLINS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address PO BOX 386		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101450
City CLARENCE	State NY	
Purpose of Disbursement POLITICAL CONTRIBUTION	011	Category/ Type
Candidate Name CHRISTOPHER CARL COLLINS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 27	

Full Name (Last, First, Middle Initial) C. CRAMER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address PO BOX 396		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101455
City BISMARCK	State ND	
Purpose of Disbursement POLITICAL CONTRIBUTION	011	Category/ Type
Candidate Name KEVIN CRAMER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: ND	District: 00	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
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 125 OF 133	
	<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) A. CRAVAACK FOR CONGRESS CAMPAIGN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address P.O. BOX 40040		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.101688
City ST PAUL State MN Zip Code 55104	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name RAYMOND J MR. CRAVAACK		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 08		

Full Name (Last, First, Middle Initial) B. DAN BENISHEK FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address PO BOX 2012		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101684
City KINGSFORD State MI Zip Code 49802	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name DANIEL J. MD BENISHEK		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 01		

Full Name (Last, First, Middle Initial) C. DAN LUNGREN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address 9321 SILVERBEND LANE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101686
City ELK GROVE State CA Zip Code 95624	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name DANIEL E. LUNGREN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 07		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
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 126 OF 133	
	<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) A. DANNY TARKANIAN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 7220 S CIMARRON RD SUITE 100		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101449
City LAS VEGAS State NV Zip Code 89113	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name DANNY TARKANIAN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NV District: 04		

Full Name (Last, First, Middle Initial) B. DUFFY FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address PO BOX 538		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101554
City WAUSAU State WI Zip Code 54402	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name SEAN DUFFY	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)	
State: WI District: 07		

Full Name (Last, First, Middle Initial) C. DUFFY FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2012
Mailing Address PO BOX 538		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.101704
City WAUSAU State WI Zip Code 54402	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name SEAN DUFFY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WI District: 07		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
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 127 OF 133	
	<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) A. ELECT BLAKE FARENTHOLD COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address P.O. BOX 3369		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.101652
City State Zip Code CORPUS CHRISTI TX 78463	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name RANDOLPH BLAKE FARENTHOLD		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101547
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 27		

Full Name (Last, First, Middle Initial) B. FAYETTE COUNTY REPUBLICAN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address 41 RUBLE DRIVE C/O MIKE HOSIER		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101547
City State Zip Code UNIONTOWN PA 15401	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name FAYETTE COUNTY REPUBLICAN COMMITTEE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101703
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FRIENDS OF SCOTT DESJARLAIS		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2012
Mailing Address P O BOX 90133		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101703
City State Zip Code NASHVILLE TN 37209	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name SCOTT EUGENE DESJARLAIS		Amount of Each Disbursement this Period 4000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 04		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
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 128 OF 133	
	<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) A. GREENE CO. REPUBLICAN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address 970 MAPLETOWN ROAD		Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.101546
City GREENSBORO State PA Zip Code 15338	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. HUDSON FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address PO BOX 5053		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101452
City CONCORD State NC Zip Code 28027	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name RICHARD L. JR. HUDSON Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 08		

Full Name (Last, First, Middle Initial) C. HUDSON FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2012
Mailing Address PO BOX 5053		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101511
City CONCORD State NC Zip Code 28027	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name RICHARD L. JR. HUDSON Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 08		

SUBTOTAL of Disbursements This Page (optional).....	2500.00
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 129 OF 133	
	<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) A. INDIANA CO REPUBLICAN EXECUTIVE COMM		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address PO BOX 565		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB21.101664
City INDIANA	State PA	
Zip Code 15701	Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. INDIANA JR. LIVESTOCK SALE		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address PO BOX 22		Amount of Each Disbursement this Period 3426.50 Transaction ID : SB21.101698
City CLYMER	State PA	
Zip Code 15728	Purpose of Disbursement DONATION	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. JIM RENACCI FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address 150 SMOKERISE DRIVE		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.101689
City WADSWORTH	State OH	
Zip Code 44281	Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011
Candidate Name JAMES B RENACCI	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: OH District: 16	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	6926.50
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 130 OF 133	
	<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) A. JON RUNYAN FOR CONGRESS, INC		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address PO BOX 225		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.101456
City COLONIA State NJ Zip Code 07067	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name JON RUNYAN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NJ District: 03	

Full Name (Last, First, Middle Initial) B. JUDY BIGGERT FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address P.O. BOX 637		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101683
City HINSDALE State IL Zip Code 60521	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name JUDY BIGGERT	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 11	

Full Name (Last, First, Middle Initial) C. KIWANIS CLUB OF ALTOONA		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address C/O MARTY MALONE - P. JOSEPH LEHMA PO BOX 419		Amount of Each Disbursement this Period 200.00 Transaction ID : SB21.101699
City HOLLIDAYSBURG State PA Zip Code 16648	Purpose of Disbursement DONATION 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3200.00
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 131 OF 133	
	<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) A. LATHAM FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2012
Mailing Address PO BOX 8237		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.101715
City DES MOINES	State IA	
Zip Code 50301	Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011
Candidate Name THOMAS LATHAM		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA	District: 03	

Full Name (Last, First, Middle Initial) B. MEADOWS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address PO BOX 811		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101454
City HIGHLANDS	State NC	
Zip Code 28741	Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011
Candidate Name MARK R MEADOWS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) C. PATRIOTS FOR PERRY		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address 130 ORE BANK ROAD		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.101539
City DILLSBURG	State PA	
Zip Code 17019	Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011
Candidate Name SCOTT PERRY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA	District: 04	

SUBTOTAL of Disbursements This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 133			
	<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) A. RAYE FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address PO BOX 207		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101453
City EASTPORT State ME Zip Code 04631	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name KEVIN L RAYE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: ME District: 02	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. RIBBLE FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address PO BOX 7200		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.101553
City APPLETON State WI Zip Code 54912	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name REID RIBBLE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: WI District: 08	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. ROMNEY VICTORY INC		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 585 COMMERCIAL STREET		Amount of Each Disbursement this Period 10000.00 Transaction ID : SB21.101762
City BOSTON State MA Zip Code 02109	Purpose of Disbursement POLITICAL CONTRIBUTION 011 Category/Type	
Candidate Name ROMNEY VICTORY INC	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	13000.00
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 133 OF 133	
	<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) A. RORABACK FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2012
Mailing Address 24 MASON STREET PO BOX 807		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101716
City TORRINGTON State CT Zip Code 06790	Purpose of Disbursement POLITICAL CONTRIBUTION Category/Type 011	
Candidate Name ANDREW RORABACK		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		

Full Name (Last, First, Middle Initial) B. SCOTT RIGELL FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 915 FIRST COLONIAL ROAD SUITE 100		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.101552
City VIRGINIA BEACH State VA Zip Code 23454	Purpose of Disbursement POLITICAL CONTRIBUTION Category/Type 011	
Candidate Name EDWARD SCOTT MR. RIGELL		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02		

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

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	57926.50