

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

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

Bill Shuster for Congress

ADDRESS (number and street)

PO Box 27

Check if different than previously reported. (ACC)

Hollidaysburg

PA

16848

2. **FEC IDENTIFICATION NUMBER**

C00364935

CITY

STATE

ZIP CODE

STATE DISTRICT

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

PA 9

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

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

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

Election on 04 27 2004 in the State of PA

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

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

Election on in the State of

5. Covering Period 01 01 2004 through 04 07 2004

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

Type or Print Name of Treasurer Frederick A Ciocca

Signature of Treasurer Electronically Filed by Frederick A Ciocca Date 04 15 2004

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

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Bill Shuster for Congress

Report Covering the Period: From: ^M 0 ^M 1 ^D 0 ^D 1 ^Y 2 ^Y 0 ^Y 0 ^Y 4 To: ^V 0 ^M 4 ^D 0 ^D 7 ^Y 2 ^Y 0 ^Y 0 ^Y 4

| | 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(a))..... | 282106.80 | 681776.63 |
| (b) Total Contribution Refunds (from Line 20(d))..... | .00 | .00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 282106.80 | 681776.63 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17)..... | 395886.48 | 618483.31 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 323.00 | 1088.90 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 395563.48 | 617394.41 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 122762.60 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | .00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 21892.26 | |

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 02/2003)

Page 3

Write or Type Committee Name
Bill Shuster for Congress

Report Covering the Period: From: ^{M M} 0 1 ^{D J} 0 1 ^Y 2 0 0 4 To: ^{V V} 0 4 ^{U J} 0 7 ^Y 2 0 0 4

| 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)..... | 163821.80 | |
| (ii) Unitemized..... | 7885.00 | |
| (iii) TOTAL of contributions | 171706.80 | 303831.80 |
| from individuals..... ▶ | | |
| (b) Political Party Committees..... | .00 | 411.50 |
| (c) Other Political Committees (such as PACS)..... | 110400.00 | 377533.33 |
| (d) The Candidate..... | .00 | .00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)) | 282106.80 | 681776.63 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES..... | .00 | .00 |
| 13. LOANS | | |
| (a) Made or Guaranteed by the Candidate..... | .00 | .00 |
| (b) All Other Loans..... | .00 | .00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | .00 | .00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)..... | 323.00 | 1088.90 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... | .00 | 3500.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 282429.80 | 686365.53 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

| | | |
|----------------------------------------------------------------------------------|-----------|-----------|
| 17. OPERATING EXPENDITURES..... | 395886.48 | 618483.31 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES..... | .00 | .00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | .00 | .00 |
| (b) Of all Other Loans..... | .00 | 4496.50 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | .00 | 4496.50 |
| <hr/> | | |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees..... | .00 | .00 |
| (b) Political Party Committees..... | .00 | .00 |
| (c) Other Political Committees (such as PACs)..... | .00 | .00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | .00 | .00 |
| <hr/> | | |
| 21. OTHER DISBURSEMENTS..... | 4755.44 | 35033.43 |
| <hr/> | | |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) [>] | 400641.92 | 659013.24 |

III. CASH SUMMARY

| | |
|---------------------------------------------------------------------------------------|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 240974.72 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)..... | 282429.80 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 523404.52 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 400641.92 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 122762.60 |

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

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

FOR LINE NUMBER: PAGE 6 / 238

(check only one)

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

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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Charles C Casalnova | | Date of Receipt M / D / Y 03 / 18 / 2004 |
| Mailing Address 91 Old Hickory Lane | | Transaction ID: SA11Ai-CN3316 |
| City | State | Zip Code |
| Grove City | PA | 16127 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 300.00 |
| Name of Employer FNB Corporation of Pennsylvania | Occupation Corporate Counsel | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Maurice A Lawruk | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 210 West Plank Road | | Transaction ID: SA11Ai-CN3372 |
| City | State | Zip Code |
| Altoona | PA | 16602 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Lawruk Builders Inc. | Occupation Retired Contractor | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Daniel R Lawruk | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 41 Majestic Circle | | Transaction ID: SA11Ai-CN3401 |
| City | State | Zip Code |
| Holidaysburg | PA | 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Lawruk Builders Inc. | Occupation Executive/Construction | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1600.00 | |

| | |
|------------------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 2300.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: PAGE 6 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Nicholas O Antonazzo | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 343 Diamond Blvd | | Transaction ID: SA11Ai-CN3637 |
| City Johnstown | State PA | Zip Code 15805 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer PA Real Estate Investment Trust | Occupation Real Estate Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Kenneth W Butler | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 11810 Lyrac Court | | Transaction ID: SA11Ai-CN3216 |
| City Oakton | State VA | Zip Code 22124 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Capital Partnerships(VA) Inc. | Occupation Transportation Consultant | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Edmund C Graber | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 10102 Lawyers Road | | Transaction ID: SA11Ai-CN3214 |
| City Vienna | State VA | Zip Code 22181 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Self Employed | Occupation Consultant-Government Affairs | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|-----------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Brian L Mellott | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 100 Mellott Drive Suite 100 | | Transaction ID: SA11Ai-CN3613 |
| City Warfordsburg | State PA | Zip Code 17267 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer H.B. Mellott Estates, Inc | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 3000.00 | |

| | | |
|------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. P. Joseph Lehman, Jr. | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address RR 2 Box 351 Windawapt | | Transaction ID: SA11Ai-CN3160 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer P. Joseph Lehman Inc Engineers | Occupation Manager/Partner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1850.00 | |

| | | |
|------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Bruno DeGol, Jr. | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address RD 5 Box 253-A | | Transaction ID: SA11Ai-CN3179 |
| City Tyrone | State PA | Zip Code 16688 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer DeGol Organization | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1750.00 | |

| | | |
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| SUBTOTAL of Receipts This Page (optional) | ▶ | 3500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 8 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Mark R Smith | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 18512 Bear Creek Terrace | | Transaction ID: SA11Ai-CN3155 |
| City Leesburg | State VA | Zip Code 20176 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer The Da Vinci Group | Occupation Government Affairs Consultant | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Arlen D Barkman | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 128 Lodge Street Box 31 | | Transaction ID: SA11Ai-CN3342 |
| City Woodbury | State PA | Zip Code 16895 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Barkman Oil Co Inc | Occupation Retired | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 400.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Harold L Brake | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 224 Rhondel Drive PO Box 275 | | Transaction ID: SA11Ai-CN3599 |
| City Saint Thomas | State PA | Zip Code 17252 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Charles E Brake Co Inc | Occupation Chairman | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

| | |
|-----------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional) | 2450.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 238
(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Art G. Bruen, Jr. | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address PD Box 277 | | Transaction ID: SA11Ai-CN3802 |
| City | State | Zip Code |
| Saint Thomas | PA | 17252 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer E. C. Barnes, Inc | Occupation Sales | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Catharine M Dica | | Date of Receipt M / D / Y 03 / 05 / 2004 |
| Mailing Address 153D Majestic Drive | | Transaction ID: SA11Ai-CN3197 |
| City | State | Zip Code |
| Chambersburg | PA | 17201 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Dica Properties | Occupation Real Estate | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Ronald L Dlahl | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 2932 Adams Drive | | Transaction ID: SA11Ai-CN3809 |
| City | State | Zip Code |
| Chambersburg | PA | 17201 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Valley Quames | Occupation Vice President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2200.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 238

(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Harry N Fix | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 2356 Majestic Court | | Transaction ID: SA11Ai-CN3604 |
| City Chambersburg | State PA | Zip Code 17201 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Valley Quaries | Occupation Sales | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Harold C Gabler, Jr. | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 691 Montgomery Avenue | | Transaction ID: SA11Ai-CN3590 |
| City Chambersburg | State PA | Zip Code 17201 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer H C Gabler Inc | Occupation COB | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. William T Hensley, III | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address PO Box 185 | | Transaction ID: SA11Ai-CN3808 |
| City Fayetteville | State PA | Zip Code 17222 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Nassau & Hensley | Occupation Civil Engineer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Michael K. Hennessy | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 886 Bowman Road | | Transaction ID: SA11Ai-CN3595 |
| City Chambersburg | State PA | Zip Code 17201 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer M. K. Hennessy and Assoc | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Allen E. Jennings, Jr. | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 87 Obsidian Drive | | Transaction ID: SA11Ai-CN3600 |
| City Chambersburg | State PA | Zip Code 17201 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Jennings Chevrolet Olds Inc | Occupation New Car Dealer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. William K. Nitterhouse | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 1130 Cider Press Road | | Transaction ID: SA11Ai-CN3598 |
| City Chambersburg | State PA | Zip Code 17201 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Nitterhouse Concrete Products | Occupation President/CEO | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 3500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 238
(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Craig J Nitterhouse | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 1785 Falling Spring Road | | Transaction ID: SA11Ai-CN3597 |
| City Chambersburg | State PA | Zip Code 17201 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Soltenberger Silos Corporation | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Dominick J Perini | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 14500 Byers Road | | Transaction ID: SA11Ai-CN3611 |
| City Hagerstown | State MD | Zip Code 21742 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Perini Construction | Occupation Contractor | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. David G Selamanna | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 575 Montgomery Avenue | | Transaction ID: SA11Ai-CN3808 |
| City Chambersburg | State PA | Zip Code 17201 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Chamber of Commerce | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 3250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Ann M Benzel | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address PD Box B6 | | Transaction ID: SA11Ai-CN3162 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Benzels Bretzel Bakery | Occupation Vice President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 750.00 | |

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|------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. William J Rossman | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 201 Bristol Lane | | Transaction ID: SA11Ai-CN3170 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer M&T Bank | Occupation Retired Banker/Consultant | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1750.00 | |

| | | |
|------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Shannon M Morris | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address PD Box 1202 | | Transaction ID: SA11Ai-CN3185 |
| City Altoona | State PA | Zip Code 16603 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer none | Occupation Homemaker | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Michael Clark | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 1201 Pennsylvania Avenue NW Suite 300 | | Transaction ID: SA11Ai-CN3211 |
| City Washington | State DC | Zip Code 20004 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Mark Corp Inc | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Janet R Gleason | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 255 Silver Birch Lane | | Transaction ID: SA11Ai-CN3567 |
| City Johnstown | State PA | Zip Code 15905 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2000.00 |
| Name of Employer none | Occupation Housewife | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Christopher K Gleason | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address PO Box B Promistar Plaza Suite 204 | | Transaction ID: SA11Ai-CN3582 |
| City Johnstown | State PA | Zip Code 15901 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2000.00 |
| Name of Employer The Gleason Group | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 3000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 4500.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Robert A Gleason, Jr. | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 522 Elknud Lane | | Transaction ID: SA11Ai-CN3585 |
| City Johnstown | State PA | Zip Code 15805 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer The Gleason Group | Occupation Insurance Broker | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1750.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Dr. John P Joyce | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 1101 Logan Blvd | | Transaction ID: SA11Ai-CN3364 |
| City Altoona | State PA | Zip Code 16802 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Self Employed | Occupation Dermatologist | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Robert S Donaldson | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 524 Penn Street | | Transaction ID: SA11Ai-CN3360 |
| City Hollidaysburg | State PA | Zip Code 16848 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Hippo and Donaldson Law Office | Occupation Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 238
 (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

| | | |
|------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. William J Kirsch | | Date of Receipt M / D / Y 03 / 16 / 2004 |
| Mailing Address 591 Cove Lane | | Transaction ID: SA11Ai-CN3288 |
| City Roaring Spring | State PA | Zip Code 16673 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer William J. Kirsch MD PC | Occupation Physician | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 400.00 | |

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|------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. William J Haberstroh | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 9-A Overlook Drive | | Transaction ID: SA11Ai-CN3369 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Self Employed | Occupation Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Karan E Pfeffer | | Date of Receipt M / D / Y 03 / 16 / 2004 |
| Mailing Address 180 Stonehedge Road | | Transaction ID: SA11Ai-CN3289 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Self Employed | Occupation Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 350.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 650.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 17 / 238
(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Henry H Evey | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 903 Garber Street | | Transaction ID: SA11Ai-CN3389 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Exit Realty John Hill | Occupation Realtor | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. William T Ward | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 81 Sylvan Heights Drive | | Transaction ID: SA11Ai-CN3387 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Ward Trucking Corp | Occupation Vice President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Ella J Griffin | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address HCR 1 Box 54 | | Transaction ID: SA11Ai-CN3383 |
| City Broad Top | State PA | Zip Code 16621 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer none | Occupation Retired/Consultant | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 650.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: PAGE 18 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Karen L Lynn | | Date of Receipt M / D / Y 03 / 16 / 2004 |
| Mailing Address 328 Deer Run Road | | Transaction ID: SA11Ai-CN3285 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Dream Restaurant/R. L. Lynn Co | Occupation Owner/President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Donald L Metzler | | Date of Receipt M / D / Y 03 / 16 / 2004 |
| Mailing Address RR 1 Box 144 | | Transaction ID: SA11Ai-CN3278 |
| City Martinsburg | State PA | Zip Code 16662 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Metzler Auto Truck & Trailer | Occupation Auto Dealer/Owner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | |

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|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Mr. Dick M Riee | | Date of Receipt M / D / Y 03 / 16 / 2004 |
| Mailing Address 689 Lafayette Road | | Transaction ID: SA11Ai-CN3270 |
| City New Enterprise | State PA | Zip Code 16664 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Bedford County | Occupation Dairy Farmer and County Commissioner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

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|------------------------------------------------------------------|---------------|
| SUBTOTAL of Receipts This Page (optional) | 650.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 238
 (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

| | | |
|------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Thomas R Schneider | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address RR 2 Box 1B0E | | Transaction ID: SA11Ai-CN3983 |
| City Martinsburg | State PA | Zip Code 16662 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Schneider & Speck Rentals | Occupation Small Business Owner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

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|------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Jeffrey F Safchok | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 177 Sylvan Oaks Drive | | Transaction ID: SA11Ai-CN3987 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer JJan Financial Group | Occupation Financial Consultant/Broker | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | |

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|------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. John J Wolf | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 211 30th Avenue | | Transaction ID: SA11Ai-CN3188 |
| City Altoona | State PA | Zip Code 16601 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Wolf Furniture Enterprises Inc | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1100.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 1400.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. R Lee Hite | | Date of Receipt M / D / Y 03 / 02 / 2004 |
| Mailing Address 501 Beaumont Drive | | Transaction ID: SA11Ai-CN3192 |
| City Altoona | State PA | Zip Code 16602 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer The Hite Company | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1750.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. R Lee Hite | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 501 Beaumont Drive | | Transaction ID: SA11Ai-CN3348 |
| City Altoona | State PA | Zip Code 16602 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer The Hite Company | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1850.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. John A Roberts, Jr. | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address RR 2 Box 107-B | | Transaction ID: SA11Ai-CN3181 |
| City Hollidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Allegheny Orthotics/Prosthetics | Occupation Owner/Prosthetist | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2700.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 21 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Jeanne M Bolger | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 109 E Allegheny Street | | Transaction ID: SA11Ai-CN3982 |
| City Martinsburg | State PA | Zip Code 16662 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Blair County | Occupation Jury Commissioner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 700.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Todd N Roadman | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 121 Diehl Field Road | | Transaction ID: SA11Ai-CN3169 |
| City Bedford | State PA | Zip Code 15522 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Read Wertz and Roadman | Occupation Executive-Insurance | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1750.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Ricky Barefoot | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 184 Crosswinds Road | | Transaction ID: SA11Ai-CN3392 |
| City Alum Bank | State PA | Zip Code 15521 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer H Fred Barefoot Trucking | Occupation Self Employed | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | |
|------------------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1700.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. John R Bitner | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 470 Forbes Road | | Transaction ID: SA11Ai-CN3400 |
| City Bedford | State PA | Zip Code 15522 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Snyder's Gateway Inc | Occupation Manager | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. James F Bitner | | Date of Receipt M / D / Y 04 / 08 / 2004 |
| Mailing Address 5042 Riverview Road | | Transaction ID: SA11Ai-CN3568 |
| City Everett | State PA | Zip Code 15527 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Snyder's Gateway | Occupation Manager | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Mark W Thomas | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 208 Hibbs Drive | | Transaction ID: SA11Ai-CN3182 |
| City Bedford | State PA | Zip Code 15522 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Thomas Leasing Inc | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 2250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Richard E Hall | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 1211 24th Avenue | | Transaction ID: SA11Ai-CN3978 |
| City Altoona | State PA | Zip Code 16801 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Morgan Signs | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Michael R Condin | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 281D Union Avenue | | Transaction ID: SA11Ai-CN3984 |
| City Altoona | State PA | Zip Code 16802 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Condin Oldsmobile Cadillac Subaru | Occupation New Car Dealer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Michael W McLanahan | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 1111 Pine Street | | Transaction ID: SA11Ai-CN3203 |
| City Hollidaysburg | State PA | Zip Code 16848 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer McLanahan Corporation | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|------------------------------------------------------------------|---------------|
| SUBTOTAL of Receipts This Page (optional) | 700.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Donald Devaris | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 304 E Ward Avenue | | Transaction ID: SA11Ai-CN3176 |
| City Altoona | State PA | Zip Code 16602 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer The Blair Companies | Occupation Chairman/CEO | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Robert B Zeigler | | Date of Receipt M / D / Y 01 / 10 / 2004 |
| Mailing Address Rt 220 | | Transaction ID: SA11Ai-CN3137 |
| City Claysburg | State PA | Zip Code 16625 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer Zeigler Chevrolet | Occupation Car Dealer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 800.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Robert B Zeigler | | Date of Receipt M / D / Y 03 / 16 / 2004 |
| Mailing Address Rt 220 | | Transaction ID: SA11Ai-CN3287 |
| City Claysburg | State PA | Zip Code 16625 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Zeigler Chevrolet | Occupation Car Dealer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 850.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1350.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 238
(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

| | | | |
|-------------------------------------------------------------------|-------------------|----------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Harry K Sicker, Jr. | | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address PD Box 12 | | | Transaction ID: SA11Ai-CN3970 |
| City Tyrone | State PA | Zip Code 16686 | Amount of Each Receipt this Period 200.00 |
| FEC ID number of contributing federal political committee. C | | | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Name of Employer Harry K Sicker Assoc | Occupation CPA | Election Cycle-to-Date 700.00 | |
| Receipt For: 2004 X Primary General Other (specify) ▼ | | | |

| | | | |
|-----------------------------------------------------------------|-----------------------|----------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. John E Groninger | | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address PD Box 38 | | | Transaction ID: SA11Ai-CN3971 |
| City Mexico | State PA | Zip Code 17066 | Amount of Each Receipt this Period 200.00 |
| FEC ID number of contributing federal political committee. C | | | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Name of Employer none | Occupation Retired | Election Cycle-to-Date 200.00 | |
| Receipt For: 2004 X Primary General Other (specify) ▼ | | | |

| | | | |
|-----------------------------------------------------------------|-----------------------|----------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Myron Witt | | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 175 N Breezewood Road | | | Transaction ID: SA11Ai-CN3383 |
| City Breezewood | State PA | Zip Code 15533 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Name of Employer Farmer | Occupation Retired | Election Cycle-to-Date 250.00 | |
| Receipt For: 2004 X Primary General Other (specify) ▼ | | | |

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|-----------------------------------------------------------|---|---------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 650.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 26 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Patricia L. Raugh | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 715 Lexington Ave PO Box 1802 | | Transaction ID: SA11Ai-CN3976 |
| City Altoona | State PA | Zip Code 16601 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer State Farm Insurance | Occupation Insurance Agent | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 450.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Dr. J Donald Hensler | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 72 Sylvan Heights Drive | | Transaction ID: SA11Ai-CN3968 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Oral and Maxillofacial Surgery | Occupation Oral Surgeon | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Ralph J Albarano, Jr. | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address PO Box 806 | | Transaction ID: SA11Ai-CN3172 |
| City Duncansville | State PA | Zip Code 16835 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer R. J. Albarano & Sons, Inc. | Occupation Builder/Developer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1450.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Edward T Giller | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 4 Hickory Hill | | Transaction ID: SA11Ai-CN3208 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Gilecom Assoc | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. David DeGol | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 144 Stonehedge Road | | Transaction ID: SA11Ai-CN3207 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer DeGol Organization | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Harry Kaufman | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address 3509 Baker Blvd | | Transaction ID: SA11Ai-CN3511 |
| City Altoona | State PA | Zip Code 16602 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Kaufman and Sons | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2750.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Jonathan Wolf | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 197 Stonehedge Road | | Transaction ID: SA11Ai-CN3995 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Pyramid Health Care | Occupation CEO | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Joseph G Keller | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 120 Queen Anne Drive | | Transaction ID: SA11Ai-CN3164 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Keller Engineering Inc | Occupation Civil Engineer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Joseph G Keller | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 120 Queen Anne Drive | | Transaction ID: SA11Ai-CN3828 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer Keller Engineering Inc | Occupation Civil Engineer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1600.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1350.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Joyce L Dalton | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 1001 Logan Blvd | | Transaction ID: SA11Ai-CN3353 |
| City Altoona | State PA | Zip Code 16602 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer RE/MAX Results Realty | Occupation Realtor | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Bruce R Erb | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 109 Allegheny Court | | Transaction ID: SA11Ai-CN3382 |
| City Hollidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Omega Bank N.A. | Occupation Senior VP and Senior Trust Manager | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Joel C Meadows | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 207 Cedar Street | | Transaction ID: SA11Ai-CN3390 |
| City Hollidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer J V Meadows and Sons | Occupation Partner-Real Estate | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | |

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|-----------------------------------------------------------|---|---------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 650.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 30 / 238

(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Patricia B Dewiler | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 186 Arandale Street | | Transaction ID: SA11Ai-CN3158 |
| City Bedford | State PA | Zip Code 15522 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation Housewife | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Patricia B Dewiler | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 186 Arandale Street | | Transaction ID: SA11Ai-CN3649 |
| City Bedford | State PA | Zip Code 15522 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation Housewife | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Paul I Dewiler, III | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 5029 Pennknoll Heights | | Transaction ID: SA11Ai-CN3173 |
| City Everett | State PA | Zip Code 15537 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer New Enterprise Stone and Lime | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 2750.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Frederick Ciocca | | Date of Receipt M / D / Y 03 / 30 / 2004 |
| Mailing Address 187D Erin Drive | | Transaction ID: SA11Ai-CN3482 |
| City Altoona | State PA | Zip Code 16802 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Ciocca Benton and Company, PC | Occupation CPA Accountant | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. William R Collins, III | | Date of Receipt M / D / Y 03 / 18 / 2004 |
| Mailing Address 317 Cedar Street | | Transaction ID: SA11Ai-CN3282 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Courtesy Motor Sales | Occupation Manager | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Mark W Kelly | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address RD 8 Box 327 | | Transaction ID: SA11Ai-CN3185 |
| City Altoona | State PA | Zip Code 16801 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer NPC, Inc | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 1700.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Mark W Kelly | | Date of Receipt M / D / Y 03 / 16 / 2004 |
| Mailing Address RD 6 Box 327 | | Transaction ID: SA11Ai-CN3272 |
| City Altoona | State PA | Zip Code 16801 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer NPC, Inc | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1700.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Christian C Kunzler, Jr. | | Date of Receipt M / D / Y 03 / 22 / 2004 |
| Mailing Address 399 Winding Way | | Transaction ID: SA11Ai-CN3329 |
| City Lancaster | State PA | Zip Code 17602 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Kunzler & Co Inc | Occupation Meat Packer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Donald L Dewler | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 233 Stonehedge Road | | Transaction ID: SA11Ai-CN3175 |
| City Hollidaysburg | State PA | Zip Code 16848 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer New Enterprise Stone and Lime | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 1700.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 238
 (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. William J Higgins, Esq. | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 516 Lafayette Avenue | | Transaction ID: SA11Ai-CN3991 |
| City Bedford | State PA | Zip Code 15522 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Bedford County | Occupation District Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Nancy J Pyle | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 840 S Juliana Street | | Transaction ID: SA11Ai-CN3168 |
| City Bedford | State PA | Zip Code 15522 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Bedford Hospital | Occupation Nurse Practitioner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Nancy J Pyle | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 840 S Juliana Street | | Transaction ID: SA11Ai-CN3398 |
| City Bedford | State PA | Zip Code 15522 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer Bedford Hospital | Occupation Nurse Practitioner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1350.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 1550.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 34 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Michael J Setimio | | Date of Receipt M / D / Y 03 / 16 / 2004 |
| Mailing Address 1515 Fordham Circle | | Transaction ID: SA11Ai-CN3264 |
| City Altoona | State PA | Zip Code 16802 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer M&T Bank | Occupation Banker | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Stephen G Sheelz | | Date of Receipt M / D / Y 03 / 28 / 2004 |
| Mailing Address 5700 Sixth Avenue | | Transaction ID: SA11Ai-CN3440 |
| City Altoona | State PA | Zip Code 16802 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2000.00 |
| Name of Employer Sheelz Inc | Occupation Chairman | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

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|------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Diane S Osgood | | Date of Receipt M / D / Y 04 / 02 / 2004 |
| Mailing Address RD 4 Box 153 | | Transaction ID: SA11Ai-CN3501 |
| City Hollidaysburg | State PA | Zip Code 16848 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer L.R. Webber Associates | Occupation Administrative Assistant | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 3200.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: PAGE 35 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Bruce E Toll | | Date of Receipt M / D / Y 03 / 22 / 2004 |
| Mailing Address 1477 Rydal Road | | Transaction ID: SA11Ai-CN3927 |
| City Jenkintown | State PA | Zip Code 19046 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Toll Brothers Inc | Occupation Builder/Developer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Ray S Koontz | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 182 Buchanan Trail - Suite 195 | | Transaction ID: SA11Ai-CN3610 |
| City Mc Connellsburg | State PA | Zip Code 17233 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Pann's Village Shopping Center | Occupation Partner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 450.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Wayne M Peeth | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 35 High Ridge Trail | | Transaction ID: SA11Ai-CN3598 |
| City Mechanicsburg | State PA | Zip Code 17050 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Keefe Wood Allen & Rahal LLP | Occupation Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 2250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 238
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Thomas P Bragan | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 80 Hawthorne Drive | | Transaction ID: SA11Ai-CN3404 |
| City | State | Zip Code |
| Hershey | PA | 17033 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Klett Rooney Lieber & Schorling | Occupation Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Paul E McNamee | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 525 Gatehouse Lane West | | Transaction ID: SA11Ai-CN3591 |
| City | State | Zip Code |
| York | PA | 17402 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Buchart & Horn | Occupation Consulting Engineer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. J Scott Masale | | Date of Receipt M / D / Y 03 / 24 / 2004 |
| Mailing Address 213 South 24th Street | | Transaction ID: SA11Ai-CN3423 |
| City | State | Zip Code |
| Camp Hill | PA | 17011 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Wenken & Associates | Occupation Financial Services/Investments | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|------------------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 238

(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Kevin S Baker | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 489 Morrison Drive | | Transaction ID: SA11Ai-CN3589 |
| City Pittsburgh | State PA | Zip Code 15216 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer | Occupation | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Annetta C Peterson | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 103 Stonehedge Road | | Transaction ID: SA11Ai-CN3161 |
| City Hollidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer none | Occupation Housewife | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. C Wayne Hippo, Jr. | | Date of Receipt M / D / Y 03 / 31 / 2004 |
| Mailing Address 4022 Ridge Avenue | | Transaction ID: SA11Ai-CN3481 |
| City Altoona | State PA | Zip Code 16801 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Hippo & Donaldson Law Offices | Occupation Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|------------------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 2000.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: PAGE 38 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. David OLaughlin | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 9 Dunmoyle Place | | Transaction ID: SA11Ai-CN3571 |
| City Pittsburgh | State PA | Zip Code 15217 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Self Employed | Occupation Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Morley A Cohn | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 4305 Second Avenue | | Transaction ID: SA11Ai-CN3402 |
| City Altoona | State PA | Zip Code 16602 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Kopp Drug | Occupation Pharmacist | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Thomas R. Kepple, Jr. | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 2201 Washington Street | | Transaction ID: SA11Ai-CN3338 |
| City Huntingdon | State PA | Zip Code 16652 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer Juniata College | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 600.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 800.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 238
(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Barry F Smith | | Date of Receipt M / D / Y 03 / 02 / 2004 |
| Mailing Address 181 Closson Road | | Transaction ID: SA11Ai-CN3233 |
| City Roaring Spring | State PA | Zip Code 16673 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Smith Transport | Occupation President/Owner | Redesignated \$250.00 |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2250.00 | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Frederick S McMillen | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 4900 Cherry Street | | Transaction ID: SA11Ai-CN3574 |
| City Allison Park | State PA | Zip Code 15101 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Safe Foundations Inc | Occupation Accountant | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Gary L Reinert Sr. | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 2200 Spring Garden Avenue 2nd Floor | | Transaction ID: SA11Ai-CN3581 |
| City Pittsburgh | State PA | Zip Code 15212 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Self employed | Occupation Businessman | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

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|-----------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 2750.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: PAGE 40 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Mark E Miller | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 287 West Union Street | | Transaction ID: SA11Ai-CN3626 |
| City Somerset | State PA | Zip Code 15501 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 125.00 |
| Name of Employer Somerset Hospital | Occupation Director Support Services | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 225.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Bonnie Barron | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address 210 Windsor Street | | Transaction ID: SA11Ai-CN3539 |
| City Somerset | State PA | Zip Code 15501 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer | Occupation | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Jerry L Spangler | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address PO Box 702 | | Transaction ID: SA11Ai-CN3523 |
| City Somerset | State PA | Zip Code 15501 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| Name of Employer City of Somerset | Occupation District Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | |

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|-----------------------------------------------------------|---|---------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 275.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 238

(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. John R Baderocco | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 201 Furnari Avenue | | Transaction ID: SA11Ai-CN3640 |
| City Johnstown | State PA | Zip Code 15905 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer H F Lenz Company | Occupation President/Engineer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Dr. Andrew W Gurman | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 515 26th Street | | Transaction ID: SA11Ai-CN3654 |
| City Altoona | State PA | Zip Code 16802 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Blair Orthopedic Associates | Occupation Surgeon | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Steven C Aelmann | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 857 Viewmont Avenue | | Transaction ID: SA11Ai-CN3820 |
| City Johnstown | State PA | Zip Code 15905 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Self | Occupation Banker | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Robert D Johnson | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 2408 11th Street | | Transaction ID: SA11Ai-CN3351 |
| City Altoona | State PA | Zip Code 16801 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Moses Johnson & Associates, PC | Occupation CPA | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. William A Gindlesperger | | Date of Receipt M / D / Y 04 / 08 / 2004 |
| Mailing Address PO Box W | | Transaction ID: SA11Ai-CN3589 |
| City Chambersburg | State PA | Zip Code 17201 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer e-Lynx Corporation | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Hampton H Durbin | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 810 East Wopsy Avenue | | Transaction ID: SA11Ai-CN3373 |
| City Altoona | State PA | Zip Code 16801 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Durbin and Associates | Occupation Contractor | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 750.00 | |

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|-----------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1450.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Gretchen W Rapp | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 837 Olde Ventura Farm Road | | Transaction ID: SA11Ai-CN3322 |
| City Hummelstown | State PA | Zip Code 17036 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer none | Occupation Housewife | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. M David Halpern | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 415 Parkview Lane Apt 106 | | Transaction ID: SA11Ai-CN3183 |
| City Altoona | State PA | Zip Code 16801 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Self Employed | Occupation Attorney/Consultant | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1750.00 | |

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|------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Leroy S Zimmaman | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address PO Box 789 | | Transaction ID: SA11Ai-CN3229 |
| City Harrisburg | State PA | Zip Code 17108 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Select Medical Corporation | Occupation Executive Vice President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1750.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. J Martin Benchoff | | Date of Receipt M / D / Y 03 / 17 / 2004 |
| Mailing Address 12514 Old Route 16 Long Meadow Acres | | Transaction ID: SA11Ai-CN3298 |
| City Waynesboro | State PA | Zip Code 17268 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Grove Mfg Co. | Occupation Retired CEO | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Mr. Harry K Benjamin | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 3412 Crescent Road | | Transaction ID: SA11Ai-CN3163 |
| City Altoona | State PA | Zip Code 16802 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Edgemate Inc | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Robert S Walker | | Date of Receipt M / D / Y 03 / 05 / 2004 |
| Mailing Address 6065 Parkridge Drive | | Transaction ID: SA11Ai-CN3194 |
| City East Petersburg | State PA | Zip Code 17520 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Wexler & Walker PPA | Occupation Business/Lobbyist | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 2500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 238
 (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

| | | |
|---------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. John T Durbin | | Date of Receipt M / D / Y 03 / 11 / 2004 |
| Mailing Address 12 Emlyn Lane | | Transaction ID: SA11Ai-CN3244 |
| City Mechanicsburg | State PA | Zip Code 17055 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer PA Turnpike Commission | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|---------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. James W Harris | | Date of Receipt M / D / Y 03 / 08 / 2004 |
| Mailing Address 8113 Charing Cross | | Transaction ID: SA11Ai-CN3202 |
| City Mechanicsburg | State PA | Zip Code 17055 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Acclaim Systems Inc | Occupation Manager | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Lewis Eckert Robb And Co | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address Suite 425 One Plymouth Meeting | | Transaction ID: SA11Ai-CN3557 |
| City Plymouth Meeting | State PA | Zip Code 19462 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | Robert Robb contributed |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 238
 (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

| | | | |
|------------------------------------------------------------------------------------------------------------------------|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Robert C Robb, Jr | | Date of Receipt M / D / Y 04 / 05 / 2004 | |
| Mailing Address One Plymouth Meeting Suite 425 | | Transaction ID: SA11Ai-CN3558 | |
| City Plymouth Meeting | State PA | Zip Code 19462 | Amount of Each Receipt this Period .00 |
| FEC ID number of contributing federal political committee. C | | Partnership-Lewis Eckert Robb And Co Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) [MEMO ITEM] | |
| Name of Employer Lewis, Eckert, Robb & Co | Occupation President/Partner | Election Cycle-to-Date ▼ .00 | |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | | | |

| | | | |
|------------------------------------------------------------------------------------------------------------------------|--------------------------|-----------------------------------------------------------------------|--------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Jack Schenendorf | | Date of Receipt M / D / Y 03 / 10 / 2004 | |
| Mailing Address 4707 Morgan Drive | | Transaction ID: SA11Ai-CN3215 | |
| City Chevy Chase | State MD | Zip Code 20815 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) | |
| Name of Employer Covington & Burling | Occupation Consultant | Election Cycle-to-Date ▼ 750.00 | |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | | | |

| | | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|--------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Dr. Richard Crawford | | Date of Receipt M / D / Y 03 / 23 / 2004 | |
| Mailing Address 219 Bonnie Lane | | Transaction ID: SA11Ai-CN3348 | |
| City Hollidaysburg | State PA | Zip Code 16848 | Amount of Each Receipt this Period 200.00 |
| FEC ID number of contributing federal political committee. C | | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) | |
| Name of Employer St Francis College | Occupation College Administrator | Election Cycle-to-Date ▼ 800.00 | |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | | | |

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|--------------------------------------------------------------------|---------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 450.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

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

FOR LINE NUMBER: PAGE 47 / 238

(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. John R Kimbal | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 201 N. Julian Street | | Transaction ID: SA11Ai-CN3566 |
| City Ebensburg | State PA | Zip Code 15831 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer L Robert Kimbal & Associates | Occupation Engineer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Kim Kunkle | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 2221 Crabtree Lane | | Transaction ID: SA11Ai-CN3643 |
| City Johnstown | State PA | Zip Code 15805 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Laurel Holdings | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. William P Jamel | | Date of Receipt M / D / Y 03 / 30 / 2004 |
| Mailing Address 1783 Proffit Road | | Transaction ID: SA11Ai-CN3474 |
| City Vienna | State VA | Zip Code 22182 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Washington Strategies LLC | Occupation Associate | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 1750.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. H Duane Kinzer | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 463 East Baltimore Street | | Transaction ID: SA11Ai-CN3601 |
| City Greencastle | State PA | Zip Code 17225 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Century Inc | Occupation Financial Officer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

| | | |
|------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. J Joseph Zimmerman | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 2257 Castlegreen Drive | | Transaction ID: SA11Ai-CN3605 |
| City Greencastle | State PA | Zip Code 17225 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Valley Quarries | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Kim D Van Buren | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 155 Stratford Court | | Transaction ID: SA11Ai-CN3171 |
| City Hollidaysburg | State PA | Zip Code 16848 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2000.00 |
| Name of Employer none | Occupation Housewife | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 4250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. L Michael Ross | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 330 Overhill Drive | | Transaction ID: SA11Ai-CN3603 |
| City Chambersburg | State PA | Zip Code 17201 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Franklin Co Area Dev Corp | Occupation Economic developer/President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Phyllis Traler | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address RR 4 Box 132-A | | Transaction ID: SA11Ai-CN3178 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Gilcom Associates | Occupation Media Consultant | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. V Thomas Worrall, IV | | Date of Receipt M / D / Y 03 / 12 / 2004 |
| Mailing Address 611B Woodmont Road | | Transaction ID: SA11Ai-CN3237 |
| City Alexandria | State VA | Zip Code 22307 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Rhoads-McGuire Group | Occupation Government Affairs | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|-----------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional) | 2500.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. W Timothy Locke | | Date of Receipt M / D / Y 03 / 15 / 2004 |
| Mailing Address 2111 Woodmont Road | | Transaction ID: SA11Ai-CN3250 |
| City Alexandria | State VA | Zip Code 22307 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 300.00 |
| Name of Employer The Smith-Free Group | Occupation Senior Vice President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. James E Hyland | | Date of Receipt M / D / Y 03 / 31 / 2004 |
| Mailing Address 270D Court House Oaks Road | | Transaction ID: SA11Ai-CN3484 |
| City Vienna | State VA | Zip Code 22181 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Piper Rudnick | Occupation Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Inler Poutfy | | Date of Receipt M / D / Y 03 / 11 / 2004 |
| Mailing Address 3421 Beale Avenue | | Transaction ID: SA11Ai-CN3231 |
| City Altoona | State PA | Zip Code 16801 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1200.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 1550.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 238
(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Fred N Imler, II | | Date of Receipt M / D / Y 03 / 11 / 2004 |
| Mailing Address 3421 Beale Avenue | | Transaction ID: SA11Ai-CN3232 |
| City Altoona | State PA | Zip Code 16801 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period .00 |
| Name of Employer Imlers Poultry LLP | Occupation Executive | Partnership contribution- Imler Poultry Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) [MEMO ITEM] |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ .00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Larry R Fischer | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 320 Lane Metal Road | | Transaction ID: SA11Ai-CN3380 |
| City New Paris | State PA | Zip Code 15554 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer C.R.A.J.M.A. | Occupation Municipal Authority Admin | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 850.00 | |

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|------------------------------------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Roger L Beckner | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 6755 Town Drive | | Transaction ID: SA11Ai-CN3158 |
| City Saint Thomas | State PA | Zip Code 17252 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Beckner's Wilayne Avenue Su- noco | Occupation Owner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

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|------------------------------------------------------------------|---------------|
| SUBTOTAL of Receipts This Page (optional) | 450.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Marie Beck | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 809 E Main Street | | Transaction ID: SA11Ai-CN3588 |
| City Waynesboro | State PA | Zip Code 17268 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Summit Health | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Rosalind Sky | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address RD 2 Box 816 | | Transaction ID: SA11Ai-CN3566 |
| City Altoona | State PA | Zip Code 16601 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer none | Occupation Housewife | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. P. Jules Pelt | | Date of Receipt M / D / Y 04 / 02 / 2004 |
| Mailing Address 422 Allegheny Street | | Transaction ID: SA11Ai-CN3499 |
| City Hollidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Self | Occupation Real Estate Developer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 238
 (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

| | | |
|---------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Roger P Winn | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 736 Hench Street | | Transaction ID: SA11Ai-CN3358 |
| City Bedford | State PA | Zip Code 15522 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer UPMC-Bedford | Occupation CEO | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 600.00 | |

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|---------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Eliot Bielefsky, D.O. | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address RR 1 Box 626-B | | Transaction ID: SA11Ai-CN3375 |
| City Hollidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer UPMC-Bedford | Occupation Physician | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|---------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Brian L Eberhart | | Date of Receipt M / D / Y 03 / 17 / 2004 |
| Mailing Address RD 1 Box 96 | | Transaction ID: SA11Ai-CN3308 |
| City Mifflinburg | State PA | Zip Code 17844 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Callahan Paving | Occupation VP of Engineering | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 350.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. James W Meck | | Date of Receipt M / D / Y 03 / 17 / 2004 |
| Mailing Address 455 E Derry Road | | Transaction ID: SA11Ai-CN3906 |
| City Hershey | State PA | Zip Code 17033 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer American Concrete Paving Assoc | Occupation NE Field Representative | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Jennifer J Cabert | | Date of Receipt M / D / Y 03 / 30 / 2004 |
| Mailing Address 124 11th Street SE | | Transaction ID: SA11Ai-CN3468 |
| City Washington | State DC | Zip Code 20003 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2000.00 |
| Name of Employer Washington Strategies, LLC | Occupation Partner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Eileen Jarrell | | Date of Receipt M / D / Y 03 / 30 / 2004 |
| Mailing Address 1783 Proffit Road | | Transaction ID: SA11Ai-CN3473 |
| City Vienna | State VA | Zip Code 22182 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation Housewife | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 3250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Zachery P Moore | | Date of Receipt M / D / Y 03 / 12 / 2004 |
| Mailing Address 330B Military Drive | | Transaction ID: SA11Ai-CN3238 |
| City | State | Zip Code |
| Falls Church | VA | 22044 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Moore Federal Solutions | Occupation Self-Government Affairs | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Dana M Thompson | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 369 Canary Drive | | Transaction ID: SA11Ai-CN3174 |
| City | State | Zip Code |
| Holidaysburg | PA | 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation Housewife | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. L Robert Kimball | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 619 W. Horner Street | | Transaction ID: SA11Ai-CN3168 |
| City | State | Zip Code |
| Ebensburg | PA | 15531 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer L. Robert Kimball & Assoc Inc | Occupation Engineer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1750.00 | |

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|------------------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 2250.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. L Robert Kimball | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 819 W. Horner Street | | Transaction ID: SA11Ai-CN3623 |
| City Ebensburg | State PA | Zip Code 15831 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer L. Robert Kimball & Assoc Inc | Occupation Engineer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 2250.00 | |

| | | |
|------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Cliff Madison | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 254-A Maryland Avenue NE | | Transaction ID: SA11Ai-CN3212 |
| City Washington | State DC | Zip Code 20002 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Government Relations Inc | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------|------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Dr. Donald M Beckstead | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 279 Clubhouse Drive | | Transaction ID: SA11Ai-CN3355 |
| City Hollidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Self Employed | Occupation Doctor | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 1750.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Rebecca Halkias | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 317 C Street NE | | Transaction ID: SA11Ai-CN3210 |
| City | State | Zip Code |
| Washington | DC | 20002 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer The C2 Group | Occupation Lobbyist | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Nancy P Campbell | | Date of Receipt M / D / Y 03 / 30 / 2004 |
| Mailing Address 167 Mountain View Drive | | Transaction ID: SA11Ai-CN3463 |
| City | State | Zip Code |
| Holidaysburg | PA | 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Hoss's Steak & Sea Houses | Occupation Owner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Shawn McCarl | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 29 Sylvan Oakes Drive | | Transaction ID: SA11Ai-CN3377 |
| City | State | Zip Code |
| Holidaysburg | PA | 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer S.P. McCarl & Company Inc | Occupation Mechanical Contractor | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|------------------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1500.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: PAGE 58 / 238

(check only one)

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

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

| | | |
|------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Martin R Brown | | Date of Receipt M / D / Y 03 / 16 / 2004 |
| Mailing Address Ridgely Street - PO Box 220 | | Transaction ID: SA11Ai-CN3284 |
| City Orbisonia | State PA | Zip Code 17243 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Martin R. Brown Funeral Home | Occupation Owner/Funeral Director | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Howard M Black | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 116 Flintstone Drive | | Transaction ID: SA11Ai-CN3374 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Cova Surgical Associates | Occupation Physician | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Rosemarie R McNew | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 995 Black Gap Road | | Transaction ID: SA11Ai-CN3592 |
| City Fayetteville | State PA | Zip Code 17222 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Professional Inspection & Test | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 900.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Richard E Roush | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 835 Mohawk Road | | Transaction ID: SA11Ai-CN3593 |
| City Newville | State PA | Zip Code 17241 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Nassau & Hemsley | Occupation Scientist | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Maurice L Gossert, Jr. | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 135 Loudon Road | | Transaction ID: SA11Ai-CN3607 |
| City Mercersburg | State PA | Zip Code 17236 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Nassau & Hemsley | Occupation Designer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Robert E Lee | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 2385 Old Rt 22 | | Transaction ID: SA11Ai-CN3209 |
| City Duncansville | State PA | Zip Code 16835 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer W.S. Lee & Sons, Inc. | Occupation President/CEO | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2500.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 60 / 238

(check only one)

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

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

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Dennis M Sodinger | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 414 Old Farm Lane | | Transaction ID: SA11Ai-CN3641 |
| City Johnstown | State PA | Zip Code 15804 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer The EADS Group | Occupation Engineer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 850.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. W Robert Bastian | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address 347 Blackburn Road | | Transaction ID: SA11Ai-CN3522 |
| City Eriedens | State PA | Zip Code 15541 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 150.00 |
| Name of Employer Commonwealth of Pennsylvania | Occupation State Representative | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 650.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. LeRoy D Kline, Jr. | | Date of Receipt M / D / Y 03 / 17 / 2004 |
| Mailing Address 1709 Olmsted Way West | | Transaction ID: SA11Ai-CN3311 |
| City Camp Hill | State PA | Zip Code 17011 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Delta Development Group, Inc | Occupation President | General 2004 contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 Primary <input type="checkbox"/> <input checked="" type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 3000.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1650.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 238
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Eileen Barbara Melvin | | Date of Receipt M / D / Y 03 / 17 / 2004 |
| Mailing Address Po Box 775 215 Wind Drift Lane | | Transaction ID: SA11Ai-CN3907 |
| City Somerset | State PA | Zip Code 15501 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Economic Development Concepts Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Occupation Consultant Election Cycle-to-Date ▼ 1250.00 | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

| | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. David J Urban | | Date of Receipt M / D / Y 03 / 12 / 2004 |
| Mailing Address 10100 Meyer Point Terrace | | Transaction ID: SA11Ai-CN3240 |
| City Potomac | State MD | Zip Code 20854 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer American Continental Group LLC Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Occupation Lawyer/Lobbyist Election Cycle-to-Date ▼ 1500.00 | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Julie Chiopecki | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 1547 Evers Drive | | Transaction ID: SA11Ai-CN3213 |
| City Mc Lean | State VA | Zip Code 22101 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Xenophon Strategies Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Occupation Partner Election Cycle-to-Date ▼ 1000.00 | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

| | |
|------------------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1750.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Robert F Zedreck | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 1081 Lakemont Drive | | Transaction ID: SA11Ai-CN3578 |
| City Bridgeville | State PA | Zip Code 15017 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Gleason Insurance | Occupation Producer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Edward W Sroka | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address 292 Golden Ridge Drive | | Transaction ID: SA11Ai-CN3536 |
| City Somerset | State PA | Zip Code 15501 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer W.S. Edwards Bldg Systems Inc | Occupation General Contractor | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Timothy P Holmberg | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 7913 Gosport Lane | | Transaction ID: SA11Ai-CN3381 |
| City Springfield | State VA | Zip Code 22151 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer CDM, Inc. | Occupation COO | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 700.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 1200.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Richard L Karcher | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 124 Stonehedge | | Transaction ID: SA11Ai-CN3547 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer L.S. Fiore | Occupation Architect | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 700.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Kranzman | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address PO Box 508 | | Transaction ID: SA11Ai-CN3513 |
| City Lewistown | State PA | Zip Code 17044 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | Mike and Steve contributed Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Stephen M Krentzman | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address RD 3 (back Maitland Road) | | Transaction ID: SA11Ai-CN3514 |
| City Lewistown | State PA | Zip Code 17044 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Joe Krentzman & Sons Inc | Occupation CEO | Partnership contribution-Krentzman Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) [MEMO ITEM] \$500.00 MEMO Partnership Attributed |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1200.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 64 / 238
(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

| | | |
|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Michael B Krentzman | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address PD Box 508 | | Transaction ID: SA11Ai-CN3515 |
| City Lewistown | State PA | Zip Code 17044 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period .00 |
| Name of Employer Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Occupation Attorney Election Cycle-to-Date ▼ | Partnership contribution-Krentzman Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) [MEMO ITEM] |
| | | .00 |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Louis G Galiker | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 922 Luzerne Street | | Transaction ID: SA11Ai-CN3619 |
| City Johnstown | State PA | Zip Code 15805 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Galiker Dairy Company Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Occupation Businessman Election Cycle-to-Date ▼ | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| | | 1250.00 |

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Charlene M Dodson | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 821 East Main Street | | Transaction ID: SA11Ai-CN3385 |
| City Roaring Spring | State PA | Zip Code 16673 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer NPC, Inc Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Occupation Executive Liason Election Cycle-to-Date ▼ | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| | | 350.00 |

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|------------------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1250.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: PAGE 65 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Barry W Wright | | Date of Receipt M / D / Y 03 / 16 / 2004 |
| Mailing Address 3901 Fourth Avenue | | Transaction ID: SA11Ai-CN3286 |
| City Altoona | State PA | Zip Code 16602 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Blair County | Occupation County Commissioner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Timothy P Sessler | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 306 Robin Drive | | Transaction ID: SA11Ai-CN3388 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Reliance Savings Bank | Occupation Banker | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Danna M Kelly | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 600 Cove Lane | | Transaction ID: SA11Ai-CN3387 |
| City Roaring Spring | State PA | Zip Code 16673 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Retired | Occupation Retired | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 350.00 | |

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|-----------------------------------------------------------|---|---------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 650.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 66 / 238

(check only one)
 11a
 11b
 11c
 11d
 12
 13a
 13b
 14
 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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. William G Harris | | Date of Receipt M / D / Y 02 / 04 / 2004 |
| Mailing Address 502 Cherry Lane | | Transaction ID: SA11Ai-CN3143 |
| City Johnstown | State PA | Zip Code 15804 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Cambria County | Occupation County Commissioner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1100.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Phil Sky | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address RD 2 Box 816 | | Transaction ID: SA11Ai-CN3177 |
| City Altoona | State PA | Zip Code 16801 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Sky Brothers | Occupation Retired | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Michael V Zinoble | | Date of Receipt M / D / Y 01 / 16 / 2004 |
| Mailing Address RD 1 Box 1050 | | Transaction ID: SA11Ai-CN3140 |
| City Mapleton Depot | State PA | Zip Code 17052 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer H. Zinoble & Sons Inc-Sa-umill | Occupation Manager/Sawyer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2750.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 238
(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Margaret K. Kikoin | | Date of Receipt M / D / Y 02 / 10 / 2004 |
| Mailing Address 800 Preston Street-Apt #2 | | Transaction ID: SA11Ai-CN3145 |
| City Bedford | State PA | Zip Code 15522 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none-widow | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Phyllis M Kurtz | | Date of Receipt M / D / Y 02 / 10 / 2004 |
| Mailing Address 303 Laurel Street | | Transaction ID: SA11Ai-CN3148 |
| City Bellwood | State PA | Zip Code 16617 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation Housewife | see contribution for that date Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Barry H Newborn | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address PO Box 1713 | | Transaction ID: SA11Ai-CN3167 |
| City Altoona | State PA | Zip Code 16603 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Newborn Enterprises Inc | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 66 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Amy B Selzer | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 306 East Ward Avenue | | Transaction ID: SA11Ai-CN3180 |
| City Altoona | State PA | Zip Code 16602 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Equity Concepts North | Occupation Financial Advisor | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Mona L Farris | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 110 41st Street | | Transaction ID: SA11Ai-CN3184 |
| City Altoona | State PA | Zip Code 16602 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer Carnegie Equipment | Occupation Owner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Donald DeGol | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 100 Sylvan Woods | | Transaction ID: SA11Ai-CN3204 |
| City Hollidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer DeGol Organization | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 238
 (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

| | | | |
|----------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------------------------------------|----------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Gloria J Burgan | | Date of Receipt M / D / Y 03 / 10 / 2004 | |
| Mailing Address 84 Country Club Road | | Transaction ID: SA11Ai-CN3205 | |
| City Crasson | State PA | Zip Code 16630 | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) | |
| Name of Employer DeGol Organization | Occupation Executive | Election Cycle-to-Date 2004 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | | | |

| | | | |
|----------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------------------------------------|----------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Dannis Degol | | Date of Receipt M / D / Y 03 / 10 / 2004 | |
| Mailing Address 3229 Pleasant Valley Blvd | | Transaction ID: SA11Ai-CN3206 | |
| City Altoona | State PA | Zip Code 16602 | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) | |
| Name of Employer DeGol Organization | Occupation Executive | Election Cycle-to-Date 2004 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | | | |

| | | | |
|----------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------------------------------------------------------|----------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Colin A Chapman | | Date of Receipt M / D / Y 03 / 12 / 2004 | |
| Mailing Address 115 11th Street, SE | | Transaction ID: SA11Ai-CN3238 | |
| City Washington | State DC | Zip Code 20003 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) | |
| Name of Employer The Rhoads Group | Occupation Partner | Election Cycle-to-Date 2004 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | | | |

| | |
|-----------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1250.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Shawn H Smealie | | Date of Receipt M / D / Y 03 / 12 / 2004 |
| Mailing Address 131D Bishop Lane | | Transaction ID: SA11Ai-CN3239 |
| City Alexandria | State VA | Zip Code 22302 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer American Continental Group | Occupation Principal | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Joseph H Gerdas, III | | Date of Receipt M / D / Y 03 / 11 / 2004 |
| Mailing Address PO Box 375 | | Transaction ID: SA11Ai-CN3245 |
| City Lemoyne | State PA | Zip Code 17043 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Durbin Associates | Occupation Government Relations | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. John F Weiland | | Date of Receipt M / D / Y 03 / 16 / 2004 |
| Mailing Address 1144 Sugar Run Road | | Transaction ID: SA11Ai-CN3271 |
| City Duncansville | State PA | Zip Code 16835 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Allegheny Supply & Maintenance | Occupation Vice President-Sales | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1450.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 71 / 238

(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. James D Hughes | | Date of Receipt M / D / Y 03 / 17 / 2004 |
| Mailing Address 211 Shatto Drive | | Transaction ID: SA11Ai-CN3299 |
| City Carlisle | State PA | Zip Code 17013 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Selzmann, Hughes & Fishman, PC | Occupation Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Joan Wheeler | | Date of Receipt M / D / Y 03 / 17 / 2004 |
| Mailing Address 415 N Center Avenue | | Transaction ID: SA11Ai-CN3300 |
| City Somerset | State PA | Zip Code 15501 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer None | Occupation Retired | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Mark G Wilson | | Date of Receipt M / D / Y 03 / 17 / 2004 |
| Mailing Address 642 Observatory Drive | | Transaction ID: SA11Ai-CN3301 |
| City Lewisherry | State PA | Zip Code 17339 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Wilson Consulting Group, PC | Occupation Government Consultant | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | |
|-----------------------------------------------------------|--------|
| SUBTOTAL of Receipts This Page (optional) | 750.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. John F. Horton | | Date of Receipt M / D / Y 03 / 17 / 2004 |
| Mailing Address One Capital Drive Suite 103 | | Transaction ID: SA11Ai-CN3902 |
| City Cranbury | State NJ | Zip Code 08512 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer ProLogis-Global Dist. Sol- ution | Occupation First Vice President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------|------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Robert E. Smith | | Date of Receipt M / D / Y 03 / 17 / 2004 |
| Mailing Address 318B Greentree Drive | | Transaction ID: SA11Ai-CN3903 |
| City Lancaster | State PA | Zip Code 17601 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer WPC Associates, Inc. | Occupation Business Owner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------|------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Douglas A. Potter | | Date of Receipt M / D / Y 03 / 17 / 2004 |
| Mailing Address 1782 Winding Hill Road | | Transaction ID: SA11Ai-CN3904 |
| City Newport | State PA | Zip Code 17074 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer WPC Associates, Inc. | Occupation President/CEO | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. <u>Aji Abraham</u> | | Date of Receipt M / D / Y 03 / 17 / 2004 |
| Mailing Address <u>5825 Tyler Drive</u> | | Transaction ID: SA11Ai-CN3905 |
| City <u>Harrisburg</u> | State <u>PA</u> | Zip Code <u>17112</u> |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer <u>Blue Cross Blue Shield</u> | Occupation <u>Government Affairs</u> | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. <u>Mark N Barnhart</u> | | Date of Receipt M / D / Y 03 / 18 / 2004 |
| Mailing Address <u>822 Walnut Street</u> | | Transaction ID: SA11Ai-CN3321 |
| City <u>Roaring Spring</u> | State <u>PA</u> | Zip Code <u>16673</u> |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2000.00 |
| Name of Employer <u>NPC, Inc.</u> | Occupation <u>CEO</u> | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. <u>John O Vartan</u> | | Date of Receipt M / D / Y 03 / 15 / 2004 |
| Mailing Address <u>3801 Vartan Way</u> | | Transaction ID: SA11Ai-CN3336 |
| City <u>Harrisburg</u> | State <u>PA</u> | Zip Code <u>17110</u> |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 896.80 |
| Name of Employer <u>Vartan Enterprises</u> | Occupation <u>President & CEO</u> | Fundraising event paid Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) In-Kind Received food and beverage for fundraiser |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 896.80 | |

| | |
|-----------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3146.80 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Brian D Dodson | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address PD Box 25 | | Transaction ID: SA11Ai-CN3344 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Blair Gastro Associates | Occupation Physician | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. J Grant Hamell | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address RR 1 Box 296 | | Transaction ID: SA11Ai-CN3345 |
| City Tyrone | State PA | Zip Code 16686 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Keystone Family Medicine | Occupation Family Medicine | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Hugh D Newman, III | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 227 Hickory Terrace Lane | | Transaction ID: SA11Ai-CN3349 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Self | Occupation Physician | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

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|-----------------------------------------------------------|---|---------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 600.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Domenico Fakone | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 2335 Riverbend Road | | Transaction ID: SA11Ai-CN3350 |
| City Allentown | State PA | Zip Code 18103 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Occupation Physician Election Cycle-to-Date ▼ 200.00 | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Terrence E Babb, MD | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address RR 2 Box 36 | | Transaction ID: SA11Ai-CN3352 |
| City Clearfield | State PA | Zip Code 16830 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Self Employed Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Occupation Physician Election Cycle-to-Date ▼ 250.00 | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

| | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Dr Harry L Penny | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 1201 11th Street | | Transaction ID: SA11Ai-CN3357 |
| City Altoona | State PA | Zip Code 16801 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Blair Medical Associates Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Occupation Podiatrist Election Cycle-to-Date ▼ 250.00 | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

| | |
|------------------------------------------------------------------|---------------|
| SUBTOTAL of Receipts This Page (optional) | 700.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: PAGE 76 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Ralph D McKibbin | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 3002 Second Avenue | | Transaction ID: SA11Ai-CN3359 |
| City Altoona | State PA | Zip Code 16802 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Blair Gastroenterology Associates | Occupation Physician | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Stephen A Foreman | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 321B Beverly Drive | | Transaction ID: SA11Ai-CN3386 |
| City Altoona | State PA | Zip Code 16801 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer M&T Bank | Occupation Regional Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|---------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Michael J Schlechter | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 115 Sandstone Drive | | Transaction ID: SA11Ai-CN3394 |
| City Hollidaysburg | State PA | Zip Code 16848 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Blair Medical Associates | Occupation Physician | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|-----------------------------------------------------------|---|---------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 650.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 238
(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

| | | |
|------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. G William Ward | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 585 Devonshire Drive | | Transaction ID: SA11Ai-CN398 |
| City Holidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Ward Trucking Corporation | Occupation Chairman | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Heather S Bittenbender | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 2308 Stumpstown Road | | Transaction ID: SA11Ai-CN3403 |
| City Mechanicsburg | State PA | Zip Code 17055 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Klett Rooney Lieber Schorling | Occupation Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Cynthia S Masala | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 213 South 24th Street | | Transaction ID: SA11Ai-CN3405 |
| City Camp Hill | State PA | Zip Code 17011 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer WFG Capital Advisors | Occupation Consultant | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|-----------------------------------------------------------|--------|
| SUBTOTAL of Receipts This Page (optional) | 750.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Thomas G Paese | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 1933 18th Street NW | | Transaction ID: SA11Ai-CN3408 |
| City Washington | State DC | Zip Code 20009 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Klett Rooney Lieber & Schorling | Occupation Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. John Quain | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 2414 Patton Road | | Transaction ID: SA11Ai-CN3407 |
| City Harrisburg | State PA | Zip Code 17112 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Klett Rooney Lieber & Schorling | Occupation Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Allen C Warsaw | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 1035 McCormick Road | | Transaction ID: SA11Ai-CN3408 |
| City Mechanicsburg | State PA | Zip Code 17055 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Klett Rooney Lieber & Schorling | Occupation Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 238
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Stanton R. Sheetz | | Date of Receipt M / D / Y 03 / 28 / 2004 |
| Mailing Address 5700 Sixth Avenue | | Transaction ID: SA11Ai-CN3439 |
| City Altoona | State PA | Zip Code 16802 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2000.00 |
| Name of Employer Sheetz Corporation | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Obermayer Rebmann Maxwell & Hippel LLP | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 200 Locust Street - Suite 400 | | Transaction ID: SA11Ai-CN3420 |
| City Harrisburg | State PA | Zip Code 17101 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer | Occupation | 100% A. Giorgione |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Andrew J. Giorgione | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 200 Locust Street - Suite 400 | | Transaction ID: SA11Ai-CN3421 |
| City Harrisburg | State PA | Zip Code 17101 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period .00 |
| Name of Employer Obermayer Rebmann Maxwell & Hippel LLP | Occupation Partner-in-Charge/Attorney | Partnership-Obermayer Rebmann Maxwell Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) [MEMO ITEM] |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ .00 | |

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|------------------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 2250.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. R. Roger Smith | | Date of Receipt M / D / Y 03 / 25 / 2004 |
| Mailing Address 287 Red Maple Drive | | Transaction ID: SA11Ai-CN3428 |
| City Homer City | State PA | Zip Code 15748 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Indiana University of PA | Occupation Professor | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. James J Anderson | | Date of Receipt M / D / Y 03 / 28 / 2004 |
| Mailing Address 205 Lurgan Road | | Transaction ID: SA11Ai-CN3446 |
| City New Hope | State PA | Zip Code 18938 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer James J Anderson Construction Co Inc | Occupation Construction Owner | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Dr James W Yeh | | Date of Receipt M / D / Y 03 / 30 / 2004 |
| Mailing Address 52 Bortons Road | | Transaction ID: SA11Ai-CN3465 |
| City Medford | State NJ | Zip Code 08055 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Galaxy Scientific Corp | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|-----------------------------------------------------------|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Matthew Schure | | Date of Receipt M / D / Y 03 / 30 / 2004 |
| Mailing Address 123D Peterman Lane | | Transaction ID: SA11Ai-CN3466 |
| City Ambler | State PA | Zip Code 19002 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer PNH College of Osteopat- hic Med. | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Lisa M Wilomski | | Date of Receipt M / D / Y 03 / 30 / 2004 |
| Mailing Address 139D Paxon Place | | Transaction ID: SA11Ai-CN3467 |
| City Media | State PA | Zip Code 19063 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer T. FrankMcCall5, Inc. | Occupation Sales | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. John M Elzandro | | Date of Receipt M / D / Y 03 / 30 / 2004 |
| Mailing Address 793 County Line Road | | Transaction ID: SA11Ai-CN3469 |
| City Villanova | State PA | Zip Code 19085 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Erik Ellensson Kaler | | Date of Receipt M / D / Y 03 / 30 / 2004 |
| Mailing Address 5 McKinley Lane | | Transaction ID: SA11Ai-CN3475 |
| City Chester Springs | State PA | Zip Code 19425 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2000.00 |
| Name of Employer | Occupation | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. John B McGowan, Jr | | Date of Receipt M / D / Y 03 / 31 / 2004 |
| Mailing Address 149 Grubb Road | | Transaction ID: SA11Ai-CN3483 |
| City Malvern | State PA | Zip Code 19355 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer UMAC, Inc | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Rance A Luelano | | Date of Receipt M / D / Y 04 / 01 / 2004 |
| Mailing Address 320 Cardinal Drive | | Transaction ID: SA11Ai-CN3487 |
| City Hollidaysburg | State PA | Zip Code 16848 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Self Employed | Occupation Dance Instructor | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|------------------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3250.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 238
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Walter P Kironis, III | | Date of Receipt M / D / Y 04 / 01 / 2004 |
| Mailing Address 978D Tico Lane | | Transaction ID: SA11Ai-CN3488 |
| City Bristow | State VA | Zip Code 20136 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2000.00 |
| Name of Employer Progeny Systems | Occupation Engineering | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. The McKee Group | | Date of Receipt M / D / Y 04 / 01 / 2004 |
| Mailing Address 900 West Sproul Road Suite 301 | | Transaction ID: SA11Ai-CN3491 |
| City Springfield | State PA | Zip Code 19064 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | Contributed by Frank J McKee Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Frank J McKee | | Date of Receipt M / D / Y 04 / 01 / 2004 |
| Mailing Address 900 W Sproul Road | | Transaction ID: SA11Ai-CN3492 |
| City Springfield | State PA | Zip Code 19064 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period .00 |
| Name of Employer The McKee Group | Occupation Partner | Partnership-The McKee Group Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) [MEMO ITEM] |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ .00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 238
(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Ladonna L Waters | | Date of Receipt M / D / Y 04 / 02 / 2004 |
| Mailing Address 742 Ritchey Road | | Transaction ID: SA11Ai-CN3494 |
| City Everett | State PA | Zip Code 15537 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation Retired | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Pamela J Pitt | | Date of Receipt M / D / Y 04 / 02 / 2004 |
| Mailing Address 620 Allegheny Street | | Transaction ID: SA11Ai-CN3500 |
| City Hollidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer BXAL Inc | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Pamela J Pitt | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 620 Allegheny Street | | Transaction ID: SA11Ai-CN3851 |
| City Hollidaysburg | State PA | Zip Code 16648 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| Name of Employer BXAL Inc | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 800.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. William J Kukurin | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address 255 Shrader Hollow Road | | Transaction ID: SA11Ai-CN3519 |
| City New Stanton | State PA | Zip Code 15672 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Kukurin Contracting Inc | Occupation Utility Contractor | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Thelma K Gleason | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 551 Main Street Suite 204 | | Transaction ID: SA11Ai-CN3563 |
| City Johnstown | State PA | Zip Code 15801 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation Retired | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Mark K Gleason | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 889 Old Hickory Road | | Transaction ID: SA11Ai-CN3564 |
| City Pittsburgh | State PA | Zip Code 15243 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Gleason & Associates, CPA | Occupation CPA | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 1200.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 86 / 238

(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Steven Kristofer Rockwell | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 1003 E Carson Street - 2nd Floor | | Transaction ID: SA11Ai-CN3570 |
| City Pittsburgh | State PA | Zip Code 15203 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Rockwell Forest Products | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Rudolph L Massa | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 2224 Poor Richards Lane | | Transaction ID: SA11Ai-CN3572 |
| City Pittsburgh | State PA | Zip Code 15237 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer | Occupation | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Angel D Wilkens | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 2711 Leona Lane | | Transaction ID: SA11Ai-CN3573 |
| City Coraopolis | State PA | Zip Code 15108 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer | Occupation | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Jon Nevin Moore | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 114 Woodshire Drive | | Transaction ID: SA11Ai-CN3575 |
| City Pittsburgh | State PA | Zip Code 15215 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Gleason Insurance | Occupation Producer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Damian G Zamias | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 825 1/2 St James Street | | Transaction ID: SA11Ai-CN3576 |
| City Pittsburgh | State PA | Zip Code 15232 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Zamias Corporation | Occupation Developer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Patrick A Dealmone | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 1429 Bristol Lane | | Transaction ID: SA11Ai-CN3577 |
| City South Park | State PA | Zip Code 15129 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer DES Realty | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 88 / 238

(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

| | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. John Irvin | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 1620 Blackburn Heights Drive | | Transaction ID: SA11Ai-CN3579 |
| City Sewickley | State PA | Zip Code 15143 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Innovative Benefits Consulting, Inc. Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Occupation President Election Cycle-to-Date ▼ 500.00 | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. John Irvin | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 1620 Blackburn Heights Drive | | Transaction ID: SA11Ai-CN3580 |
| City Sewickley | State PA | Zip Code 15143 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Innovative Benefits Consulting, Inc. Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Occupation President Election Cycle-to-Date ▼ 1000.00 | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Grane Associates | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 209 Sigma Drive | | Transaction ID: SA11Ai-CN3585 |
| City Pittsburgh | State PA | Zip Code 15238 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer | Occupation | Ross Nease 100% contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 238
 (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

| | | |
|------------------------------------------------------------------------|-------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Ross J Nese | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 209 Sigma Drive | | Transaction ID: SA11Ai-CN3612 |
| City | State | Zip Code |
| Pittsburgh | PA | 15238 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period .00 |
| Name of Employer Grane Associates | Occupation General Partner / Executive | Partnership-Grane Associates Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) [MEMO ITEM] |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ .00 | |

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|------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Stephen E Pederson | | Date of Receipt M / D / Y 04 / 06 / 2004 |
| Mailing Address 15452 Norwood Avenue | | Transaction ID: SA11Ai-CN3594 |
| City | State | Zip Code |
| Blue Ridge Summit | PA | 17214 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Self Employed | Occupation Attorney | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Larry L Nulton | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 917 Stanford Avenue | | Transaction ID: SA11Ai-CN3616 |
| City | State | Zip Code |
| Johnstown | PA | 15505 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Self Employed | Occupation Physician | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 00 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Terry M Asteford | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 543 Schoolhouse Road | | Transaction ID: SA11Ai-CN3617 |
| City Johnstown | State PA | Zip Code 15804 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Self Employed | Occupation Realtor | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Joseph A Hardy, III | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address PO Box 584 | | Transaction ID: SA11Ai-CN3622 |
| City Eighty Four | State PA | Zip Code 15330 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2000.00 |
| Name of Employer 84 Lumber | Occupation Executive | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Jeannie D O'Neill | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 2 Paul Road | | Transaction ID: SA11Ai-CN3625 |
| City St Davids | State PA | Zip Code 19087 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 3000.00 |
| Name of Employer none | Occupation Housewife | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

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|-----------------------------------------------------------|---|----------------|
| 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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 01 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Richard E Barron | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 28 Spa View Circle | | Transaction ID: SA11Ai-CN3627 |
| City | State | Zip Code |
| Annapolis | MD | 21401 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer | Occupation | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Margaret S Over | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 511 Walnut Street | | Transaction ID: SA11Ai-CN3634 |
| City | State | Zip Code |
| Roaring Spring | PA | 16673 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer none | Occupation Housewife | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1250.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Greg Turjan | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 1024 St Clair Road | | Transaction ID: SA11Ai-CN3635 |
| City | State | Zip Code |
| Johnstown | PA | 15505 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Turjan Construction | Occupation Construction | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|-----------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 2250.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: PAGE 02 / 238
(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Michael A Tokarsky, Jr | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 824 Shady Lane | | Transaction ID: SA11Ai-CN3636 |
| City Windber | State PA | Zip Code 15863 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Self | Occupation Self Employed | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. David B Zucco | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address R 216 Leila Street | | Transaction ID: SA11Ai-CN3636 |
| City Johnstown | State PA | Zip Code 15805 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer FNB Bank | Occupation Loan Officer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Richard H German | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 725 Luzerne Street | | Transaction ID: SA11Ai-CN3639 |
| City Johnstown | State PA | Zip Code 15805 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer Self Employed | Occupation Business Real Estate | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 950.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 03 / 238
 (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

| | | |
|---------------------------------------------------------------------|------------------------------------|------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Salvatore J Valenty | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 412 Sycamore Street | | Transaction ID: SA11Ai-CN3642 |
| City Northern Cambria | State PA | Zip Code 15714 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Valenty Bottled Water Inc. | Occupation President & CEO | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|---------------------------------------------------------------------|------------------------------------|------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Michael B Smith | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 202 Delta Drive | | Transaction ID: SA11Ai-CN3646 |
| City Johnstown | State PA | Zip Code 15804 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Laurel Auto Group | Occupation GM Dealer | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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|---------------------------------------------------------------------|------------------------------------|------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. R Tim McQuaide | | Date of Receipt M / D / Y 04 / 07 / 2004 |
| Mailing Address 153 Macridge Drive | | Transaction ID: SA11Ai-CN3647 |
| City Johnstown | State PA | Zip Code 15804 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer W C McQuaide Inc | Occupation VP | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 1250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 04 / 238
 (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 | | | |
| Full Name (Last, First, Middle Initial) A. Matthew W Stever Mailing Address 2724 Oak Street <hr/> City State Zip Code Altoona PA 16601 <hr/> FEC ID number of contributing federal political committee. C <hr/> <table style="width:100%; border: none;"> <tr> <td style="width: 30%; border: none;"> Name of Employer The Roswell Group <hr/> Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ </td> <td style="border: none;"> Occupation Business Owner-Real Estate-President Election Cycle-to-Date ▼ <div style="text-align: right; margin-top: 10px;">500.00</div> </td> </tr> </table> | Name of Employer The Roswell Group <hr/> Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Occupation Business Owner-Real Estate-President Election Cycle-to-Date ▼ <div style="text-align: right; margin-top: 10px;">500.00</div> | Date of Receipt M M / U U / Y Y Y Y 04 / 07 / 2004 <hr/> Transaction ID: SA11Ai-CN3657 <hr/> Amount of Each Receipt this Period <div style="text-align: right; margin-top: 10px;">500.00</div> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Name of Employer The Roswell Group <hr/> Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Occupation Business Owner-Real Estate-President Election Cycle-to-Date ▼ <div style="text-align: right; margin-top: 10px;">500.00</div> | | |

| | |
|--------------------------------------------------------------------|------------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 500.00 |
| TOTAL This Period (last page this line number only) ▶ | 163821.80 |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 05 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Union Pacific Corp Fund | | Date of Receipt M / D / Y 03 / 05 / 2004 |
| Mailing Address 800 Thirteenth Street, NW Suite 340 | | Transaction ID: SA11C-CN3195 |
| City Washington | State DC | Zip Code 20005 |
| FEC ID number of contributing federal political committee. C C00010470 | | Amount of Each Receipt this Period 2500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Dealers Election Action | | Date of Receipt M / D / Y 03 / 17 / 2004 |
| Mailing Address 8400 Westpark Drive | | Transaction ID: SA11C-CN3312 |
| City Mc Lean | State VA | Zip Code 22102 |
| FEC ID number of contributing federal political committee. C C00040898 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | General 2004 contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 6000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Association of American Railroads | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 50 F Street NW | | Transaction ID: SA11C-CN3220 |
| City Washington | State DC | Zip Code 20001 |
| FEC ID number of contributing federal political committee. C C00280743 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | |
|-----------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 4500.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: PAGE 06 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. ARTBA | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 101D Massachusetts Ave NW | | Transaction ID: SA11C-CN3925 |
| City Washington | State DC | Zip Code 20001 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Truck | | Date of Receipt M / D / Y 03 / 20 / 2004 |
| Mailing Address 430 First Street SE | | Transaction ID: SA11C-CN3450 |
| City Washington | State DC | Zip Code 20003 |
| FEC ID number of contributing federal political committee. C CD0002881 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2500.00 | |

| | | |
|-----------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. National Utility Contractors | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address 4301 N Fairfax Drive Suite 380 | | Transaction ID: SA11C-CN3509 |
| City Arlington | State VA | Zip Code 22203 |
| FEC ID number of contributing federal political committee. C CD0004101 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 07 / 238
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Outdoor Advertising Assoc Of America | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 1850 M Street NW Suite 1040 | | Transaction ID: SA11C-CN3218 |
| City Washington | State DC | Zip Code 20036 |
| FEC ID number of contributing federal political committee. C C00045781 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. American Maritime Officers Voluntary | | Date of Receipt M / D / Y 03 / 11 / 2004 |
| Mailing Address 2 West Dixie Highway | | Transaction ID: SA11C-CN3247 |
| City Dania | State FL | Zip Code 33004 |
| FEC ID number of contributing federal political committee. C CD0027532 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 4000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. American Maritime Officers Voluntary | | Date of Receipt M / D / Y 03 / 19 / 2004 |
| Mailing Address 2 West Dixie Highway | | Transaction ID: SA11C-CN3323 |
| City Dania | State FL | Zip Code 33004 |
| FEC ID number of contributing federal political committee. C CD0027532 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

| | |
|-----------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 2500.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 08 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. ACRE | | Date of Receipt M / D / Y 03 / 17 / 2004 |
| Mailing Address 4301 Wilson Boulevard | | Transaction ID: SA11C-CN3909 |
| City Arlington | State VA | Zip Code 22203 |
| FEC ID number of contributing federal political committee. C C00002872 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 3500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. American Council of Engineering | | Date of Receipt M / D / Y 03 / 08 / 2004 |
| Mailing Address 1015 15th Street NW Suite 802 | | Transaction ID: SA11C-CN3200 |
| City Washington | State DC | Zip Code 20005 |
| FEC ID number of contributing federal political committee. C CD0010868 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. PPL People For Good Govt | | Date of Receipt M / D / Y 03 / 30 / 2004 |
| Mailing Address Two North Ninth Street | | Transaction ID: SA11C-CN3478 |
| City Allentown | State PA | Zip Code 18101 |
| FEC ID number of contributing federal political committee. C CD0228108 | | Amount of Each Receipt this Period 3500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

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|------------------------------------------------------------------|----------------|
| 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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 08 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. United Parcel Service Inc | | Date of Receipt M / D / Y 02 / 05 / 2004 |
| Mailing Address 55 Glenlake Parkway NE | | Transaction ID: SA11C-CN3144 |
| City Atlanta | State GA | Zip Code 30328 |
| FEC ID number of contributing federal political committee. C C00064766 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 Primary X General Other (specify) ▼ | Election Cycle-to-Date ▼ 5500.00 | |

| | | |
|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. United Parcel Service Inc | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 55 Glenlake Parkway NE | | Transaction ID: SA11C-CN3221 |
| City Atlanta | State GA | Zip Code 30328 |
| FEC ID number of contributing federal political committee. C C00064768 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 Primary X General Other (specify) ▼ | Election Cycle-to-Date ▼ 6500.00 | |

| | | |
|------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Associated General Contractors | | Date of Receipt M / D / Y 03 / 29 / 2004 |
| Mailing Address 333 John Carlyle Street Suite 200 | | Transaction ID: SA11C-CN3452 |
| City Alexandria | State VA | Zip Code 22314 |
| FEC ID number of contributing federal political committee. C C00082917 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

| | |
|-----------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional) | 2000.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: PAGE 100 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|----------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Aircraft Owners Pilots Association | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 421 Aviation Way | | Transaction ID: SA11C-CN3924 |
| City Frederick | State MD | Zip Code 21701 |
| FEC ID number of contributing federal political committee. C C00131185 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 4000.00 | |

| | | |
|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Sheatz | | Date of Receipt M / D / Y 02 / 23 / 2004 |
| Mailing Address 5700 Sixth Avenue | | Transaction ID: SA11C-CN3187 |
| City Altoona | State PA | Zip Code 16802 |
| FEC ID number of contributing federal political committee. C CD0219121 | | Amount of Each Receipt this Period 1250.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 2350.00 | |

| | | |
|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Sheatz | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 5700 Sixth Avenue | | Transaction ID: SA11C-CN3366 |
| City Altoona | State PA | Zip Code 16802 |
| FEC ID number of contributing federal political committee. C CD0219121 | | Amount of Each Receipt this Period 250.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 2600.00 | |

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|-----------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional) | 2500.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: PAGE 101 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Sheetz | | Date of Receipt M / D / Y 03 / 28 / 2004 |
| Mailing Address 5700 Sixth Avenue | | Transaction ID: SA11C-CN3447 |
| City Altoona | State PA | Zip Code 16602 |
| FEC ID number of contributing federal political committee. C C00219121 | | Amount of Each Receipt this Period 2400.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. National Federation of Independent Business | | Date of Receipt M / D / Y 03 / 28 / 2004 |
| Mailing Address 1201 F Street NW Suite 200 | | Transaction ID: SA11C-CN3435 |
| City Washington | State DC | Zip Code 20004 |
| FEC ID number of contributing federal political committee. C CD0101105 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. National Restaurant Assoc | | Date of Receipt M / D / Y 03 / 18 / 2004 |
| Mailing Address 1200 17th Street NW | | Transaction ID: SA11C-CN3320 |
| City Washington | State DC | Zip Code 20038 |
| FEC ID number of contributing federal political committee. C CD0003784 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 4000.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 3900.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 238

(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

| | | |
|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Hobson For Congress | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address 82 W Columbia Street | | Transaction ID: SA11C-CN3506 |
| City Springfield | State OH | Zip Code 45502 |
| FEC ID number of contributing federal political committee. C C00239805 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Hobson For Congress | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address 82 W Columbia Street | | Transaction ID: SA11C-CN3507 |
| City Springfield | State OH | Zip Code 45502 |
| FEC ID number of contributing federal political committee. C C00239805 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 Primary X General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|-----------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Wine Spirits Wholesalers Of America | | Date of Receipt M / D / Y 04 / 02 / 2004 |
| Mailing Address 805 Fifteenth Street NW Suite 430 | | Transaction ID: SA11C-CN3497 |
| City Washington | State DC | Zip Code 20005 |
| FEC ID number of contributing federal political committee. C C00147173 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

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|-----------------------------------------------------------|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 103 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Highmark Health | | Date of Receipt M / D / Y 02 / 26 / 2004 |
| Mailing Address 1800 Center Street | | Transaction ID: SA11C-CN3189 |
| City Camp Hill | State PA | Zip Code 17089 |
| FEC ID number of contributing federal political committee. C C00302844 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. American Medical Assoc | | Date of Receipt M / D / Y 04 / 02 / 2004 |
| Mailing Address 1101 Vermont Avenue NW | | Transaction ID: SA11C-CN3496 |
| City Washington | State DC | Zip Code 20005 |
| FEC ID number of contributing federal political committee. C C70001847 | | Amount of Each Receipt this Period 2500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Bushanan Ingersoll PC | | Date of Receipt M / D / Y 04 / 01 / 2004 |
| Mailing Address 1 Oxford Center 20th Floor 301 Grant Street | | Transaction ID: SA11C-CN3490 |
| City Pittsburgh | State PA | Zip Code 15219 |
| FEC ID number of contributing federal political committee. C CD0195358 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

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|-----------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 4000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 104 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Build | | Date of Receipt M / D / Y 03 / 17 / 2004 |
| Mailing Address 1201 15th Street NW | | Transaction ID: SA11C-CN3310 |
| City | State | Zip Code |
| Washington | DC | 20005 |
| FEC ID number of contributing federal political committee. C C00000801 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 3000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Citizens For Color | | Date of Receipt M / D / Y 03 / 22 / 2004 |
| Mailing Address 242 Barron Road | | Transaction ID: SA11C-CN3330 |
| City | State | Zip Code |
| Somerset | PA | 15501 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 350.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Committee To Elect Jimmy | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address 110 JC Lane | | Transaction ID: SA11C-CN3510 |
| City | State | Zip Code |
| Rockwood | PA | 15557 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|-------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Ford Motor Co Civic Action Fund | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address The American Road | | Transaction ID: SA11C-CN3326 |
| City Dearborn | State MI | Zip Code 48121 |
| FEC ID number of contributing federal political committee. C C00046474 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 2500.00 | |

| | | |
|------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Exxon Mobil Corporation | | Date of Receipt M / D / Y 03 / 12 / 2004 |
| Mailing Address 5959 Las Colinas Blvd | | Transaction ID: SA11C-CN3242 |
| City Irving | State TX | Zip Code 75039 |
| FEC ID number of contributing federal political committee. C CD0121388 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|-----------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. American Hospital Association | | Date of Receipt M / D / Y 03 / 29 / 2004 |
| Mailing Address 325 Seventh Street NW | | Transaction ID: SA11C-CN3455 |
| City Washington | State DC | Zip Code 20004 |
| FEC ID number of contributing federal political committee. C CD0106148 | | Amount of Each Receipt this Period 2500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 4500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 106 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|-----------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. American Hospital Association | | Date of Receipt M / D / Y 03 / 29 / 2004 |
| Mailing Address 325 Seventh Street NW | | Transaction ID: SA11C-CN3457 |
| City Washington | State DC | Zip Code 20004 |
| FEC ID number of contributing federal political committee. C C00106146 | | Amount of Each Receipt this Period 2500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 7500.00 | |

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|---------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Committee For The Preservation Of Capitalism | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address PO Box 22814 | | Transaction ID: SA11C-CN3561 |
| City Alexandria | State VA | Zip Code 22304 |
| FEC ID number of contributing federal political committee. C C00328488 | | Amount of Each Receipt this Period 4000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

| | | |
|--------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Perry Co Republican | | Date of Receipt M / D / Y 01 / 15 / 2004 |
| Mailing Address 421 W. Main Street | | Transaction ID: SA11C-CN3139 |
| City New Bloomfield | State PA | Zip Code 17068 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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

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

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

FOR LINE NUMBER: PAGE 107 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Cigna Corporation | | Date of Receipt M / D / Y 03 / 18 / 2004 |
| Mailing Address 2001 Pennsylvania Avenue, NW Suite 350 | | Transaction ID: SA11C-CN3319 |
| City Washington | State DC | Zip Code 20006 |
| FEC ID number of contributing federal political committee. C C00085316 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Verizon Communication Inc Good Govt | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 1717 Arch Street 47-S | | Transaction ID: SA11C-CN3225 |
| City Philadelphia | State PA | Zip Code 19103 |
| FEC ID number of contributing federal political committee. C CD0186288 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Exelon Corporation | | Date of Receipt M / D / Y 03 / 25 / 2004 |
| Mailing Address PO Box 805379 | | Transaction ID: SA11C-CN3430 |
| City Chicago | State IL | Zip Code 60680 |
| FEC ID number of contributing federal political committee. C CD0141218 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 3000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

| | | |
|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Exelon Corporation | | Date of Receipt M / D / Y 04 / 01 / 2004 |
| Mailing Address PD Box B0537B | | Transaction ID: SA11C-CN3505 |
| City Chicago | State IL | Zip Code 60680 |
| FEC ID number of contributing federal political committee. C C00141218 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 Primary X General Other (specify) ▼ | Election Cycle-to-Date ▼ 4000.00 | |

| | | |
|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Reafors | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 430 North Michigan Avenue | | Transaction ID: SA11C-CN3419 |
| City Chicago | State IL | Zip Code 60611 |
| FEC ID number of contributing federal political committee. C CD0030718 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 Primary X General Other (specify) ▼ | Election Cycle-to-Date ▼ 5500.00 | |

| | | |
|---------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Pennsylvania Food | | Date of Receipt M / D / Y 03 / 05 / 2004 |
| Mailing Address 1029 Mumma Road PO Box 870 | | Transaction ID: SA11C-CN3196 |
| City Camp Hill | State PA | Zip Code 17001 |
| FEC ID number of contributing federal political committee. C CD0345660 | | Amount of Each Receipt this Period 250.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 1750.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 100 / 238

(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Responsible Citizens Political League | | Date of Receipt M / D / Y 03 / 11 / 2004 |
| Mailing Address 3 Research Place | | Transaction ID: SA11C-CN3248 |
| City | State | Zip Code |
| Rockville | MD | 20850 |
| FEC ID number of contributing federal political committee. C C00006338 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. GAMA | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 1400 K Street NW Suite B01 | | Transaction ID: SA11C-CN3217 |
| City | State | Zip Code |
| Washington | DC | 20005 |
| FEC ID number of contributing federal political committee. C CD0014878 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Allegheny Power | | Date of Receipt M / D / Y 03 / 29 / 2004 |
| Mailing Address 10435 Downsville Pike | | Transaction ID: SA11C-CN3451 |
| City | State | Zip Code |
| Hagerstown | MD | 21740 |
| FEC ID number of contributing federal political committee. C CD0326579 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 3000.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 110 / 238

(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

| | | |
|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. RJ Reynolds | | Date of Receipt M / D / Y 03 / 26 / 2004 |
| Mailing Address Po Box 718 401 N. Main Street | | Transaction ID: SA11C-CN3436 |
| City Winston Salem | State NC | Zip Code 27102 |
| FEC ID number of contributing federal political committee. C C00042002 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Dominion | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address One James River Plaza PO Box 28868 | | Transaction ID: SA11C-CN3230 |
| City Richmond | State VA | Zip Code 23261 |
| FEC ID number of contributing federal political committee. C CD0108209 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Concrete | | Date of Receipt M / D / Y 03 / 29 / 2004 |
| Mailing Address 900 Spring Street | | Transaction ID: SA11C-CN3449 |
| City Silver Spring | State MD | Zip Code 20910 |
| FEC ID number of contributing federal political committee. C CD0114025 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

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|-----------------------------------------------------------|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 111 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|-----------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. United In Freedom | | Date of Receipt M / D / Y 03 / 20 / 2004 |
| Mailing Address PD Box 1448 | | Transaction ID: SA11C-CN3456 |
| City Clifton Park | State NY | Zip Code 12065 |
| FEC ID number of contributing federal political committee. C C00345033 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Designated to General 2004 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 5500.00 | |

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|----------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Philps Electronics | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 1300 I Street NW Suite 1070 East | | Transaction ID: SA11C-CN3219 |
| City Washington | State DC | Zip Code 20005 |
| FEC ID number of contributing federal political committee. C C00239780 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|----------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. NEA Fund For Children | | Date of Receipt M / D / Y 03 / 02 / 2004 |
| Mailing Address 1201 16th Street NW Suite 421 | | Transaction ID: SA11C-CN3193 |
| City Washington | State DC | Zip Code 20038 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

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|-----------------------------------------------------------|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 6000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 112 / 238

(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

| | | |
|-----------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Allied Pilots Association | | Date of Receipt M / D / Y 03 / 20 / 2004 |
| Mailing Address 14800 Trinity Blvd-Suite 500 | | Transaction ID: SA11C-CN3458 |
| City Fort Worth | State TX | Zip Code 76155 |
| FEC ID number of contributing federal political committee. C C00267849 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|----------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. NFG FED | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 10 Lafayette Square | | Transaction ID: SA11C-CN3228 |
| City Buffalo | State NY | Zip Code 14203 |
| FEC ID number of contributing federal political committee. C CD0083758 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

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|----------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. NSSGA Rock | | Date of Receipt M / D / Y 03 / 08 / 2004 |
| Mailing Address 2101 Wilson Blvd - Suite 100 | | Transaction ID: SA11C-CN3198 |
| City Arlington | State VA | Zip Code 22201 |
| FEC ID number of contributing federal political committee. C CD0089458 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 113 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|-----------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Interstate Natural Gas Assoc. | | Date of Receipt M / D / Y 03 / 12 / 2004 |
| Mailing Address 10 G Street NE - Suite 700 | | Transaction ID: SA11C-CN3241 |
| City Washington | State DC | Zip Code 20002 |
| FEC ID number of contributing federal political committee. C C00116145 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. ACE INA | | Date of Receipt M / D / Y 04 / 01 / 2004 |
| Mailing Address Two Liberty Place 1801 Chestnut | | Transaction ID: SA11C-CN3502 |
| City Philadelphia | State PA | Zip Code 19103 |
| FEC ID number of contributing federal political committee. C CD0348838 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 Primary X General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Persons Brinkshoff Inc | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address One Penn Plaza | | Transaction ID: SA11C-CN3222 |
| City New York | State NY | Zip Code 10119 |
| FEC ID number of contributing federal political committee. C CD0287003 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 114 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. MeadWestvaco | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address One High Ridge Park | | Transaction ID: SA11C-CN3224 |
| City Stamford | State CT | Zip Code 06905 |
| FEC ID number of contributing federal political committee. C C00065987 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Manitowoc Company | | Date of Receipt M / D / Y 03 / 08 / 2004 |
| Mailing Address P.O. Box 1101 | | Transaction ID: SA11C-CN3199 |
| City Marinette | State WI | Zip Code 54143 |
| FEC ID number of contributing federal political committee. C CD0287847 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 3000.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Joy Global Inc | | Date of Receipt M / D / Y 03 / 11 / 2004 |
| Mailing Address P.O. Box 554 | | Transaction ID: SA11C-CN3246 |
| City Milwaukee | State WI | Zip Code 53201 |
| FEC ID number of contributing federal political committee. C CD0232548 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 2500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 115 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|-----------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. BNSF Rail | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address PD Box 861039 | | Transaction ID: SA11C-CN3508 |
| City Fort Worth | State TX | Zip Code 76161 |
| FEC ID number of contributing federal political committee. C C00235739 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

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|-------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. FAA Managers Association, Inc. | | Date of Receipt M / D / Y 03 / 15 / 2004 |
| Mailing Address 551 Quail Run | | Transaction ID: SA11C-CN3254 |
| City Greenwood | State IN | Zip Code 46142 |
| FEC ID number of contributing federal political committee. C CD0368070 | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 6000.00 | |

| | | |
|--------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. 1st Commonwealth Financial Corp | | Date of Receipt M / D / Y 02 / 20 / 2004 |
| Mailing Address 22 North Sixth Street PO Box 400 | | Transaction ID: SA11C-CN3154 |
| City Indiana | State PA | Zip Code 15701 |
| FEC ID number of contributing federal political committee. C CD0348185 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 6500.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: PAGE 116 / 238

(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. National Air Traffic Controllers | | Date of Receipt M / D / Y 03 / 10 / 2004 |
| Mailing Address 1325 Massachusetts Avenue NW | | Transaction ID: SA11C-CN3223 |
| City | State | Zip Code |
| Washington | DC | 20005 |
| FEC ID number of contributing federal political committee. C C00238725 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Sonnenschein Nath Rosenthal | | Date of Receipt M / D / Y 03 / 23 / 2004 |
| Mailing Address 800D Sears Tower | | Transaction ID: SA11C-CN3415 |
| City | State | Zip Code |
| Chicago | IL | 60606 |
| FEC ID number of contributing federal political committee. C CD0218127 | | Amount of Each Receipt this Period 4000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 6500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Every Republican Is Crucial | | Date of Receipt M / D / Y 01 / 05 / 2004 |
| Mailing Address 4914 Fitzhugh Avenue Suite 200 | | Transaction ID: SA11C-CN3135 |
| City | State | Zip Code |
| Richmond | VA | 23230 |
| FEC ID number of contributing federal political committee. C CD0384701 | | Amount of Each Receipt this Period 2500.00 |
| Name of Employer none | Occupation none | General 2004 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 6000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 7500.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 117 / 238

(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

| | | |
|-----------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Americas Foundation | | Date of Receipt M / D / Y 03 / 30 / 2004 |
| Mailing Address One Tower Bridge-Suite 1440 100 Front Street | | Transaction ID: SA11C-CN3484 |
| City West Conshohocken | State PA | Zip Code 19328 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 10000.00 | |

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|----------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. American Motorcyclist | | Date of Receipt M / D / Y 03 / 11 / 2004 |
| Mailing Address 13515 Yarmouth Drive | | Transaction ID: SA11C-CN3249 |
| City Pickerington | State OH | Zip Code 43147 |
| FEC ID number of contributing federal political committee. C CD0120238 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|--------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. American Federation of Govt Employees | | Date of Receipt M / D / Y 03 / 29 / 2004 |
| Mailing Address 80 F Street, NW | | Transaction ID: SA11C-CN3454 |
| City Washington | State DC | Zip Code 20001 |
| FEC ID number of contributing federal political committee. C CD0009938 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 6000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 118 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Walsh for Congress | | Date of Receipt M / D / Y 02 / 10 / 2004 |
| Mailing Address 308 Winkworth Parkway | | Transaction ID: SA11C-CN3146 |
| City Syracuse | State NY | Zip Code 13215 |
| FEC ID number of contributing federal political committee. C C00225623 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Safari Club International | | Date of Receipt M / D / Y 03 / 12 / 2004 |
| Mailing Address 4800 W. Gates Pass Road | | Transaction ID: SA11C-CN3243 |
| City Tucson | State AZ | Zip Code 85745 |
| FEC ID number of contributing federal political committee. C CD0122101 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|---------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Toby Roth for Congress | | Date of Receipt M / D / Y 03 / 15 / 2004 |
| Mailing Address PO Box 2673 | | Transaction ID: SA11C-CN3252 |
| City Appleton | State WI | Zip Code 54913 |
| FEC ID number of contributing federal political committee. C CD0140350 | | Amount of Each Receipt this Period 250.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 2250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 118 / 238

(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Joe Wilson for Congress | | Date of Receipt M / D / Y 03 / 15 / 2004 |
| Mailing Address PD Box 2044 | | Transaction ID: SA11C-CN3253 |
| City | State | Zip Code |
| West Columbia | SC | 29171 |
| FEC ID number of contributing federal political committee. C C00368522 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Friends of Duke Cunningham | | Date of Receipt M / D / Y 03 / 18 / 2004 |
| Mailing Address 471 D Fourth Street #100 | | Transaction ID: SA11C-CN3315 |
| City | State | Zip Code |
| La Mesa | CA | 91941 |
| FEC ID number of contributing federal political committee. C C00242448 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. HRG | | Date of Receipt M / D / Y 03 / 29 / 2004 |
| Mailing Address 389 East Park Drive | | Transaction ID: SA11C-CN3437 |
| City | State | Zip Code |
| Harrisburg | PA | 17111 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

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| SUBTOTAL of Receipts This Page (optional) | ▶ | 2250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 120 / 238

(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

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Sun | | Date of Receipt M / D / Y 03 / 20 / 2004 |
| Mailing Address Ten Penn Center 1801 Market Street | | Transaction ID: SA11C-CN3453 |
| City Philadelphia | State PA | Zip Code 19103 |
| FEC ID number of contributing federal political committee. C C00025346 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. CURT | | Date of Receipt M / D / Y 03 / 30 / 2004 |
| Mailing Address 11113 Glade Drive | | Transaction ID: SA11C-CN3476 |
| City Reston | State VA | Zip Code 20191 |
| FEC ID number of contributing federal political committee. C CD0352528 | | Amount of Each Receipt this Period 2000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. PSC H2D | | Date of Receipt M / D / Y 03 / 30 / 2004 |
| Mailing Address 782 W Lancaster Avenue | | Transaction ID: SA11C-CN3477 |
| City Bryn Mawr | State PA | Zip Code 19010 |
| FEC ID number of contributing federal political committee. C CD0340455 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 4000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 121 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Piper Rudnick LLP | | Date of Receipt M / D / Y 03 / 31 / 2004 |
| Mailing Address 1200 18th Street NW | | Transaction ID: SA11C-CN3486 |
| City | State | Zip Code |
| Washington | DC | 20036 |
| FEC ID number of contributing federal political committee. C C00151340 | | Amount of Each Receipt this Period 750.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 750.00 | |

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|------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Tercenary Fund | | Date of Receipt M / D / Y 04 / 01 / 2004 |
| Mailing Address 1650 Arch Street - 22nd Floor | | Transaction ID: SA11C-CN3486 |
| City | State | Zip Code |
| Philadelphia | PA | 19103 |
| FEC ID number of contributing federal political committee. C C00162719 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. American Chiropractic Association | | Date of Receipt M / D / Y 04 / 01 / 2004 |
| Mailing Address 1701 Clarendon Blvd | | Transaction ID: SA11C-CN3493 |
| City | State | Zip Code |
| Arlington | VA | 22209 |
| FEC ID number of contributing federal political committee. C C00102784 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 2250.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: PAGE 122 / 238

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | | |
|----------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Conservative Leadership Fund | | Date of Receipt M / D / Y 04 / 02 / 2004 |
| Mailing Address PD Box 71596 | | Transaction ID: SA11C-CN3498 |
| City Richmond | State VA | Zip Code 23255 |
| FEC ID number of contributing federal political committee. C C00388223 | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

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|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Big Tent | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address 226 N. Alfred Street | | Transaction ID: SA11C-CN3556 |
| City Alexandria | State VA | Zip Code 22314 |
| FEC ID number of contributing federal political committee. C C00285098 | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

| | | |
|---------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Advance the Majority | | Date of Receipt M / D / Y 04 / 05 / 2004 |
| Mailing Address PD Box 1029 | | Transaction ID: SA11C-CN3562 |
| City Pensacola | State FL | Zip Code 32565 |
| FEC ID number of contributing federal political committee. C C00368571 | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

| | | |
|-----------------------------------------------------------|---|-----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 10500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 123 / 238

(check only one)

| | | | |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 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. Drinker Biddle | | Date of Receipt M / D / Y Y Y Y 04 / 07 / 2004 |
| Mailing Address 1500 K Street NW Suite 1100 | | Transaction ID: SA11C-CN3618 |
| City Washington | State DC | Zip Code 20005 |
| FEC ID number of contributing federal political committee. C C00370759 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------|--------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. White Ross | | Date of Receipt M / D / Y Y Y Y 04 / 08 / 2004 |
| Mailing Address PO Box 15040 | | Transaction ID: SA11C-CN3656 |
| City York | State PA | Zip Code 17405 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer none | Occupation none | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|-----------------------------------------------------------|---|-----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) | ▶ | 110400.00 |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 124 / 238

(check only one)

| | | | |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input checked="" type="checkbox"/> 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. State Farm Insurance | | Date of Receipt M / D / Y U / S / A 03 / 20 / 2004 |
| Mailing Address 715 Lexington Avenue | | Transaction ID: SA14-ER57 |
| City | State | Zip Code |
| Altoona | PA | 16601 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 23.00 |
| Name of Employer | Occupation | Expenditure Refund Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2004 X Primary General Other (specify) ▼ | Election Cycle-to-Date ▼ 219.00 | |

| | | |
|-----------------------------------------------------------|---|-------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 23.00 |
| TOTAL This Period (last page this line number only) | ▶ | 23.00 |

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 125 / 238

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

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

Mailing Address 16 North Shamokin Street

City Shamokin State PA Zip Code 17872

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

003
 Category/
 Type

Transaction ID: SB17-EX2459
 Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

5000.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Solicitation and Fundrais-
 ing Expenses Campaign Con-
 sultant

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

Mailing Address 16 North Shamokin Street

City Shamokin State PA Zip Code 17872

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

003
 Category/
 Type

Transaction ID: SB17-EX2480
 Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

5000.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Solicitation and Fundrais-
 ing Expenses Campaign Con-
 sultant

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

Mailing Address 2200 Beale Avenue

City Altoona State PA Zip Code 16801

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

0D1
 Category/
 Type

Transaction ID: SB17-EX2481
 Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

58.95

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Utilities

SUBTOTAL of Disbursements This Page (optional) ▶

10059.95

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 / 238

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Campaign Resource Strategies

Mailing Address 25452 Brickell Drive

City Chantilly State VA Zip Code 20152

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2462
Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Campaign Con-
sultant

Full Name (Last, First, Middle Initial)
B. Greener And Hook

Mailing Address 1875 Eye Street NW
Suite 540

City Washington State DC Zip Code 20006

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

004
Category/
Type

Transaction ID: SB17-EX2463
Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

5000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Advertising Expenses Media

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

Mailing Address PO Box 8585

City Philadelphia State PA Zip Code 19173

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2464
Date of Disbursement

01 / 12 / 2004

Amount of Each Disbursement this Period

186.44

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Telephone

SUBTOTAL of Disbursements This Page (optional) ▶

7166.44

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Altoona Mirror

Mailing Address PO Box 2008

City Altoona State PA Zip Code 16802

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

004
 Category/
 Type

Transaction ID: SB17-EX2485
 Date of Disbursement

01 / 12 / 2004

Amount of Each Disbursement this Period

96.20

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Advertising Expenses Print Ads

Full Name (Last, First, Middle Initial)
B. CTI/PA dot NET

Mailing Address 5170 E. Trindle Road

City Mechanicsburg State PA Zip Code 17050

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2486
 Date of Disbursement

01 / 12 / 2004

Amount of Each Disbursement this Period

31.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Office Expenses

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

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16802

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2487
 Date of Disbursement

01 / 12 / 2004

Amount of Each Disbursement this Period

702.80

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Campaign Workers' Salaries

SUBTOTAL of Disbursements This Page (optional) ▶

829.80

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 / 238

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Patricia Manning

Mailing Address 610 Garber Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2468
 Date of Disbursement

01 / 12 / 2004

Amount of Each Disbursement this Period

50.70

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Campaign
 Workers' Salaries

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

Mailing Address 16 North Shamokin Street

City Shamokin State PA Zip Code 17872

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2468
 Date of Disbursement

01 / 12 / 2004

Amount of Each Disbursement this Period

309.06

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Vehicle Ex-
 penses

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

Mailing Address 16 North Shamokin Street

City Shamokin State PA Zip Code 17872

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

002
 Category/
 Type

Transaction ID: SB17-EX2470
 Date of Disbursement

01 / 12 / 2004

Amount of Each Disbursement this Period

815.94

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Travel Expenses Lodging

SUBTOTAL of Disbursements This Page (optional) ▶

1175.70

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 / 238

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Patricia Manning

Mailing Address 610 Garber Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2471
Date of Disbursement

01 / 12 / 2004

Amount of Each Disbursement this Period

49.47

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

Full Name (Last, First, Middle Initial)
B. DJS Food Designs Inc

Mailing Address The Casino and Snappy Chef
300 Lakemont Park Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2472
Date of Disbursement

01 / 12 / 2004

Amount of Each Disbursement this Period

728.81

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Fundraising

Full Name (Last, First, Middle Initial)
C. Mark and Rebecca Schaffer

Mailing Address 1501 Bass Lake Road

City Holly Springs State NC Zip Code 27540

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2475
Date of Disbursement

01 / 20 / 2004

Amount of Each Disbursement this Period

200.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Rent

SUBTOTAL of Disbursements This Page (optional) ▶

972.28

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 130 / 238

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Trail Blazer Campaign Services, Inc.

Mailing Address 5115 Excelsior Blvd Suite 103

City State Zip Code
Minneapolis MN 55416

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2477
Date of Disbursement

01 / 09 / 2004

Amount of Each Disbursement this Period

3.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

B. Sheetz Inc

Mailing Address 5700 Sixth Avenue

City State Zip Code
Altoona PA 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2478
Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

15.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

Full Name (Last, First, Middle Initial)

C. Ruths Chris Steakhouse

Mailing Address 1801 Connecticut Avenue, NW

City State Zip Code
Washington DC 20009

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2485
Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

220.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

238.00

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 / 238

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Exxon

Mailing Address 542 South Center Street

City Ebensburg State PA Zip Code 15931

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2486

Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

29.36

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

Full Name (Last, First, Middle Initial)

B. Capitol Hill Club

Mailing Address 300 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2487

Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

571.24

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)

C. TGI Fridays

Mailing Address Plank Road

City Altoona State PA Zip Code 16802

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2488

Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

25.26

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

625.86

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 / 238

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
 A. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President

Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2489
 Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

114.24

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Office Exp-
 enses

Full Name (Last, First, Middle Initial)
 B. US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President

Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2490
 Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

370.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Postage

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

Mailing Address 3415 Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President

Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

007
 Category/
 Type

Transaction ID: SB17-EX2491
 Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

224.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Campaign Event Expenses
 Campaign Supplies

SUBTOTAL of Disbursements This Page (optional) ▶

708.24

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)

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

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

Full Name (Last, First, Middle Initial)
A. US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2492
Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

777.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

Full Name (Last, First, Middle Initial)
B. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2493
Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

22.71

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

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

Mailing Address 518-520 W. Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2494
Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

16.70

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

816.41

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Eckerd Drug

Mailing Address 3331 Pleasant Valley

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2495

Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

9.61

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

B. Curve Baseball LP

Mailing Address 1000 Park Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2496

Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

27.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

C. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2497

Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

48.44

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

85.05

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Altoona Kiwanis Club

Mailing Address 43 Seneca Avenue

City Altoona State PA Zip Code 16802

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2498
Date of Disbursement

01 / 20 / 2004

Amount of Each Disbursement this Period

95.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Dués

Full Name (Last, First, Middle Initial)
B. The Tarrance Group

Mailing Address 201 North Union Street Suite 410

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

005
Category/
Type

Transaction ID: SB17-EX2498
Date of Disbursement

01 / 20 / 2004

Amount of Each Disbursement this Period

8751.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Polling Expenses Polling
Costs

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

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16802

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2500
Date of Disbursement

01 / 20 / 2004

Amount of Each Disbursement this Period

200.20

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

9046.20

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)

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| | | | | | | | |
|-------------------------------------|-----------|--------------------------|-----------|--------------------------|------------|--------------------------|-----------|
| <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. Amy Hanna

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2501
 Date of Disbursement

01 / 20 / 2004

Amount of Each Disbursement this Period

30.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Office Exp-
 enses

Full Name (Last, First, Middle Initial)

B. Trail Blazer Campaign Services, Inc.

Mailing Address 5115 Excelsior Blvd Suite 103

City Minneapolis State MN Zip Code 55416

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2502
 Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Office Exp-
 enses

Full Name (Last, First, Middle Initial)

C. Charter Communications

Mailing Address 2200 Beale Avenue

City Altoona State PA Zip Code 16601

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2503
 Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

58.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Utilities

SUBTOTAL of Disbursements This Page (optional) ▶

2089.95

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. AT/T Wireless Services

Mailing Address PO 644039

City Maitland State FL Zip Code 32794

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2504

Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

238.74

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Telephone

Full Name (Last, First, Middle Initial)

B. United States Treasury

Mailing Address PO Box 105703

City Atlanta State GA Zip Code 30348

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2505

Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

312.75

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Payroll Ta-
xes

Full Name (Last, First, Middle Initial)

C. PA LC Fund

Mailing Address PO Box 60190

City Harrisburg State PA Zip Code 17108

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2506

Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

64.98

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Payroll Ta-
xes

SUBTOTAL of Disbursements This Page (optional) ▶

616.48

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. PA Department Of Revenue

Mailing Address DEPT 280414

City Harrisburg State PA Zip Code 17128

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2507
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

96.53

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Payroll Ta-
xes

Full Name (Last, First, Middle Initial)
B. United States Treasury

Mailing Address PO Box 105703

City Atlanta State GA Zip Code 30348

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2508
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

22.04

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Payroll Ta-
xes

Full Name (Last, First, Middle Initial)
C. Altoona Area School District

Mailing Address Stevens Building
200 E Crawford Avenue, Rear

City Altoona State PA Zip Code 16802

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2509
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

31.58

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Payroll Ta-
xes

SUBTOTAL of Disbursements This Page (optional) ▶

150.15

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Hollidaysburg Area School District

Mailing Address 201 Jackson Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2510
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

7.55

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Payroll Ta-
xes

Full Name (Last, First, Middle Initial)
B. The Borough of Hollidaysburg

Mailing Address 401 Blair Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2511
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

0.80

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Payroll Ta-
xes

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

Mailing Address One Sheraton Drive

City Altoona State PA Zip Code 16801

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2513
Date of Disbursement

01 / 26 / 2004

Amount of Each Disbursement this Period

695.88

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Fundraising

SUBTOTAL of Disbursements This Page (optional) ▶

713.23

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Times Tribune Printers

Mailing Address Green Avenue and 9th Street
PO Box 431

City Altoona State PA Zip Code 16603

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

006
Category/
Type

Transaction ID: SB17-EX2514
Date of Disbursement

01 / 26 / 2004

Amount of Each Disbursement this Period

3470.02

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Campaign Materials Campaign
Literature

Full Name (Last, First, Middle Initial)
B. Jaffa Sports Show

Mailing Address PO Box 1984

City Altoona State PA Zip Code 16603

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

007
Category/
Type

Transaction ID: SB17-EX2515
Date of Disbursement

01 / 26 / 2004

Amount of Each Disbursement this Period

225.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Campaign Event Expenses
Voter Registration Materials
or Services

Full Name (Last, First, Middle Initial)
C. The Shoppers Guide

Mailing Address PO Box 493

City Bedford State PA Zip Code 15522

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

004
Category/
Type

Transaction ID: SB17-EX2516
Date of Disbursement

01 / 26 / 2004

Amount of Each Disbursement this Period

103.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Advertising Expenses Print
Ads

SUBTOTAL of Disbursements This Page (optional) ▶

3798.02

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Trail Blazer Campaign Services, Inc.

Mailing Address 5115 Excelsior Blvd Suite 103

City Minneapolis State MN Zip Code 55416

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2517
Date of Disbursement

01 / 26 / 2004

Amount of Each Disbursement this Period

70.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

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

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2518
Date of Disbursement

01 / 26 / 2004

Amount of Each Disbursement this Period

692.60

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Campaign
Workers' Salaries

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

Mailing Address 610 Garber Street

City Hollidaysburg State PA Zip Code 16848

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2519
Date of Disbursement

01 / 26 / 2004

Amount of Each Disbursement this Period

232.52

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Campaign
Workers' Salaries

SUBTOTAL of Disbursements This Page (optional) ▶

995.12

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. M&T Bank

Mailing Address 301 West Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2520

Date of Disbursement

01 / 26 / 2004

Amount of Each Disbursement this Period

552.58

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Payroll Ta-
xes

Full Name (Last, First, Middle Initial)

B. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2521

Date of Disbursement

01 / 27 / 2004

Amount of Each Disbursement this Period

413.38

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

C. Ciocca Benton & Company, P.C.

Mailing Address PO Box 1473

City Altoona State PA Zip Code 16603

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2522

Date of Disbursement

01 / 27 / 2004

Amount of Each Disbursement this Period

26.48

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Profession-
al Services

SUBTOTAL of Disbursements This Page (optional) ▶

992.42

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. MailPro Inc

Mailing Address PO Box 664

City Duncansville State PA Zip Code 16835

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

006
 Category/
 Type

Transaction ID: SB17-EX2523

Date of Disbursement

01 / 27 / 2004

Amount of Each Disbursement this Period

3190.60

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Campaign Mailings

Full Name (Last, First, Middle Initial)

B. Raymond Zaborney

Mailing Address 16 North Shamokin Street

City Shamokin State PA Zip Code 17872

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

003
 Category/
 Type

Transaction ID: SB17-EX2525

Date of Disbursement

01 / 30 / 2004

Amount of Each Disbursement this Period

5000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Solicitation and Fundraising Expenses Campaign Consultant

Full Name (Last, First, Middle Initial)

C. Greener And Hook

Mailing Address 1875 Eye Street NW Suite 540

City Washington State DC Zip Code 20008

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

004
 Category/
 Type

Transaction ID: SB17-EX2526

Date of Disbursement

01 / 30 / 2004

Amount of Each Disbursement this Period

5000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Advertising Expenses Media

SUBTOTAL of Disbursements This Page (optional) ▶

13190.60

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Campaign Resource Strategies

Mailing Address 25452 Brickell Drive

City Chantilly State VA Zip Code 20152

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2527
Date of Disbursement

02 / 01 / 2004

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Campaign Con-
sultant

Full Name (Last, First, Middle Initial)
B. Assoc General Contractors

Mailing Address 333 John Carlyle Street Suite 200

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2528
Date of Disbursement

02 / 04 / 2004

Amount of Each Disbursement this Period

75.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Fundraising

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

Mailing Address PO Box 94081

City Palatine State IL Zip Code 60094

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2529
Date of Disbursement

02 / 06 / 2004

Amount of Each Disbursement this Period

97.37

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

2172.37

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2530

Date of Disbursement

02 / 06 / 2004

Amount of Each Disbursement this Period

68.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

Full Name (Last, First, Middle Initial)

B. McCartneys

Mailing Address 819 Howard Avenue
PO Box 1714

City Altoona State PA Zip Code 16603

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2531

Date of Disbursement

02 / 06 / 2004

Amount of Each Disbursement this Period

165.25

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

C. Verizon

Mailing Address PO Box 8585

City Philadelphia State PA Zip Code 19173

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2532

Date of Disbursement

02 / 06 / 2004

Amount of Each Disbursement this Period

208.28

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Telephone

SUBTOTAL of Disbursements This Page (optional) ▶

442.53

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 17464

City Baltimore State MD Zip Code 21297

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2533

Date of Disbursement

02 / 06 / 2004

Amount of Each Disbursement this Period

108.89

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Telephone

Full Name (Last, First, Middle Initial)

B. MailPro Inc

Mailing Address PO Box 664

City Duncansville State PA Zip Code 16835

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

008
Category/
Type

Transaction ID: SB17-EX2535

Date of Disbursement

02 / 06 / 2004

Amount of Each Disbursement this Period

920.70

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Campaign Materials Campai-
gn Mailings

Full Name (Last, First, Middle Initial)

C. IS2 Technologies, Inc.

Mailing Address 3018 Pleasant Valley Blvd

City Altoona State PA Zip Code 16802

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2536

Date of Disbursement

02 / 09 / 2004

Amount of Each Disbursement this Period

80.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

1109.59

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Amy Hanna

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2537
Date of Disbursement

02 / 09 / 2004

Amount of Each Disbursement this Period

702.60

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Campaign
Workers' Salaries

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

Mailing Address 610 Garber Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2538
Date of Disbursement

02 / 09 / 2004

Amount of Each Disbursement this Period

119.06

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Campaign
Workers' Salaries

Full Name (Last, First, Middle Initial)
C. Debbie Shuster King

Mailing Address 530 Garber Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2540
Date of Disbursement

02 / 09 / 2004

Amount of Each Disbursement this Period

75.05

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Fundraising

SUBTOTAL of Disbursements This Page (optional) ▶

896.71

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Political Marketing International, Inc.

Mailing Address 3172 N. Rainbow Blvd-#211

City Las Vegas State NV Zip Code 89108

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

004
Category/
Type

Transaction ID: SB17-EX2541
Date of Disbursement

02 / 13 / 2004

Amount of Each Disbursement this Period

400.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Advertising Expenses Media

Full Name (Last, First, Middle Initial)
B. Indiana Co. Chamber of Commerce

Mailing Address 1019 Philadelphia Street

City Indiana State PA Zip Code 15701

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

007
Category/
Type

Transaction ID: SB17-EX2542
Date of Disbursement

02 / 13 / 2004

Amount of Each Disbursement this Period

150.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Campaign Event Expenses
Voter Registration Materials
or Services

Full Name (Last, First, Middle Initial)
C. Franklin Co Republican Committee

Mailing Address Suite 293 South Gate Mall

City Chambersburg State PA Zip Code 17201

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

004
Category/
Type

Transaction ID: SB17-EX2543
Date of Disbursement

02 / 13 / 2004

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Advertising Expenses Print
Ads

SUBTOTAL of Disbursements This Page (optional) ▶

1050.00

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Ciocca Benton & Company, P.C.

Mailing Address PO Box 1473

City Altoona State PA Zip Code 16603

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2545
Date of Disbursement

02 / 13 / 2004

Amount of Each Disbursement this Period

3250.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Profession-
al Services

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

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2546
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

702.60

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Campaign
Workers Salaries

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

Mailing Address 3434 Route 764 Sugar Run Plaza

City Duncansville State PA Zip Code 16835

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2547
Date of Disbursement

02 / 16 / 2004

Amount of Each Disbursement this Period

1200.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Taxi/Car/-
Bus Expense

SUBTOTAL of Disbursements This Page (optional) ▶

5152.60

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Patricia Manning

Mailing Address 610 Garber Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2548
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

284.89

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Campaign
Workers' Salaries

Full Name (Last, First, Middle Initial)
B. M&T Bank

Mailing Address 301 West Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2548
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

573.70

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Payroll Ta-
xes

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

Mailing Address 2200 Beale Avenue

City Altoona State PA Zip Code 16601

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2550
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

58.95

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Utilities

SUBTOTAL of Disbursements This Page (optional) ▶

918.63

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. AT/T Wireless Services

Mailing Address PO 944039

City Maitland State FL Zip Code 32794

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2551

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

307.86

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Telephone

Full Name (Last, First, Middle Initial)

B. Amy Hanna

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2552

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

519.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

C. Altoona Neon And Sign

Mailing Address 809 S Tenth Street

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

004
Category/
Type

Transaction ID: SB17-EX2553

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

190.80

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Advertising Expenses Print
Ads

SUBTOTAL of Disbursements This Page (optional) ▶

1017.66

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. State Farm Insurance

Mailing Address 715 Lexington Avenue

City Altoona State PA Zip Code 16601

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2554
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

258.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Insurance

Full Name (Last, First, Middle Initial)
B. Mark and Rebecca Schaffer

Mailing Address 1501 Bass Lake Road

City Holly Springs State NC Zip Code 27540

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2555
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

200.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Rent

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

Mailing Address 3928 Broad Avenue

City Altoona State PA Zip Code 16601

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2556
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

4333.70

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Fundraising

SUBTOTAL of Disbursements This Page (optional) ▶

4791.70

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. DSK Consultants

Mailing Address 530 Garber Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2557

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

2042.50

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Campaign Con-
sultant

Full Name (Last, First, Middle Initial)

B. AfterDark Productions

Mailing Address 82 Duff Drive

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2558

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

125.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Fundraising

Full Name (Last, First, Middle Initial)

C. WRTA AM News/Talk

Mailing Address 1419 12th Avenue

City Altoona State PA Zip Code 16603

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

004
Category/
Type

Transaction ID: SB17-EX2559

Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

190.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Advertising Expenses Radio
Ads

SUBTOTAL of Disbursements This Page (optional) ▶

2357.50

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. United Parcel Service

Mailing Address PO Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2560

Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

20.48

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

Full Name (Last, First, Middle Initial)

B. Ann's T. D. Restaurant

Mailing Address 205 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

002
Category/
Type

Transaction ID: SB17-EX2561

Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

1435.43

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)

C. Cherryhill Associates Inc

Mailing Address 721 N. Juniata Street
Suite 100

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

003
Category/
Type

Transaction ID: SB17-EX2562

Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

750.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Fundraising

SUBTOTAL of Disbursements This Page (optional) ▶

2205.91

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Cherryhill Associates Inc

Mailing Address 721 N. Juniata Street
Suite 10D

City Hollidaysburg State PA Zip Code 16848

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2563

Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

644.48

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Fundraising

Full Name (Last, First, Middle Initial)

B. Raymond Zabomey

Mailing Address 16 North Shamokin Street

City Shamokin State PA Zip Code 17872

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2564

Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

20.25

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Parking
And Tolls

Full Name (Last, First, Middle Initial)

C. Raymond Zabomey

Mailing Address 16 North Shamokin Street

City Shamokin State PA Zip Code 17872

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2565

Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

150.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Filing Fees

SUBTOTAL of Disbursements This Page (optional) ▶

814.73

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

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

Mailing Address 16 North Shamokin Street

City Shamokin State PA Zip Code 17872

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2568
Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

258.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

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

Mailing Address 16 North Shamokin Street

City Shamokin State PA Zip Code 17872

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2567
Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

548.78

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

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

Mailing Address 16 North Shamokin Street

City Shamokin State PA Zip Code 17872

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

003
Category/
Type

Transaction ID: SB17-EX2570
Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

5000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Campaign Con-
sultant

SUBTOTAL of Disbursements This Page (optional) ▶

5807.78

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

A. Greener And Hook

Full Name (Last, First, Middle Initial)
 Greener And Hook

Mailing Address 1875 Eye Street NW
 Suite 54D

City Washington State DC Zip Code 20006

Purpose of Disbursement Expenditure
 Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

004
 Category/
 Type

Transaction ID: SB17-EX2571
 Date of Disbursement
 02 / 25 / 2004

Amount of Each Disbursement this Period
 5000.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Advertising Expenses Media

B. Bedford Co. Twp Officials Assoc

Full Name (Last, First, Middle Initial)
 Bedford Co. Twp Officials Assoc

Mailing Address 5735 Chaneyville Road

City Clearville State PA Zip Code 15835

Purpose of Disbursement Expenditure
 Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

004
 Category/
 Type

Transaction ID: SB17-EX2572
 Date of Disbursement
 02 / 25 / 2004

Amount of Each Disbursement this Period
 100.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Advertising Expenses Print
 Ads

C. Huntingdon Co. Republican Comm

Full Name (Last, First, Middle Initial)
 Huntingdon Co. Republican Comm

Mailing Address PO Box 61

City Huntingdon State PA Zip Code 16852

Purpose of Disbursement Expenditure
 Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

004
 Category/
 Type

Transaction ID: SB17-EX2574
 Date of Disbursement
 02 / 25 / 2004

Amount of Each Disbursement this Period
 100.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Advertising Expenses Print
 Ads

SUBTOTAL of Disbursements This Page (optional) ▶ **5200.00**

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
 A. The Ben Franklin Society

Mailing Address 3656 Edenville Road

City Chambersburg State PA Zip Code 17201

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2575
 Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

300.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Due

Full Name (Last, First, Middle Initial)
 B. Capitol Promotions Inc.

Mailing Address 2362 Oakdale Avenue
 PO Box 231

City Glenside State PA Zip Code 19038

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

007
 Category/
 Type

Transaction ID: SB17-EX2577
 Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

208.20

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Campaign Event Expenses
 Campaign Supplies

Full Name (Last, First, Middle Initial)
 C. Capitol Promotions Inc.

Mailing Address 2362 Oakdale Avenue
 PO Box 231

City Glenside State PA Zip Code 19038

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

007
 Category/
 Type

Transaction ID: SB17-EX2578
 Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

5148.80

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Campaign Event Expenses
 Campaign Supplies

SUBTOTAL of Disbursements This Page (optional) ▶

5658.00

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Political Marketing International, Inc.

Mailing Address 3172 N. Rainbow Blvd-#211

City Las Vegas State NV Zip Code 89108

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

005
 Category/
 Type

Transaction ID: SB17-EX2579
 Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

599.96

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Polling Expenses Polling Costs

Full Name (Last, First, Middle Initial)
B. US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2580
 Date of Disbursement

03 / 04 / 2004

Amount of Each Disbursement this Period

187.81

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Postage

Full Name (Last, First, Middle Initial)
C. Blair Co Republican Committee

Mailing Address 1810 23rd Avenue

City Altoona State PA Zip Code 16801

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

004
 Category/
 Type

Transaction ID: SB17-EX2581
 Date of Disbursement

03 / 04 / 2004

Amount of Each Disbursement this Period

800.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Advertising Expenses Print Ads

SUBTOTAL of Disbursements This Page (optional) ▶

1587.77

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Blair Co Republican Committee

Mailing Address 1810 23rd Avenue

City Altoona State PA Zip Code 16601

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

004
Category/
Type

Transaction ID: SB17-EX2582
Date of Disbursement

03 / 04 / 2004

Amount of Each Disbursement this Period

250.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Advertising Expenses Print
Ads

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

Mailing Address 2710 Quebec Street, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2584
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

2.25

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Parking
And Tolls

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

Mailing Address 2710 Quebec Street, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2583
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

31.15

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

SUBTOTAL of Disbursements This Page (optional) ▶

283.40

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Cherryhill Associates Inc

Mailing Address 721 N. Juniata Street
 Suite 100

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

003
 Category/
 Type

Transaction ID: SB17-EX2585
 Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

750.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Solicitation and Fundrais-
 ing Expenses Fundraising

Full Name (Last, First, Middle Initial)

B. Cherryhill Associates Inc

Mailing Address 721 N. Juniata Street
 Suite 100

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

003
 Category/
 Type

Transaction ID: SB17-EX2586
 Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

830.25

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Solicitation and Fundrais-
 ing Expenses Fundraising

Full Name (Last, First, Middle Initial)

C. Greener And Hook

Mailing Address 1875 Eye Street NW
 Suite 540

City Washington State DC Zip Code 20008

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

004
 Category/
 Type

Transaction ID: SB17-EX2587
 Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

15000.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Advertising Expenses Media

SUBTOTAL of Disbursements This Page (optional) ▶

16580.25

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)

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

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

Full Name (Last, First, Middle Initial)
A. Greener And Hook

Mailing Address 1875 Eye Street NW
Suite 54D

City Washington State DC Zip Code 20006

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2589
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

259.71

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Telephone

Full Name (Last, First, Middle Initial)
B. Pathfinder Communications, LLC

Mailing Address 603 Swedesford Road
Swedesford Corporate Center

City Malvern State PA Zip Code 19355

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

008
Category/
Type

Transaction ID: SB17-EX2590
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

4145.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Campaign Materials Campai-
gn Literature

Full Name (Last, First, Middle Initial)
C. Campaign Resource Strategies

Mailing Address 25452 Brickell Drive

City Chantilly State VA Zip Code 20152

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2591
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Campaign Con-
sultant

SUBTOTAL of Disbursements This Page (optional) ▶

6404.71

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Campaign Resource Strategies

Mailing Address 25452 Brickell Drive

City Chantilly State VA Zip Code 20152

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2592
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

92.50

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

Full Name (Last, First, Middle Initial)
B. Campaign Resource Strategies

Mailing Address 25452 Brickell Drive

City Chantilly State VA Zip Code 20152

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2593
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

234.08

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Fundraising

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

Mailing Address PO Box 17484

City Baltimore State MD Zip Code 21287

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2594
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

142.27

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Telephone

SUBTOTAL of Disbursements This Page (optional) ▶

468.85

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. John Kurtz

Mailing Address 303 Laurel Street

City Bellwood State PA Zip Code 16617

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

002
 Category/
 Type

Transaction ID: SB17-EX2595
 Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

5.40

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Travel Expenses Parking
 And Tolls

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

Mailing Address 303 Laurel Street

City Bellwood State PA Zip Code 16617

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2596
 Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

120.31

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Vehicle Ex-
 penses

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

Mailing Address 303 Laurel Street

City Bellwood State PA Zip Code 16617

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

002
 Category/
 Type

Transaction ID: SB17-EX2597
 Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

93.07

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

218.78

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. John Kurtz

Mailing Address 303 Laurel Street

City Bellwood State PA Zip Code 16617

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2598
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

29.91

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

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

Mailing Address 303 Laurel Street

City Bellwood State PA Zip Code 16617

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2598
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

207.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

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

Mailing Address B Overlook Drive

City Hollidaysburg State PA Zip Code 16848

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2601
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

32.88

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

263.79

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House
Senate
President

Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2602
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

17.79

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

Full Name (Last, First, Middle Initial)
B. Bi-Lo Foods

Mailing Address Orchard Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House
Senate
President

Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2603
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

2.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Petty Cash

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

Mailing Address Walmart Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House
Senate
President

Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2604
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

55.17

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Petty Cash

SUBTOTAL of Disbursements This Page (optional) ▶

74.96

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Sheetz Inc

Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2605

Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

17.25

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Vehicle Expenses

Full Name (Last, First, Middle Initial)

B. Bi-Lo Foods

Mailing Address Orchard Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2606

Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

2.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Petty Cash

Full Name (Last, First, Middle Initial)

C. US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16848

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2607

Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

13.65

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Postage

SUBTOTAL of Disbursements This Page (optional) ▶

32.90

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2608
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

2.43

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)
B. Wick Copy Center

Mailing Address 503 E Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2608
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

51.52

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)
C. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2610
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

24.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

77.95

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Amy Hanna

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2613
Date of Disbursement

03 / 08 / 2004

Amount of Each Disbursement this Period

702.60

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Campaign
Workers' Salaries

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

Mailing Address 610 Garber Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2614
Date of Disbursement

03 / 08 / 2004

Amount of Each Disbursement this Period

435.30

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Campaign
Workers' Salaries

Full Name (Last, First, Middle Initial)
C. The Tarrance Group

Mailing Address 201 North Union Street Suite 410

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

005
Category/
Type

Transaction ID: SB17-EX2615
Date of Disbursement

03 / 08 / 2004

Amount of Each Disbursement this Period

22115.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Polling Expenses Polling
Costs

SUBTOTAL of Disbursements This Page (optional) ▶

23252.99

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

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Patricia Manning

Mailing Address 610 Garber Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2616
Date of Disbursement

03 / 08 / 2004

Amount of Each Disbursement this Period

19.32

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Vehicle Expenses

Full Name (Last, First, Middle Initial)
B. Campaign Resource Strategies

Mailing Address 25452 Brickell Drive

City Chantilly State VA Zip Code 20152

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2617
Date of Disbursement

03 / 08 / 2004

Amount of Each Disbursement this Period

2298.28

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Solicitation and Fundraising Expenses Fundraising

Full Name (Last, First, Middle Initial)
C. Commercial Newspaper Service

Mailing Address 3050 South National Suite 104

City Springfield State MO Zip Code 65804

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

004
Category/
Type

Transaction ID: SB17-EX2619
Date of Disbursement

03 / 08 / 2004

Amount of Each Disbursement this Period

188.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Advertising Expenses Print Ads

SUBTOTAL of Disbursements This Page (optional) ▶

2487.55

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)

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| | | | | | | | |
|-------------------------------------|-----------|--------------------------|-----------|--------------------------|------------|--------------------------|-----------|
| <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. M&T Bank

Mailing Address 301 West Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2620

Date of Disbursement

01 / 09 / 2004

Amount of Each Disbursement this Period

10.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Bank Service Charge

Full Name (Last, First, Middle Initial)

B. Benjamin Hotel

Mailing Address 125 E. 50th Street

City New York State NY Zip Code 10022

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2621

Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

10.32

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Lodging

Full Name (Last, First, Middle Initial)

C. Benjamin Hotel

Mailing Address 125 E. 50th Street

City New York State NY Zip Code 10022

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2622

Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

785.90

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Lodging

SUBTOTAL of Disbursements This Page (optional) ▶

806.22

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Wal Mart Supercenter

Mailing Address Walmart Plaza

City Altoona State PA Zip Code 16601

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2623

Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

159.84

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

B. U.S. House Of Representatives

Mailing Address House Gift Shop
B-217 Longworth Bldg

City Washington State DC Zip Code 20515

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2624

Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

237.20

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

C. Best Buy

Mailing Address 6201 Arlington Blvd

City Falls Church State VA Zip Code 22041

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2625

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

1306.24

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

1703.28

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)

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|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
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| | 20a | | 20b | | 20c | | 21 |

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 17464

City Baltimore State MD Zip Code 21297

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2626

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

264.36

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Telephone

Full Name (Last, First, Middle Initial)

B. Shoppers Food & Pharmacy

Mailing Address 3801 Jefferson Davis Highway

City Alexandria State VA Zip Code 22305

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2627

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

67.74

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Office Exp-
 enses

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address Account Address

City Alexandria State VA Zip Code 00000

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2628

Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

35.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Bank Servi-
 ce Charge

SUBTOTAL of Disbursements This Page (optional) ▶

367.10

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address Account Address

City Alexandria State VA Zip Code 00000

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2629
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

21.50

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Bank Servi-
ce Charge

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address Account Address

City Alexandria State VA Zip Code 00000

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2630
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

75.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Bank Servi-
ce Charge

Full Name (Last, First, Middle Initial)

C. US Hotel Restaurant

Mailing Address 401 South Juniata Street

City Hollidaysburg State PA Zip Code 16848

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

002
Category/
Type

Transaction ID: SB17-EX2631
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

62.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

158.50

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Wal Mart Supercenter

Mailing Address Walmart Plaza

City Altoona State PA Zip Code 16601

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2632
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

60.23

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)
B. Capital Hill Suites

Mailing Address 200 C Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

002
Category/
Type

Transaction ID: SB17-EX2633
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

171.75

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Lodging

Full Name (Last, First, Middle Initial)
C. Hoss's Steak And Sea

Mailing Address Wye Switches

City Duncansville State PA Zip Code 16835

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

002
Category/
Type

Transaction ID: SB17-EX2634
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

40.18

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

272.16

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Sheetz Inc

Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2636
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

24.65

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

Full Name (Last, First, Middle Initial)
B. Capitol Hill Club

Mailing Address 300 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2636
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

19.21

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)
C. Pine Grill Inc

Mailing Address 800 N Center Avenue

City Somerset State PA Zip Code 15501

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2637
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

30.64

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

74.50

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. 1-800-Flowers.com

Mailing Address Website

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2638
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

47.94

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

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

Mailing Address 3200 Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2638
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

13.04

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)
C. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2640
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

32.16

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

93.14

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. TGI Fridays

Mailing Address Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2641

Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

25.29

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)

B. Sylvester Management Corp

Mailing Address PO Box 986

City Irmo State SC Zip Code 29063

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2642

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

350.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

C. The Miners Rest

Mailing Address B07 Fourth Avenue

City Patton State PA Zip Code 16868

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2643

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

51.55

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

426.84

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:
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| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| | 20a | | 20b | | 20c | | 21 |

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Sheetz Inc

Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2644

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

21.50

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

Full Name (Last, First, Middle Initial)

B. Sheetz Inc

Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2645

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

18.60

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

Full Name (Last, First, Middle Initial)

C. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2646

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

21.04

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

61.14

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Capitol Hill Club

Mailing Address 300 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2647

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

178.23

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)

B. Zachs Sports And Spirits

Mailing Address 5820 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2648

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

100.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)

C. Hilton Harrisburg and Towers

Mailing Address One North Second Street

City Harrisburg State PA Zip Code 17101

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2649

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

10.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

288.23

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Hilton Harrisburg and Towers

Mailing Address One North Second Street

City Harrisburg State PA Zip Code 17101

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2650
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

50.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)
B. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2651
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

12.87

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

Full Name (Last, First, Middle Initial)
C. Bob Evans Restaurant

Mailing Address Street Required

City Carlisle State PA Zip Code 17013

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2652
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

21.78

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

84.66

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Confertel

Mailing Address 2385 Camino Vida Roble
Suite 112

City Carlsbad State CA Zip Code 92009

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2853

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

76.18

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Telephone

Full Name (Last, First, Middle Initial)

B. US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2854

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

27.30

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

Full Name (Last, First, Middle Initial)

C. Fisaga's

Mailing Address 201 N. Second Street

City Harrisburg State PA Zip Code 17101

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2855

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

21.50

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

124.98

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Postal Express

Mailing Address 301 Union Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2656
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

7.40

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

Full Name (Last, First, Middle Initial)

B. Copy Rite

Mailing Address 301 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2657
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

74.20

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

C. US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2658
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

370.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

SUBTOTAL of Disbursements This Page (optional) ▶

451.60

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Wick Copy Center

Mailing Address 503 E Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2659
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

157.37

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)
B. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2660
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

85.62

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)
C. Wick Copy Center

Mailing Address 503 E Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2661
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

22.88

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

275.68

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Wick Copy Center

Mailing Address 503 E Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2662
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

14.42

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

B. Postal Express

Mailing Address 301 Union Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2663
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

36.94

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

Full Name (Last, First, Middle Initial)

C. Postal Express

Mailing Address 301 Union Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2664
Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

21.34

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

SUBTOTAL of Disbursements This Page (optional) ▶

72.70

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Wick Copy Center

Mailing Address 503 E Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2685

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

7.74

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

B. Wick Copy Center

Mailing Address 503 E Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2685

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

12.10

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

C. Giant Eagle

Mailing Address 518-520 W. Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2687

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

58.18

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

79.12

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. US Hotel Restaurant

Mailing Address 401 South Juniata Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2668

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

23.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)

B. Circuit City Stores Inc

Mailing Address 141 Sierra Drive

City Altoona State PA Zip Code 16601

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2668

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

445.16

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

C. Wick Copy Center

Mailing Address 503 E Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2670

Date of Disbursement

02 / 23 / 2004

Amount of Each Disbursement this Period

15.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

484.16

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. State Farm Insurance

Mailing Address 715 Lexington Avenue

City Altoona State PA Zip Code 16801

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2672
Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

482.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Insurance

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

Mailing Address PO Box 8585

City Philadelphia State PA Zip Code 19173

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2673
Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

324.42

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Telephone

Full Name (Last, First, Middle Initial)
C. IS2 Technologies, Inc.

Mailing Address 3018 Pleasant Valley Blvd

City Altoona State PA Zip Code 16802

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2674
Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

35.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

841.42

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Trail Blazer Campaign Services, Inc.

Mailing Address 5115 Excelsior Blvd Suite 103

City Minneapolis State MN Zip Code 55416

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2675
Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

300.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)
B. Cherry Communications Co.

Mailing Address 227 N. Bronough Street

City Tallahassee State FL Zip Code 32301

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

004
Category/
Type

Transaction ID: SB17-EX2676
Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

19200.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Advertising Expenses Media

Full Name (Last, First, Middle Initial)
C. Bishop Guilfoyle High School

Mailing Address 2210 16th Avenue

City Altoona State PA Zip Code 16801

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

004
Category/
Type

Transaction ID: SB17-EX2677
Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

100.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Advertising Expenses Print
Ads

SUBTOTAL of Disbursements This Page (optional) ▶

19600.00

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Campaign Resource Strategies

Mailing Address 25452 Brickell Drive

City Chantilly State VA Zip Code 20152

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2678
Date of Disbursement

03 / 10 / 2004

Amount of Each Disbursement this Period

855.36

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Fundraising

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

Mailing Address RR 2 Box 561

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2678
Date of Disbursement

01 / 06 / 2004

Amount of Each Disbursement this Period

60.34

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Telephone

Full Name (Last, First, Middle Initial)
C. Jaffa Circus Advertising

Mailing Address PO Box 1984

City Altoona State PA Zip Code 16803

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

004
Category/
Type

Transaction ID: SB17-EX2680
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

175.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Advertising Expenses Print
Ads

SUBTOTAL of Disbursements This Page (optional) ▶

1090.70

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Accurate Word LLC

Mailing Address PO Box 1765-White Plains Lane

City State Zip Code
White Plains MD 20695

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2681
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

459.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)
B. AT/T Wireless Services

Mailing Address PO 944039

City State Zip Code
Maitland FL 32704

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2682
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

432.94

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Telephone

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

Mailing Address 311 Stone Street

City State Zip Code
Osceola Mills PA 16868

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2683
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

96.22

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

988.16

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Marlene Bendon

Mailing Address 2502 Quail Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House
Senate
President

Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2684
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

122.82

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

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

Mailing Address 2502 Quail Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House
Senate
President

Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2685
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

16.17

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

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

Mailing Address 2324 Fourth Street

City Altoona State PA Zip Code 16601

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House
Senate
President

Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2686
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

131.10

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

SUBTOTAL of Disbursements This Page (optional) ▶

270.09

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Mark and Rebecca Schaffer

Mailing Address 1501 Bass Lake Road

City Holly Springs State NC Zip Code 27540

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2687
 Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

200.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Rent

Full Name (Last, First, Middle Initial)
B. Greener And Hook

Mailing Address 1875 Eye Street NW
 Suite 540

City Washington State DC Zip Code 20006

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

004
 Category/
 Type

Transaction ID: SB17-EX2688
 Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

5000.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Advertising Expenses Media

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

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16802

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2689
 Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

702.80

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Campaign
 Workers' Salaries

SUBTOTAL of Disbursements This Page (optional) ▶

5902.60

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Patricia Manning

Mailing Address 610 Garber Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2690
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

169.76

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Campaign
Workers' Salaries

Full Name (Last, First, Middle Initial)
B. M&T Bank

Mailing Address 301 West Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2691
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

631.30

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Payroll Ta-
xes

Full Name (Last, First, Middle Initial)
C. Greener And Hook

Mailing Address 1875 Eye Street NW
Suite 540

City Washington State DC Zip Code 20008

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

004
Category/
Type

Transaction ID: SB17-EX2694
Date of Disbursement

03 / 25 / 2004

Amount of Each Disbursement this Period

30980.82

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Advertising Expenses Media

SUBTOTAL of Disbursements This Page (optional) ▶

31761.88

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Amy Hanna

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

001
 Category/
 Type

Transaction ID: SB17-EX2695
 Date of Disbursement

03 / 25 / 2004

Amount of Each Disbursement this Period

17.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Vehicle Ex-
 penses

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

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

002
 Category/
 Type

Transaction ID: SB17-EX2696
 Date of Disbursement

03 / 25 / 2004

Amount of Each Disbursement this Period

11.80

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Travel Expenses Parking
 And Tolls

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

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

002
 Category/
 Type

Transaction ID: SB17-EX2697
 Date of Disbursement

03 / 25 / 2004

Amount of Each Disbursement this Period

134.08

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

162.88

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Amy Hanna

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2698
Date of Disbursement

03 / 25 / 2004

Amount of Each Disbursement this Period

21.76

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

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

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2698
Date of Disbursement

03 / 25 / 2004

Amount of Each Disbursement this Period

214.30

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

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

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2700
Date of Disbursement

03 / 25 / 2004

Amount of Each Disbursement this Period

150.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

386.06

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
 Polly Anna Gindlesperger

Mailing Address PO Box W

City Chambersburg State PA Zip Code 17201

Purpose of Disbursement Expenditure
 Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

Category/Type: 003

Transaction ID: SB17-EX2701
 Date of Disbursement
 03 / 25 / 2004

Amount of Each Disbursement this Period
 990.88

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Solicitation and Fundraising Expenses Fundraising

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

Mailing Address 143 North Ninth Street

City Indiana State PA Zip Code 15701

Purpose of Disbursement Expenditure
 Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

Category/Type: 001

Transaction ID: SB17-EX2703
 Date of Disbursement
 03 / 25 / 2004

Amount of Each Disbursement this Period
 341.55

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Vehicle Expenses

C. Full Name (Last, First, Middle Initial)
 Heather B Camp

Mailing Address 143 North Ninth Street

City Indiana State PA Zip Code 15701

Purpose of Disbursement Expenditure
 Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

Category/Type: 001

Transaction ID: SB17-EX2702
 Date of Disbursement
 03 / 25 / 2004

Amount of Each Disbursement this Period
 53.20

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Telephone

SUBTOTAL of Disbursements This Page (optional) ► **1385.63**

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

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 (check only one)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. DJS Food Designs Inc

Mailing Address The Casino and Snappy Chef
 30D Lakemont Park Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

003
 Category/
 Type

Transaction ID: SB17-EX2704
 Date of Disbursement

03 / 29 / 2004

Amount of Each Disbursement this Period

1984.32

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Solicitation and Fundrais-
 ing Expenses Fundraising

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address PO Box 17464

City Baltimore State MD Zip Code 21207

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2706
 Date of Disbursement

03 / 29 / 2004

Amount of Each Disbursement this Period

92.73

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Telephone

Full Name (Last, First, Middle Initial)

C. The Barash Group

Mailing Address PO Box 77

City State College State PA Zip Code 16804

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

004
 Category/
 Type

Transaction ID: SB17-EX2707
 Date of Disbursement

03 / 29 / 2004

Amount of Each Disbursement this Period

1694.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Advertising Expenses Media

SUBTOTAL of Disbursements This Page (optional) ▶

3771.05

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

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. O.K. Stuckey And Son

Mailing Address 400 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2709

Date of Disbursement

03 / 29 / 2004

Amount of Each Disbursement this Period

846.41

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

B. Blair Co Convention Center

Mailing Address 1 Convention Center Drive

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2710

Date of Disbursement

03 / 29 / 2004

Amount of Each Disbursement this Period

266.80

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Fundraising

Full Name (Last, First, Middle Initial)

C. US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2713

Date of Disbursement

03 / 30 / 2004

Amount of Each Disbursement this Period

7870.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

SUBTOTAL of Disbursements This Page (optional) ▶

8985.21

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

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Amy Hanna

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2714
Date of Disbursement

04 / 01 / 2004

Amount of Each Disbursement this Period

89.43

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

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

Mailing Address 2502 Quail Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2715
Date of Disbursement

04 / 01 / 2004

Amount of Each Disbursement this Period

2051.38

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Campaign
Workers' Salaries

Full Name (Last, First, Middle Initial)
C. Heather B Camp

Mailing Address 143 North Ninth Street

City Indiana State PA Zip Code 15701

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2716
Date of Disbursement

04 / 01 / 2004

Amount of Each Disbursement this Period

1731.76

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Campaign
Workers' Salaries

SUBTOTAL of Disbursements This Page (optional) ▶

3866.57

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

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

Mailing Address 16 North Shamokin Street

City Shamokin State PA Zip Code 17872

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2717
Date of Disbursement

04 / 01 / 2004

Amount of Each Disbursement this Period

5000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Campaign Con-
sultant

Full Name (Last, First, Middle Initial)
B. Pathfinder Communications, LLC

Mailing Address 603 Swedesford Road
Swedesford Corporate Center

City Malvern State PA Zip Code 19355

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

008
Category/
Type

Transaction ID: SB17-EX2718
Date of Disbursement

04 / 01 / 2004

Amount of Each Disbursement this Period

8235.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Campaign Materials Campai-
gn Literature

Full Name (Last, First, Middle Initial)
C. Cherry Communications Co.

Mailing Address 227 N. Bronough Street

City Tallahassee State FL Zip Code 32301

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

004
Category/
Type

Transaction ID: SB17-EX2719
Date of Disbursement

04 / 01 / 2004

Amount of Each Disbursement this Period

4010.88

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Advertising Expenses Media

SUBTOTAL of Disbursements This Page (optional) ▶

17245.88

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Cherryhill Associates Inc

Mailing Address 721 N. Juniata Street
Suite 100

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2720

Date of Disbursement

04 / 01 / 2004

Amount of Each Disbursement this Period

302.63

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Fundraising

Full Name (Last, First, Middle Initial)

B. Cherryhill Associates Inc

Mailing Address 721 N. Juniata Street
Suite 100

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2721

Date of Disbursement

04 / 01 / 2004

Amount of Each Disbursement this Period

750.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Fundraising

Full Name (Last, First, Middle Initial)

C. United Parcel Service

Mailing Address PO Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

0D1
Category/
Type

Transaction ID: SB17-EX2722

Date of Disbursement

04 / 01 / 2004

Amount of Each Disbursement this Period

17.88

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

SUBTOTAL of Disbursements This Page (optional) ▶

1070.52

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Charter Communications

Mailing Address 2200 Beale Avenue

City Altoona State PA Zip Code 16601

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House
Senate
President

Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2723
Date of Disbursement

04 / 01 / 2004

Amount of Each Disbursement this Period

59.95

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Utilities

Full Name (Last, First, Middle Initial)

B. Yankee Pit Barbeque

Mailing Address Lincoln Highway

City Bedford State PA Zip Code 15522

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House
Senate
President

Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2726
Date of Disbursement

04 / 02 / 2004

Amount of Each Disbursement this Period

100.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Fundraising

Full Name (Last, First, Middle Initial)

C. US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16848

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House
Senate
President

Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2727
Date of Disbursement

04 / 05 / 2004

Amount of Each Disbursement this Period

7355.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

SUBTOTAL of Disbursements This Page (optional) ▶

7514.95

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President

Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2728
 Date of Disbursement
 04 / 05 / 2004

Amount of Each Disbursement this Period
 1947.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
 head Expenses Postage

Full Name (Last, First, Middle Initial)
B. US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President

Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2728
 Date of Disbursement
 04 / 05 / 2004

Amount of Each Disbursement this Period
 23628.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
 head Expenses Postage

Full Name (Last, First, Middle Initial)
C. Campaign Resource Strategies

Mailing Address 25452 Brickell Drive

City Chanbilly State VA Zip Code 20152

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President

Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

003
 Category/
 Type

Transaction ID: SB17-EX2730
 Date of Disbursement
 04 / 05 / 2004

Amount of Each Disbursement this Period
 2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Solicitation and Fundrais-
 ing Expenses Campaign Con-
 sultant

SUBTOTAL of Disbursements This Page (optional) ▶ **27575.00**

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Campaign Resource Strategies

Mailing Address 25452 Brickell Drive

City Chantilly State VA Zip Code 20152

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
 Primary General
Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB17-EX2731
Date of Disbursement

04 / 05 / 2004

Amount of Each Disbursement this Period

617.70

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Campaign Con-
sultant

Full Name (Last, First, Middle Initial)
B. The Dream Restaurant

Mailing Address 1500 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
 Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2732
Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

57.15

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)
C. Trover Shop 1

Mailing Address 221 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
 Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2733
Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

26.38

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

701.23

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Microsoft Online Services

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2734
Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

59.95

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

B. Amazon.Com

Mailing Address on-line

City Redmond State WA Zip Code 00000

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2735
Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

13.40

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

C. Tortilla Coast

Mailing Address 400 First Street SE

City Washington State DC Zip Code 20001

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

002
Category/
Type

Transaction ID: SB17-EX2736
Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

78.43

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

151.87

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Exxon

Mailing Address 542 South Center Street

City Ebensburg State PA Zip Code 15931

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2737

Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

28.70

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

Full Name (Last, First, Middle Initial)

B. TGI Fridays

Mailing Address Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

002
Category/
Type

Transaction ID: SB17-EX2738

Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

163.80

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)

C. TGI Fridays

Mailing Address Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

002
Category/
Type

Transaction ID: SB17-EX2739

Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

25.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

217.59

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. TGI Fridays

Mailing Address Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President

Disbursement For: 2004

X Primary General

Other (specify) ▼

State: District

Transaction ID: SB17-EX2740
 Date of Disbursement
 03 / 15 / 2004

Amount of Each Disbursement this Period
 169.95

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)
B. Eds Steak House

Mailing Address RR 2

City Bedford State PA Zip Code 15522

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President

Disbursement For: 2004

X Primary General

Other (specify) ▼

State: District

Transaction ID: SB17-EX2741
 Date of Disbursement
 03 / 15 / 2004

Amount of Each Disbursement this Period
 26.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)
C. Courtyard By Marriott

Mailing Address 2 Convention Center Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President

Disbursement For: 2004

X Primary General

Other (specify) ▼

State: District

Transaction ID: SB17-EX2742
 Date of Disbursement
 03 / 15 / 2004

Amount of Each Disbursement this Period
 12.38

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Travel Expenses Lodging

SUBTOTAL of Disbursements This Page (optional) ► **208.42**

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Courtyard By Marriott

Mailing Address 2 Convention Center Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure
 Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

002
 Category/
 Type

Transaction ID: SB17-EX2743
 Date of Disbursement
 03 / 15 / 2004

Amount of Each Disbursement this Period
 980.17

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Travel Expenses Lodging

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

Mailing Address 542 South Center Street

City Ebensburg State PA Zip Code 15631

Purpose of Disbursement Expenditure
 Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

001
 Category/
 Type

Transaction ID: SB17-EX2744
 Date of Disbursement
 03 / 15 / 2004

Amount of Each Disbursement this Period
 31.41

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Vehicle Ex-
 penses

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

Mailing Address 415 14th Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Expenditure
 Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

002
 Category/
 Type

Transaction ID: SB17-EX2745
 Date of Disbursement
 03 / 15 / 2004

Amount of Each Disbursement this Period
 38.18

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ► **1050.77**

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Sheetz Inc

Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2746

Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

27.30

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

Full Name (Last, First, Middle Initial)

B. Sheetz Inc

Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2747

Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

21.65

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

Full Name (Last, First, Middle Initial)

C. Federal Document Clearing House, Inc

Mailing Address 1100 Mercantile Lane

City Upper Marlboro State MD Zip Code 20774

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2748

Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

62.32

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

111.27

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Tiffany & Company

Mailing Address 15 Sylvan Way

City Parsippany State NJ Zip Code 07054

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President

Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

Transaction ID: SB17-EX2749
 Date of Disbursement
 03 / 22 / 2004

Amount of Each Disbursement this Period
 133.22

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Office Expenses

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

Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President

Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

Transaction ID: SB17-EX2750
 Date of Disbursement
 03 / 22 / 2004

Amount of Each Disbursement this Period
 27.57

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Vehicle Expenses

Full Name (Last, First, Middle Initial)
C. The Dream Restaurant

Mailing Address 1500 Allegheny Street

City Hollidaysburg State PA Zip Code 16848

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President

Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

Transaction ID: SB17-EX2751
 Date of Disbursement
 03 / 22 / 2004

Amount of Each Disbursement this Period
 18.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶ **178.79**

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Confertel

Mailing Address 2385 Camino Vida Roble
 Suite 112

City Carlsbad State CA Zip Code 92009

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2752

Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

123.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Telephone

Full Name (Last, First, Middle Initial)

B. Wick Copy Center

Mailing Address 503 E Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2753

Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

75.60

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Office Exp-
 enses

Full Name (Last, First, Middle Initial)

C. Papa John's Pizza

Mailing Address 3014 Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

002
 Category/
 Type

Transaction ID: SB17-EX2754

Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

20.01

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

218.70

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
 A. US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2756
 Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

740.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Postage

Full Name (Last, First, Middle Initial)
 B. Papa John's Pizza

Mailing Address 3014 Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

002
 Category/
 Type

Transaction ID: SB17-EX2756
 Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

24.93

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)
 C. Eat n Park Restaurants

Mailing Address Orchard Plaza

City Altoona State PA Zip Code 16601

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

002
 Category/
 Type

Transaction ID: SB17-EX2757
 Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

11.18

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

776.12

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16802

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
 Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2758
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

124.49

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)
B. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16802

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
 Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2758
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

67.37

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)
C. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16802

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
 Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2760
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

36.11

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

227.97

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House
Senate
President

Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2761
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

132.37

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)
B. Staples-291 Altoona

Mailing Address Plank Road/Orchard Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House
Senate
President

Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2762
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

114.44

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)
C. US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16848

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House
Senate
President

Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2763
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

111.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

SUBTOTAL of Disbursements This Page (optional) ▶

357.81

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Sheetz Inc

Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2764
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

16.35

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Vehicle Ex-
penses

Full Name (Last, First, Middle Initial)
B. Eat n Park Restaurants

Mailing Address Orchard Plaza

City Altoona State PA Zip Code 16601

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

002
Category/
Type

Transaction ID: SB17-EX2765
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

16.40

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)
C. Fire True Value Hardware

Mailing Address 5514 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2766
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

168.28

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

201.13

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Wal Mart Supercenter

Mailing Address Walmart Plaza

City Altoona State PA Zip Code 16601

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President Disbursement For: 2004 X Primary General Other (specify) ▼

State: District

Transaction ID: SB17-EX2767
Date of Disbursement
03 / 22 / 2004

Amount of Each Disbursement this Period
39.16

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)
B. Wal Mart Supercenter

Mailing Address Walmart Plaza

City Altoona State PA Zip Code 16601

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President Disbursement For: 2004 X Primary General Other (specify) ▼

State: District

Transaction ID: SB17-EX2768
Date of Disbursement
03 / 22 / 2004

Amount of Each Disbursement this Period
58.30

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)
C. Wick Copy Center

Mailing Address 503 E Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President Disbursement For: 2004 X Primary General Other (specify) ▼

State: District

Transaction ID: SB17-EX2769
Date of Disbursement
03 / 22 / 2004

Amount of Each Disbursement this Period
41.81

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶ **139.27**

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Domino's Pizza

Mailing Address 738 Valley Street

City Lewistown State PA Zip Code 17044

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2770

Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

66.77

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)

B. Wal Mart Supercenter

Mailing Address WalMart Plaza

City Altoona State PA Zip Code 16601

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2771

Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

56.67

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)

C. Pizza Hut

Mailing Address 16476 Lincoln Highway

City Breezewood State PA Zip Code 15533

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2772

Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

131.91

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

255.35

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Sheetz Inc

Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2773

Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

6.37

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)

B. Red Lobster

Mailing Address 3330 Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2774

Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

25.67

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Travel Expenses Meals

Full Name (Last, First, Middle Initial)

C. Wick Copy Center

Mailing Address 503 E Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2775

Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

31.17

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Office Expenses

SUBTOTAL of Disbursements This Page (optional) ▶

63.21

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. Keystone Novelty

Mailing Address 1315 Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2776

Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

88.60

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

B. Fiore True Value Hardware

Mailing Address 5514 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2777

Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

62.53

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

C. K-Mart

Mailing Address 528 W Plank Road

City Altoona State PA Zip Code 16601

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

002
Category/
Type

Transaction ID: SB17-EX2778

Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

28.88

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Travel Expenses Meals

SUBTOTAL of Disbursements This Page (optional) ▶

181.01

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2779
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

1850.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

Full Name (Last, First, Middle Initial)
B. Wick Copy Center

Mailing Address 503 E Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2780
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

205.22

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)
C. Wick Copy Center

Mailing Address 503 E Plank Road

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2781
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

125.93

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

SUBTOTAL of Disbursements This Page (optional) ▶

2181.15

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
 A. Jimmy Duffy & Sons Catering

Mailing Address 1458 Lancaster Avenue

City State Zip Code
 Berwyn PA 19312

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

003
 Category/
 Type

Transaction ID: SB17-EX2782
 Date of Disbursement

04 / 06 / 2004

Amount of Each Disbursement this Period

1945.54

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Solicitation and Fundrais-
 ing Expenses Fundraising

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

Mailing Address Glades Pike Winery
 2208 Glades Pike

City State Zip Code
 Somerset PA 15501

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

003
 Category/
 Type

Transaction ID: SB17-EX2783
 Date of Disbursement

04 / 02 / 2004

Amount of Each Disbursement this Period

200.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Solicitation and Fundrais-
 ing Expenses Fundraising

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

Mailing Address 303 Laurel Street

City State Zip Code
 Bellwood PA 16817

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2784
 Date of Disbursement

04 / 05 / 2004

Amount of Each Disbursement this Period

102.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Office Exp-
 enses

SUBTOTAL of Disbursements This Page (optional) ▶

2247.63

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. CTIP/AdotNET

Mailing Address 5170 E. Trindle Road

City Mechanicsburg State PA Zip Code 17050

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2785

Date of Disbursement

04 / 05 / 2004

Amount of Each Disbursement this Period

31.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

Full Name (Last, First, Middle Initial)

B. Amy Hanna

Mailing Address 2917 Fifth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2786

Date of Disbursement

04 / 05 / 2004

Amount of Each Disbursement this Period

702.60

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Campaign
Workers' Salaries

Full Name (Last, First, Middle Initial)

C. Patricia Manning

Mailing Address 610 Garber Street

City Hollidaysburg State PA Zip Code 16848

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

001
Category/
Type

Transaction ID: SB17-EX2787

Date of Disbursement

04 / 05 / 2004

Amount of Each Disbursement this Period

92.61

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Campaign
Workers' Salaries

SUBTOTAL of Disbursements This Page (optional) ▶

826.21

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)

A. PA UC Fund

Mailing Address PO Box 60190

City Harrisburg State PA Zip Code 17106

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2788

Date of Disbursement

04 / 05 / 2004

Amount of Each Disbursement this Period

185.44

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Payroll Ta-
 xes

Full Name (Last, First, Middle Initial)

B. PA Department Of Revenue

Mailing Address DEPT 280414

City Harrisburg State PA Zip Code 17126

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2788

Date of Disbursement

04 / 05 / 2004

Amount of Each Disbursement this Period

216.17

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Payroll Ta-
 xes

Full Name (Last, First, Middle Initial)

C. Altoona Area School District

Mailing Address Stevens Building
 200 E Crawford Avenue, Rear

City Altoona State PA Zip Code 16802

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2790

Date of Disbursement

04 / 05 / 2004

Amount of Each Disbursement this Period

66.48

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Administrative/Salary/Ove-
 rhead Expenses Payroll Ta-
 xes

SUBTOTAL of Disbursements This Page (optional) ▶

468.09

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Hollidaysburg Area School District

Mailing Address 201 Jackson Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2791
 Date of Disbursement

04 / 05 / 2004

Amount of Each Disbursement this Period

15.04

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Payroll Taxes

Full Name (Last, First, Middle Initial)
B. The Borough of Hollidaysburg

Mailing Address 401 Blair Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2792
 Date of Disbursement

04 / 05 / 2004

Amount of Each Disbursement this Period

19.60

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Payroll Taxes

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

Mailing Address 610 Garber Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

001
 Category/
 Type

Transaction ID: SB17-EX2793
 Date of Disbursement

04 / 06 / 2004

Amount of Each Disbursement this Period

24.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Overhead Expenses Vehicle Expenses

SUBTOTAL of Disbursements This Page (optional) ▶

59.14

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. The U.S. Treasury

Mailing Address Office of Personnel & Benefits
B215 Longworth House Office

City Washington State DC Zip Code 20515

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2794
Date of Disbursement

04 / 06 / 2004

Amount of Each Disbursement this Period

105.95

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Office Exp-
enses

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

Mailing Address PO Box 8585

City Philadelphia State PA Zip Code 19173

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2795
Date of Disbursement

04 / 06 / 2004

Amount of Each Disbursement this Period

307.48

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Telephone

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

Mailing Address 530 Garber Street

City Hollidaysburg State PA Zip Code 16848

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General
Other (specify) ▼

003
Category/
Type

Transaction ID: SB17-EX2796
Date of Disbursement

04 / 06 / 2004

Amount of Each Disbursement this Period

450.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Solicitation and Fundrais-
ing Expenses Campaign Con-
sultant

SUBTOTAL of Disbursements This Page (optional) ▶

863.43

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Pathfinder Communications, LLC

Mailing Address 603 Swedesford Road
Swedesford Corporate Center
City Malvern State PA Zip Code 19355

Purpose of Disbursement Expenditure
Candidate Name
Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼
State: District

ODS
Category/
Type

Transaction ID: SB17-EX2797
Date of Disbursement

04 / 06 / 2004

Amount of Each Disbursement this Period

5240.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Campaign Materials Campaign
Literature

Full Name (Last, First, Middle Initial)
B. Pathfinder Communications, LLC

Mailing Address 603 Swedesford Road
Swedesford Corporate Center
City Malvern State PA Zip Code 19355

Purpose of Disbursement Expenditure
Candidate Name
Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼
State: District

ODS
Category/
Type

Transaction ID: SB17-EX2798
Date of Disbursement

04 / 06 / 2004

Amount of Each Disbursement this Period

5240.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Campaign Materials Campaign
Literature

Full Name (Last, First, Middle Initial)
C. Pathfinder Communications, LLC

Mailing Address 603 Swedesford Road
Swedesford Corporate Center
City Malvern State PA Zip Code 19355

Purpose of Disbursement Expenditure
Candidate Name
Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼
State: District

ODS
Category/
Type

Transaction ID: SB17-EX2799
Date of Disbursement

04 / 06 / 2004

Amount of Each Disbursement this Period

3985.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Campaign Materials Campaign
Literature

SUBTOTAL of Disbursements This Page (optional) ▶

14445.00

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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. United Parcel Service

Mailing Address PO Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
State: District
Disbursement For: 2004
X Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17-EX2800
Date of Disbursement

04 / 07 / 2004

Amount of Each Disbursement this Period

16.40

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Administrative/Salary/Ove-
rhead Expenses Postage

Full Name (Last, First, Middle Initial)
B. Greener And Hook

Mailing Address 1875 Eye Street NW
Suite 540

City Washington State DC Zip Code 20006

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
State: District
Disbursement For: 2004
X Primary General
Other (specify) ▼

004
Category/
Type

Transaction ID: SB17-EX2802
Date of Disbursement

04 / 07 / 2004

Amount of Each Disbursement this Period

85000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Advertising Expenses Media

Full Name (Last, First, Middle Initial)
C. John O Vartan

Mailing Address 3801 Vartan Way

City Harrisburg State PA Zip Code 17110

Purpose of Disbursement IN-KIND RECEIVED

Candidate Name

Office Sought: House Senate President
State: District
Disbursement For: 2004
X Primary General
Other (specify) ▼

Category/
Type

Transaction ID: SB17-CN3336
Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

896.80

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

In-Kind Received food and
beverage for fundraiser

SUBTOTAL of Disbursements This Page (optional) ▶

85913.20

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

395886.48

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 229 / 238

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Maria Parish Center-St. Rose of Lima

Mailing Address 5514 Roselawn Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

012
Category/
Type

Transaction ID: SB17-EX2473
Date of Disbursement

01 / 13 / 2004

Amount of Each Disbursement this Period

100.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Donations Donations

Full Name (Last, First, Middle Initial)
B. J.C. Blair Memorial Hospital Foundation

Mailing Address 1225 Warm Springs Avenue

City Huntingdon State PA Zip Code 16652

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

012
Category/
Type

Transaction ID: SB17-EX2474
Date of Disbursement

01 / 13 / 2004

Amount of Each Disbursement this Period

100.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Donations Donations

Full Name (Last, First, Middle Initial)
C. American Cancer Society

Mailing Address RR 1

City Huntingdon State PA Zip Code 16652

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

012
Category/
Type

Transaction ID: SB17-EX2512
Date of Disbursement

01 / 26 / 2004

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Donations Donations

SUBTOTAL of Disbursements This Page (optional) ▶

700.00

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)

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

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)
 Cumberland Co. Rep Party

Mailing Address 8 Stover Drive
 PO Box 1155

City Carlisle State PA Zip Code 17013

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

012
 Category/
 Type

Transaction ID: SB17-EX2524
 Date of Disbursement
 01 / 30 / 2004

Amount of Each Disbursement this Period
 250.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Donations Donations

B. Full Name (Last, First, Middle Initial)
 Hollidaysburg Area YMCA

Mailing Address Penn & Hewitt Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

012
 Category/
 Type

Transaction ID: SB17-EX2538
 Date of Disbursement
 02 / 09 / 2004

Amount of Each Disbursement this Period
 50.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Donations Promotional Tic-
 kets

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

Mailing Address PO Box 876

City Somerset State PA Zip Code 15501

Purpose of Disbursement Expenditure

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

012
 Category/
 Type

Transaction ID: SB17-EX2544
 Date of Disbursement
 02 / 13 / 2004

Amount of Each Disbursement this Period
 56.42

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Donations Donations

SUBTOTAL of Disbursements This Page (optional) ► **356.42**

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)

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| | | | |
|------------------------------------|------------------------------------|-------------------------------------|-----------------------------------------------|
| <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. Raymond Zabomey

Mailing Address 16 North Shamokin Street

City Shamokin State PA Zip Code 17872

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

012
Category/
Type

Transaction ID: SB17-EX2568
Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

105.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Donations Promotional Tic-
kets

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

Mailing Address 16 North Shamokin Street

City Shamokin State PA Zip Code 17872

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

012
Category/
Type

Transaction ID: SB17-EX2568
Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

323.47

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Donations Promotional Tic-
kets

Full Name (Last, First, Middle Initial)
C. Huntingdon Co. Republican Comm

Mailing Address PO Box 61

City Huntingdon State PA Zip Code 16852

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

012
Category/
Type

Transaction ID: SB17-EX2573
Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

250.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Donations Promotional Tic-
kets

SUBTOTAL of Disbursements This Page (optional) ▶

678.47

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)

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| | | | |
|------------------------------------|------------------------------------|-------------------------------------|-----------------------------------------------|
| <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 Council Of Republican Women

Mailing Address 1250 Oak Street

City Indiana State PA Zip Code 15701

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

012
Category/
Type

Transaction ID: SB17-EX2578
Date of Disbursement

02 / 25 / 2004

Amount of Each Disbursement this Period

175.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Donations Promotional Tic-
kets

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

Mailing Address 8 Overlook Drive

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

012
Category/
Type

Transaction ID: SB17-EX2600
Date of Disbursement

03 / 05 / 2004

Amount of Each Disbursement this Period

33.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Donations Promotional Tic-
kets

Full Name (Last, First, Middle Initial)
C. Diedrich for Congress

Mailing Address PO Box 500

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement
Expenditure

Candidate Name
Larry William Diedrich

Office Sought: X House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: SD District 1

011
Category/
Type

Transaction ID: SB17-EX2612
Date of Disbursement

03 / 08 / 2004

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Political Contributions
Political Contributions

SUBTOTAL of Disbursements This Page (optional) ▶

1208.00

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. William Shuster

Mailing Address 9 Overlook Drive

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

012
 Category/
 Type

Transaction ID: SB17-EX2618
 Date of Disbursement

03 / 08 / 2004

Amount of Each Disbursement this Period

24.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Donations Promotional Tic-
 kets

Full Name (Last, First, Middle Initial)
B. Committee to Elect Laub

Mailing Address PO Box 1347

City Lowistown State PA Zip Code 17044

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

011
 Category/
 Type

Transaction ID: SB17-EX2671
 Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Political Contributions
 Political Contributions

Full Name (Last, First, Middle Initial)
C. Juniata Co Republican Comm.

Mailing Address HCI 87 Box 8

City Mifflin State PA Zip Code 17058

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

012
 Category/
 Type

Transaction ID: SB17-EX2692
 Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

80.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Donations Promotional Tic-
 kets

SUBTOTAL of Disbursements This Page (optional) ▶

584.00

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)

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| | | | |
|------------------------------------|------------------------------------|-------------------------------------|-----------------------------------------------|
| <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. Morrison Cove Republican Club

Mailing Address RD 1 Box 426
Meadowside Acres

City Martinsburg State PA Zip Code 16662

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

012
Category/
Type

Transaction ID: SB17-EX2693
Date of Disbursement

03 / 22 / 2004

Amount of Each Disbursement this Period

375.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Donations Promotional Tic-
kets

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

Mailing Address Municipal Bldg
401 Blair Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

012
Category/
Type

Transaction ID: SB17-EX2705
Date of Disbursement

03 / 29 / 2004

Amount of Each Disbursement this Period

200.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Donations Donations

Full Name (Last, First, Middle Initial)
C. American Cancer Society

Mailing Address RR 1

City Huntingdon State PA Zip Code 16652

Purpose of Disbursement
Expenditure

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

012
Category/
Type

Transaction ID: SB17-EX2708
Date of Disbursement

03 / 29 / 2004

Amount of Each Disbursement this Period

50.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Donations Donations

SUBTOTAL of Disbursements This Page (optional) ▶

625.00

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)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial)
A. Indiana Co GOP Mens Club

Mailing Address 303 North Brady Street

City State Zip Code
 Blairsville PA 15717

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

012
 Category/
 Type

Transaction ID: SB17-EX2711
 Date of Disbursement

03 / 29 / 2004

Amount of Each Disbursement this Period

20.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Donations Promotional Tic-
 kets

Full Name (Last, First, Middle Initial)
B. Tyrone-Snyder Public Library

Mailing Address 1019 Logan Avenue

City State Zip Code
 Tyrone PA 16686

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

012
 Category/
 Type

Transaction ID: SB17-EX2712
 Date of Disbursement

03 / 29 / 2004

Amount of Each Disbursement this Period

50.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Donations Donations

Full Name (Last, First, Middle Initial)
C. YWCA of Altoona

Mailing Address 224 Union Avenue

City State Zip Code
 Altoona PA 16802

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

012
 Category/
 Type

Transaction ID: SB17-EX2724
 Date of Disbursement

04 / 01 / 2004

Amount of Each Disbursement this Period

76.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Donations Promotional Tic-
 kets

SUBTOTAL of Disbursements This Page (optional) ▶

146.00

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 236 / 238

| | | | |
|------------------------------------|------------------------------------|-------------------------------------|-----------------------------------------------|
| <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. Jaffa Mosque

Mailing Address Broad Avenue and 22nd Street

City Altoona State PA Zip Code 16601

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

012
 Category/
 Type

Transaction ID: SB17-EX2726

Date of Disbursement

04 / 01 / 2004

Amount of Each Disbursement this Period

50.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Donations Promotional Tic-
 kets

Full Name (Last, First, Middle Initial)

B. Transfer Junction

Mailing Address 3415 Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement
 Expenditure

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

012
 Category/
 Type

Transaction ID: SB17-EX2803

Date of Disbursement

04 / 07 / 2004

Amount of Each Disbursement this Period

407.55

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Donations Donations

SUBTOTAL of Disbursements This Page (optional) ▶

457.55

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

4755.44

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | |
|---------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| (Use separate schedule(s) for each numbered line) | PAGE 237 / 238 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

| | | | |
|--------------------------------------------------------------------------------------------|----------------------------|-----------------------------------------------------------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Holly MacKenzie | | Nature of Debt (Purpose): Invoice: Glades Pike event Solicitation | |
| Mailing Address 252 West Catherine Street | | | |
| City State ZIP Code Somerset PA 15501 | | | |
| Outstanding Balance Beginning This Period .00 | | Transaction ID: SD10-INV2735 | |
| Amount Incurred This Period 2008.24 | Payment This Period .00 | Outstanding Balance at Close of This Period 2008.24 | |

| | | | |
|---------------------------------------------------------------------------------------------|----------------------------|------------------------------------------------------------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Greener And Hook | | Nature of Debt (Purpose): Invoice: Invoice 2004-D4-98 TV shoot Adv | |
| Mailing Address 1875 Eye Street NW Suite 540 | | | |
| City State ZIP Code Washington DC 20006 | | | |
| Outstanding Balance Beginning This Period .00 | | Transaction ID: SD1D-INV2736 | |
| Amount Incurred This Period 10039.39 | Payment This Period .00 | Outstanding Balance at Close of This Period 10039.39 | |

| | | | |
|-----------------------------------------------------------------------------------------------|----------------------------|------------------------------------------------------------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Tarrance Group | | Nature of Debt (Purpose): Invoice: Survey of attitudes Invoice 446 | |
| Mailing Address 201 North Union Street Suite 410 | | | |
| City State ZIP Code Alexandria VA 22314 | | | |
| Outstanding Balance Beginning This Period .00 | | Transaction ID: SD1D-INV2734 | |
| Amount Incurred This Period 7977.00 | Payment This Period .00 | Outstanding Balance at Close of This Period 7977.00 | |

| | | |
|------------------------------------------------------------------------------------------------------|---|-----------------|
| 1) SUBTOTALS This Period This Page (optional) | ▶ | 20022.63 |
| 2) TOTALS This Period (last page this line number only) | ▶ | |
| 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only) | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

| | |
|---------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| (Use separate schedule(s) for each numbered line) | PAGE 238 / 238 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

| | | | |
|----------------------------------------------------------------------------------------|---------------------|---------------------------------------------------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Penn Woods Council | | Nature of Debt (Purpose): Invoice: Lansberry dinner Donations | |
| Mailing Address PO Box 352 | | | |
| City | State | ZIP Code | |
| Tire Hill | PA | 15959 | |
| Outstanding Balance Beginning This Period | | Transaction ID: SD10-INV2732 | |
| .00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 100.00 | .00 | 100.00 | |

| | | | |
|------------------------------------------------------------------------------------------|---------------------|-------------------------------------------------------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Donna J. Gambol, ABC | | Nature of Debt (Purpose): Invoice: Lombardo event Invoice 04-0407 | |
| Mailing Address 140 Montour Avenue | | | |
| City | State | ZIP Code | |
| Johnstown | PA | 15805 | |
| Outstanding Balance Beginning This Period | | Transaction ID: SD10-INV2733 | |
| .00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 1789.63 | .00 | 1789.63 | |

| | | |
|------------------------------------------------------------------------------------------------------|---|----------|
| 1) SUBTOTALS This Period This Page (optional) | ▶ | 1869.63 |
| 2) TOTALS This Period (last page this line number only) | ▶ | 21892.28 |
| 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only) | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |