

**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)

X October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

In the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period 07 01 2003 through 09 30 2003

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 12 11 2003

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 M} 0 7 ^{D D} 0 1 ^{Y Y Y Y} 2 0 0 3 To: ^{V M} 0 9 ^{D D} 3 0 ^{Y Y Y Y} 2 0 0 3

	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)).....	50715.00	307294.83
(b) Total Contribution Refunds (from Line 20(d)).....	.00	.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	50715.00	307294.83
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	65106.50	187905.51
(b) Total Offsets to Operating Expenditures (from Line 14).....	185.44	745.39
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	64921.06	187160.12
8. Cash on Hand at Close of Reporting Period (from Line 27).....	188430.53	
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).....	154.12	

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 D J Y ' ' ' ' 0 7 0 1 2 0 0 3

To: V V U J Y ' ' ' ' 0 9 3 0 2 0 0 3

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).....	26650.00	
(ii) Unitemized.....	2315.00	
(iii) TOTAL of contributions	28965.00	120850.00
from individuals..... ▶		
	.00	411.50
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACS).....	21750.00	186033.33
	.00	.00
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans)	50715.00	307294.83
(add Lines 11(a)(iii), (b), (c), and (d))		
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	.00	.00
(add Lines 13(a) and (b)).....		
14. OFFSETS TO OPERATING EXPENDITURES		
(Refunds, Rebates, etc.).....	185.44	745.39
15. OTHER RECEIPTS		
(Dividends, Interest, etc.).....	3500.00	3500.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)		
(Carry Total to Line 24, page 4)..... ▶	54400.44	311540.22

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.....	65106.50	187905.51
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.....	2913.65	4496.50
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	2913.65	4496.50
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
21. OTHER DISBURSEMENTS.....	8399.99	25117.99
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) [>]	76420.14	217520.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	210450.23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	54400.44
25. SUBTOTAL (add Line 23 and Line 24).....	264850.67
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	76420.14
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	188430.53

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 120	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Nicholas O Antonazzo		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 343 Diamond Blvd		Transaction ID: SA11Ai-CN2984
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 Crown American Realty	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. Terry L Stevens		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 146 Peggy Lane		Transaction ID: SA11Ai-CN3000
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 Crown American Realty Trust	Occupation Executive VP/CFO	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. Timothy M Tremel		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 1122 Blair Street		Transaction ID: SA11Ai-CN3002
City Portage	State PA	Zip Code 15548
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Crown American	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 ▼ 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 6 / 120

(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. Donato B Zucco		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 209 Watson Street		Transaction ID: SA11Ai-CN3004
City	State	Zip Code
Johnstown	PA	15805
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Crown American 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	

Full Name (Last, First, Middle Initial) B. Edith R Mellett		Date of Receipt M / D / Y 07 / 17 / 2003
Mailing Address 302 S Second Street Po Box 188		Transaction ID: SA11Ai-CN2923
City	State	Zip Code
Mc Connellsburg	PA	17233
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer none	Occupation homemaker	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. John R Stoner		Date of Receipt M / D / Y 07 / 14 / 2003
Mailing Address 7714 Renninger Road		Transaction ID: SA11Ai-CN2914
City	State	Zip Code
Mercersburg	PA	17234
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Retired Farmer	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	

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 7 / 120	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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. Jr. Robert A Gleason		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 522 Elknud Lane		Transaction ID: SA11Ai-CN2988
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 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 ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. Timothy D Hugo		Date of Receipt M / D / Y 07 / 21 / 2003
Mailing Address 8355 Sylvan Way		Transaction ID: SA11Ai-CN2927
City Clifton	State VA	Zip Code 20124
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CAPNET	Occupation Executive 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 ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Wayne M Peert		Date of Receipt M / D / Y 07 / 29 / 2003
Mailing Address 35 High Ridge Trail		Transaction ID: SA11Ai-CN2948
City Mechanicsburg	State PA	Zip Code 17050
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Keefe Wood Allen/Rehal 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 ▼ 500.00	

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 8 / 120	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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. Richard D Michael		Date of Receipt M / D / Y 07 / 31 / 2003
Mailing Address 436 Boas Street		Transaction ID: SA11Ai-CN2958
City Harrisburg	State PA	Zip Code 17102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Eckert Seaman's Chertn Mel- litt	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 Lehman		Date of Receipt M / D / Y 07 / 08 / 2003
Mailing Address 5900 Cumberland Hwy		Transaction ID: SA11Ai-CN2898
City Chambersburg	State PA	Zip Code 17201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Paul E Lehman Inc	Occupation Board 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 ▼ 200.00	

Full Name (Last, First, Middle Initial) C. Glenn Brandimonte		Date of Receipt M / D / Y 08 / 11 / 2003
Mailing Address 11 Linden Street		Transaction ID: SA11Ai-CN2974
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 ORX 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 ▼ 1000.00	

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: (check only one)		PAGE 9 / 120	
	<input checked="" 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 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. John N Kennedy		Date of Receipt M / D / Y 07 / 20 / 2003
Mailing Address 1807 North Second Street		Transaction ID: SA11Ai-CN2944
City Harrisburg	State PA	Zip Code 17102
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)(4)(1a)-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. Barry F Smith		Date of Receipt M / D / Y 07 / 08 / 2003
Mailing Address 181 Closson Road		Transaction ID: SA11Ai-CN2897
City Roaring Spring	State PA	Zip Code 16673
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Smith Transport	Occupation President/Owner	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 ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Donald E Wilkins		Date of Receipt M / D / Y 08 / 04 / 2003
Mailing Address 2200 Spring Garden Avenue		Transaction ID: SA11Ai-CN2985
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 Wilkins Graphic Inc	Occupation Executive	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 ▼ 1000.00	

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: (check only one)		PAGE 10 / 120	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Jerry L Spangler		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address PD Box 702		Transaction ID: SA11Ai-CN2999
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 Self	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. Frank Ashbridge		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 173 Wyndemere Drive		Transaction ID: SA11Ai-CN2995
City Johnstown	State PA	Zip Code 15904
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Ashbridge Oil Co	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	

Full Name (Last, First, Middle Initial) C. Stephen C Frobouek		Date of Receipt M / D / Y 07 / 17 / 2003
Mailing Address 1090 Fox Chapel Road		Transaction ID: SA11Ai-CN2924
City Pittsburgh	State PA	Zip Code 15238
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Anderson Group	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 ▼ 1000.00	

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: (check only one)		PAGE 11 / 120	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Angela C Guarino		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 18800 Little Star Lane		Transaction ID: SA11Ai-CN2989
City Germantown	State MD	Zip Code 20874
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Guarino Corporation	Occupation Owner/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. Lee Roberts		Date of Receipt M / D / Y 07 / 11 / 2003
Mailing Address 1022 Oak Grove Road		Transaction ID: SA11Ai-CN2903
City Breezewood	State PA	Zip Code 15533
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer L.R. Enterprises	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 ▼ 200.00	

Full Name (Last, First, Middle Initial) C. Galen G Weaber		Date of Receipt M / D / Y 07 / 08 / 2003
Mailing Address 1231 Mt Wilson Road		Transaction ID: SA11Ai-CN2894
City Lebanon	State PA	Zip Code 17042
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Weaber Inc.	Occupation Hardwood manufacturer	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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 / 120	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. John H Anderson		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 1734 Electra Drive		Transaction ID: SA11Ai-CN2983
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 Promislar	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	

Full Name (Last, First, Middle Initial) B. III Howard M Picking		Date of Receipt M / D / Y 09 / 25 / 2003
Mailing Address 100 Longview Lane		Transaction ID: SA11Ai-CN3028
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 The Picking Company	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 ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Dr. Ferdinand L. Stolson, Jr.		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 383 Red Oak Road Box 42505		Transaction ID: SA11Ai-CN2988
City Elinton	State PA	Zip Code 16640
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
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 ▼ 600.00	

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: (check only one)		PAGE 13 / 120	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Larry R Fischer		Date of Receipt M / D / Y 07 / 14 / 2008
Mailing Address 320 Lane Metal Road		Transaction ID: SA11Ai-CN2913
City New Paris	State PA	Zip Code 15554
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
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 ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Gordon A Nagle		Date of Receipt M / D / Y 07 / 29 / 2008
Mailing Address 121 River Street		Transaction ID: SA11Ai-CN2947
City Cressona	State PA	Zip Code 17929
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Schuylkill Products 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	

Full Name (Last, First, Middle Initial) C. Robert B Pfister		Date of Receipt M / D / Y 07 / 29 / 2008
Mailing Address P.O. Box 310		Transaction ID: SA11Ai-CN2952
City Honey Brook	State PA	Zip Code 19344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Sauders 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 ▼ 250.00	

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: (check only one)		PAGE 14 / 120	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Norman B Epstein		Date of Receipt M / D / Y 07 / 18 / 2003
Mailing Address 1020 Leidig Drive		Transaction ID: SA11Ai-CN2926
City Chambersburg	State PA	Zip Code 17201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Summit Health	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) B. Roger P Winn		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 736 Hench Street		Transaction ID: SA11Ai-CN3003
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 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Charles R Long		Date of Receipt M / D / Y 08 / 04 / 2003
Mailing Address 5811 Pinehurst Way		Transaction ID: SA11Ai-CN2968
City Mechanicsburg	State PA	Zip Code 17050
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer The Long Group Inc.	Occupation 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: (check only one)		PAGE 15 / 120	
	<input checked="" 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 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. James W Mack		Date of Receipt M / D / Y 07 / 20 / 2003
Mailing Address 455 E Derry Road		Transaction ID: SA11Ai-CN2945
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 ▼ 250.00	

Full Name (Last, First, Middle Initial) B. L Robert Kimball		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 819 W. Horner Street		Transaction ID: SA11Ai-CN2992
City Ebensburg	State PA	Zip Code 15831
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer L. Robert Kimball & Assoc	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 ▼ 750.00	

Full Name (Last, First, Middle Initial) C. Nancy P Campbell		Date of Receipt M / D / Y 07 / 11 / 2003
Mailing Address 187 Mountain View Drive		Transaction ID: SA11Ai-CN2908
City Hollidaysburg	State PA	Zip Code 16848
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
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 ▼ 500.00	

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: (check only one)		PAGE 16 / 120	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Lawrence K. Pettit		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 209 Saddlebrook Drive		Transaction ID: SA11Ai-CN2995
City Indiana	State PA	Zip Code 15701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer NEETC, 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 ▼ 200.00	

Full Name (Last, First, Middle Initial) B. Danni M. Stidinger		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 414 Old Farm Lane		Transaction ID: SA11Ai-CN3025
City Johnstown	State PA	Zip Code 15904
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)(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. Roy E. Ortenfeld		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 882 Smith Street		Transaction ID: SA11Ai-CN2987
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	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 ▼ 350.00	

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: (check only one)		PAGE 17 / 120	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Jr. LeRoy D Kline		Date of Receipt M / D / Y 07 / 20 / 2003
Mailing Address 1700 Olmsted Way West		Transaction ID: SA11Ai-CN2951
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	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. Eileen Barbara Melvin		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address P.O. Box 775 215 Wind Drift Lane		Transaction ID: SA11Ai-CN2994
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 Economic Development Concepts	Occupation 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 ▼ 750.00	

Full Name (Last, First, Middle Initial) C. Michael Boland		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 2279 W Bakersville-Edie Road		Transaction ID: SA11Ai-CN3009
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	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 ▼ 350.00	

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: (check only one)		PAGE 18 / 120	
	<input checked="" 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 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. Douglas P Dick		Date of Receipt M / D / Y 07 / 11 / 2003
Mailing Address Po Box 10898		Transaction ID: SA11Ai-CN2911
City Pittsburgh	State PA	Zip Code 15236
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Dick Corporation	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) B. MaryLou Lawruk		Date of Receipt M / D / Y 07 / 08 / 2003
Mailing Address 210 West Plank Road		Transaction ID: SA11Ai-CN2899
City Altoona	State PA	Zip Code 16802
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer none	Occupation Homemaker	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <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 Dick		Date of Receipt M / D / Y 07 / 11 / 2003
Mailing Address Po Box 18313		Transaction ID: SA11Ai-CN2912
City Pittsburgh	State PA	Zip Code 15236
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Dick Corporation	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 ▼ 500.00	

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: (check only one)		PAGE 10 / 120	
	<input checked="" 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 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. Krentzman		Date of Receipt M / D / Y 07 / 14 / 2008	
Mailing Address Po Box 508		Transaction ID: SA11Ai-CN2915	
City Lewistown	State PA	Zip Code 17044	Amount of Each Receipt this Period 1000.00
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 none		
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. Ronald J. Cominsky		Date of Receipt M / D / Y 07 / 29 / 2008	
Mailing Address 3 Dishley Drive		Transaction ID: SA11Ai-CN2949	
City Mechanicsburg	State PA	Zip Code 17055	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 PA Asphalt Pavement Assoc.	Occupation Executive Director		
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. Jr. Paul J. Bruder		Date of Receipt M / D / Y 07 / 29 / 2008	
Mailing Address 307 Fox Ridge Court		Transaction ID: SA11Ai-CN2950	
City Harrisburg	State PA	Zip Code 17102	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 Rhoads & Simon LLP	Occupation Attorney		
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)	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 20 / 120	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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. Steven C Glver		Date of Receipt M / D / Y 08 / 25 / 2008
Mailing Address Rr 4 Box 1 D6-b		Transaction ID: SA11Ai-CN2979
City Huntingdon	State PA	Zip Code 16852
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Mutual Benefit Group	Occupation .	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) B. Clifford A Barton		Date of Receipt M / D / Y 09 / 13 / 2008
Mailing Address 330 Old Clairton Road		Transaction ID: SA11Ai-CN3007
City Pittsburgh	State PA	Zip Code 15236
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Banker	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) C. Penn J Bodarocco		Date of Receipt M / D / Y 09 / 13 / 2008
Mailing Address 201 Furnari Avenue		Transaction ID: SA11Ai-CN3008
City Johnstown	State PA	Zip Code 15505
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
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 ▼ 250.00	

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 21 / 120	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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. Douglas Alan Gardner		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 800 Graham Avenue		Transaction ID: SA11Ai-CN3011
City	State	Zip Code
Windber	PA	15863
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Windber Medical Center	Occupation Executive	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	

Full Name (Last, First, Middle Initial) B. Louis G Galiker		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 922 Luzerne Street		Transaction ID: SA11Ai-CN3013
City	State	Zip Code
Johnstown	PA	15805
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Galiker's	Occupation President & Owner	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	

Full Name (Last, First, Middle Initial) C. William L Ingram		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 444 Luzerne Street		Transaction ID: SA11Ai-CN3015
City	State	Zip Code
Johnstown	PA	15805
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Thomas Chevrolet	Occupation Executive	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	

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: (check only one)		PAGE 22 / 120	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. MaryAnn Jacobs		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 2787 Carpenters Park Road		Transaction ID: SA11Ai-CN3017
City	State	Zip Code
Davidsville	PA	15868
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Hagerich Real Estate	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 ▼ 250.00	

Full Name (Last, First, Middle Initial) B. ThomasM Kurtz		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 124 Seminole Street		Transaction ID: SA11Ai-CN3018
City	State	Zip Code
Johnstown	PA	15804
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)(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. GeraldP Moore		Date of Receipt M / D / Y 09 / 13 / 2003
Mailing Address 202 S Third Street		Transaction ID: SA11Ai-CN3019
City	State	Zip Code
West Newton	PA	15089
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)(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 23 / 120	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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. Christian R Oravec		Date of Receipt M / D / Y 09 / 13 / 2009
Mailing Address PD Box 157		Transaction ID: SA11Ai-CN3022
City Loretto	State PA	Zip Code 15640
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer St. Francis University-Loretto	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 ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Jr Harber L Pfuhl		Date of Receipt M / D / Y 09 / 13 / 2009
Mailing Address 201 Derby Street		Transaction ID: SA11Ai-CN3023
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 City of Johnstown, PA	Occupation Mayor	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	

Full Name (Last, First, Middle Initial) C. Holly S Rigby		Date of Receipt M / D / Y 09 / 13 / 2009
Mailing Address 311 Thoburn Street		Transaction ID: SA11Ai-CN3024
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 Windber Medical Center	Occupation Executive	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	

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: (check only one)		PAGE 24 / 120	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Lisa Urigo		Date of Receipt M / D / Y 09 / 13 / 2009
Mailing Address 945 Mencher Blvd		Transaction ID: SA11Ai-CN3026
City	State	Zip Code
Johnstown	PA	15905
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer none	Occupation Homemaker	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. James Michael Vizini		Date of Receipt M / D / Y 09 / 13 / 2009
Mailing Address 714 Clark Street		Transaction ID: SA11Ai-CN3027
City	State	Zip Code
Johnstown	PA	15902
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)(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. James V Galy		Date of Receipt M / D / Y 09 / 25 / 2009
Mailing Address 1122 Havana Avenue		Transaction ID: SA11Ai-CN3030
City	State	Zip Code
Johnstown	PA	15904
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Barnes & Saly	Occupation Retired 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 ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	26650.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 / 120	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Victory		Date of Receipt M / D / Y 07 / 21 / 2003
Mailing Address Po Box 525		Transaction ID: SA11C-CN2928
City Saint Petersburg	State FL	Zip Code 33731
FEC ID number of contributing federal political committee. C C00344374		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. American Success		Date of Receipt M / D / Y 08 / 11 / 2003
Mailing Address 1155 21st Street NW Suite 300		Transaction ID: SA11C-CN2975
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C CD0336644		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. Duncan For Congress		Date of Receipt M / D / Y 08 / 11 / 2003
Mailing Address Po Box 2648		Transaction ID: SA11C-CN2973
City Knoxville	State TN	Zip Code 37501
FEC ID number of contributing federal political committee. C CD0229104		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	

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 26 / 120

(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. Volunteers For Shimkus		Date of Receipt M / D / Y 07 / 08 / 2003
Mailing Address Po Box 5458		Transaction ID: SA11C-CN2896
City Springfield	State IL	Zip Code 62705
FEC ID number of contributing federal political committee. C C00258855		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) B. EAPA		Date of Receipt M / D / Y 07 / 21 / 2003
Mailing Address 3 Crossgate Drive Suite 100		Transaction ID: SA11C-CN2896
City Mechanicsburg	State PA	Zip Code 17050
FEC ID number of contributing federal political committee. C CD0333542		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. Hershey Foods		Date of Receipt M / D / Y 08 / 14 / 2003
Mailing Address 100 Crystal A Drive		Transaction ID: SA11C-CN2978
City Hershey	State PA	Zip Code 17033
FEC ID number of contributing federal political committee. C CD0200139		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)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 / 120	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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 07 / 17 / 2003
Mailing Address 1800 Center Street		Transaction ID: SA11C-CN2925
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 ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Bushman Ingersoll PC		Date of Receipt M / D / Y 08 / 21 / 2003
Mailing Address 1 Oxford Center 20th Floor 301 Grant Street		Transaction ID: SA11C-CN2980
City Pittsburgh	State PA	Zip Code 15219
FEC ID number of contributing federal political committee. C CD0195388		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) C. American Hospital Association		Date of Receipt M / D / Y 07 / 29 / 2003
Mailing Address 325 Seventh Street NW		Transaction ID: SA11C-CN2953
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C CD0106148		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	

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: (check only one)		PAGE 28 / 120	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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 09 / 29 / 2008
Mailing Address 701 Pennsylvania Avenue NW Suite 115		Transaction ID: SA11C-CN3034
City Washington	State DC	Zip Code 20004
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. Allegheny Power		Date of Receipt M / D / Y 09 / 29 / 2008
Mailing Address 10435 Downsville Pike		Transaction ID: SA11C-CN3033
City Hagerstown	State MD	Zip Code 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 ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Lehigh Cement Company		Date of Receipt M / D / Y 08 / 04 / 2008
Mailing Address 7860 Imperial Way		Transaction ID: SA11C-CN2987
City Allentown	State PA	Zip Code 18155
FEC ID number of contributing federal political committee. C CD0224287		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)	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: (check only one)		PAGE 28 / 120	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Nisource Inc.		Date of Receipt M / D / Y 07 / 08 / 2008
Mailing Address 200 Civic Center Drive		Transaction ID: SA11C-CN2900
City Columbus	State OH	Zip Code 43215
FEC ID number of contributing federal political committee. C C00051879		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. BNSF Rail		Date of Receipt M / D / Y 07 / 08 / 2008
Mailing Address P.O. Box 981039		Transaction ID: SA11C-CN2901
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 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. FAA Managers Assoc Inc		Date of Receipt M / D / Y 07 / 11 / 2008
Mailing Address P.O. Box 872984		Transaction ID: SA11C-CN2909
City Wasilla	State AK	Zip Code 99687
FEC ID number of contributing federal political committee. C C00368070		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	

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: (check only one)		PAGE 30 / 120	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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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 07 / 07 / 2003
Mailing Address 100 Front Street Suite 1440 One Tower Bridge		Transaction ID: SA11C-CN2902
City Conshohocken	State PA	Zip Code 19428
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	

Full Name (Last, First, Middle Initial) B. Superior California		Date of Receipt M / D / Y 07 / 11 / 2003
Mailing Address 400 Capitol Mall Suite 1560		Transaction ID: SA11C-CN2910
City Sacramento	State CA	Zip Code 95814
FEC ID number of contributing federal political committee. C CD0317511		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. Society Of Ind Gasoline		Date of Receipt M / D / Y 07 / 21 / 2003
Mailing Address 11911 Freedom Drive Suite 590		Transaction ID: SA11C-CN2929
City Reston	State VA	Zip Code 20190
FEC ID number of contributing federal political committee. C CD0120030		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 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	8000.00
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: (check only one)		PAGE 31 / 120		
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Labionda For Congress		Date of Receipt M / D / Y 07 / 24 / 2008
Mailing Address Po Box 550		Transaction ID: SA11C-CN2938
City Vineland	State NJ	Zip Code 08360
FEC ID number of contributing federal political committee. C C00269340		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. American Motorcyclist		Date of Receipt M / D / Y 08 / 29 / 2008
Mailing Address 13515 Yarmouth Drive		Transaction ID: SA11C-CN2982
City Pickerington	State OH	Zip Code 43147
FEC ID number of contributing federal political committee. C C00120238		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. GSP Consulting Corp		Date of Receipt M / D / Y 09 / 25 / 2008
Mailing Address 100 West Station Square Drive Landmarks Building Suite 225		Transaction ID: SA11C-CN3031
City Pittsburgh	State PA	Zip Code 15219
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	

SUBTOTAL of Receipts This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	21750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 120			
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input checked="" type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Amy T. Libaski		Date of Receipt M / D / Y 08 / 10 / 2008
Mailing Address 588 Grant Street		Transaction ID: SA15-RC2624
City Indiana	State PA	Zip Code 15701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3500.00
Name of Employer	Occupation	Sale of 1997 Dodge Caravan
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

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

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 33 / 120

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. First National Bank		Transaction ID: SB19B-LP31 Date of Disbursement 07 / 15 / 2003	
Mailing Address 101 Lincoln Way West		Amount of Each Disbursement this Period 2913.65	
City Mc Connellsburg	State PA	Zip Code 17233	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Repay Loan		Category/ Type	
Candidate Name			Payment on Car Loan Acct #2000041785
Office Sought: House Senate President State: District	Disbursement For: 2002 Primary X General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	2913.65
TOTAL This Period (last page this line number only)	▶	2913.65

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 34 / 120
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. First National Bank		Transaction ID: SB17-LP31 Date of Disbursement 07 / 15 / 2003	
Mailing Address 101 Lincoln Way West		Amount of Each Disbursement this Period 35.86	
City Mc Connellsburg	State PA	Zip Code 17233	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Loan interest Expenditure		Category/ Type	
Candidate Name			Payment on Car Loan Acct #2000041785
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Charter Communications VI LLC		Transaction ID: SB17-EX2075 Date of Disbursement 07 / 03 / 2003	
Mailing Address 2200 Beale Avenue		Amount of Each Disbursement this Period 59.95	
City Altoona	State PA	Zip Code 16601	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		OD1 Category/ Type	
Candidate Name			Utilities Utilities
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. AT/T Wireless Services		Transaction ID: SB17-EX2074 Date of Disbursement 07 / 03 / 2003	
Mailing Address PO 944039		Amount of Each Disbursement this Period 261.19	
City Maitland	State FL	Zip Code 32794	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		OD1 Category/ Type	
Candidate Name			Telephone Telephone
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	357.00
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 35 / 120
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. The Duquesne Club		Transaction ID: SB17-EX2077 Date of Disbursement 07 / 03 / 2003	
Mailing Address PO Box 387			
City Pittsburgh	State PA	Zip Code 15230	Amount of Each Disbursement this Period 1236.35 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		003 Category/ Type	
Candidate Name		Fundraising Fundraising	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. NRCC		Transaction ID: SB17-EX2087 Date of Disbursement 07 / 02 / 2003	
Mailing Address 320 First Street SE			
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 12000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		Membership dues Dues	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Bendon		Transaction ID: SB17-EX2088 Date of Disbursement 07 / 03 / 2003	
Mailing Address 2502 Quail Avenue			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 15.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		Gasoline reimbursement Vehicle Expenses	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	13251.35
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)				PAGE 36 / 120
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial) Juda		Transaction ID: SB17-EX2069 Date of Disbursement 07 / 03 / 2003	
Mailing Address 321 21st Avenue			
City Altoona	State PA	Zip Code 16601	Amount of Each Disbursement this Period 6.35
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Thank you cards Office Expenses
State: District			

B. Full Name (Last, First, Middle Initial) Manning		Transaction ID: SB17-EX2070 Date of Disbursement 07 / 03 / 2003	
Mailing Address 610 Garber Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 30.71
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Mileage reimbursement Vehicle Expenses
State: District			

C. Full Name (Last, First, Middle Initial) Campaign Resource Strategies		Transaction ID: SB17-EX2071 Date of Disbursement 07 / 03 / 2003	
Mailing Address 25452 Brickell Drive			
City Chanbilly	State VA	Zip Code 20152	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement Expenditure Candidate Name		003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Consulting fee-July 2003 Campaign Consultant
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	2537.06
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)				PAGE 37 / 120
	<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. Campaign Resource Strategies		Transaction ID: SB17-EX2072 Date of Disbursement 07 / 03 / 2003	
Mailing Address 25452 Brickell Drive			
City Chantilly	State VA	Zip Code 20152	Amount of Each Disbursement this Period 548.32
Purpose of Disbursement Expenditure Candidate Name		003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Mailing & postage Energy lunch Fundraising
State: District			

Full Name (Last, First, Middle Initial) B. Campaign Resource Strategies		Transaction ID: SB17-EX2073 Date of Disbursement 07 / 03 / 2003	
Mailing Address 25452 Brickell Drive			
City Chantilly	State VA	Zip Code 20152	Amount of Each Disbursement this Period 1427.33
Purpose of Disbursement Expenditure Candidate Name		003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Energy Luncheon Fundraising
State: District			

Full Name (Last, First, Middle Initial) C. The Daily Herald		Transaction ID: SB17-EX2078 Date of Disbursement 07 / 14 / 2003	
Mailing Address 1087 Pennsylvania Avenue			
City Tyrone	State PA	Zip Code 16888	Amount of Each Disbursement this Period 80.00
Purpose of Disbursement Expenditure Candidate Name		004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Bellwood Flag Ad Print Ads
State: District			

SUBTOTAL of Disbursements This Page (optional)	2035.65
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 38 / 120

<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		Transaction ID: SB17-EX2079 Date of Disbursement 07 / 14 / 2003	
Mailing Address PO Box 2008			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 115.00
Purpose of Disbursement Expenditure		004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Acct#D55264 Print Ads	
State: District			

Full Name (Last, First, Middle Initial) B. M and T Bank		Transaction ID: SB17-EX2080 Date of Disbursement 07 / 14 / 2003	
Mailing Address 301 W Plank Road			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 322.18
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	941 2nd Quarter 2003 Payr- oil Taxes	
State: District			

Full Name (Last, First, Middle Initial) C. K-Mart		Transaction ID: SB17-EX2081 Date of Disbursement 07 / 14 / 2003	
Mailing Address Plank Road			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 80.84
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Candy for Firemans parade Petty Cash	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	498.02
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)				PAGE 39 / 120
	<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. Manning		Transaction ID: SB17-EX2082 Date of Disbursement 07 / 14 / 2003	
Mailing Address 610 Garber Street			
City Hollidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 8.87 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Gifts for Delay Fundraiser Petty Cash	
State: District			

Full Name (Last, First, Middle Initial) B. US Postal Service		Transaction ID: SB17-EX2083 Date of Disbursement 07 / 14 / 2003	
Mailing Address 525 Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 37.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Stamps-accountants office Petty Cash	
State: District			

Full Name (Last, First, Middle Initial) C. Martins		Transaction ID: SB17-EX2084 Date of Disbursement 07 / 14 / 2003	
Mailing Address Store 17			
City Altoona	State PA	Zip Code 16801	Amount of Each Disbursement this Period 4.12 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Soda for the office Petty Cash	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	49.99
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 40 / 120
	<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. Dollar General Store		Transaction ID: SB17-EX2085 Date of Disbursement 07 / 14 / 2003	
Mailing Address 502 Third Avenue		Amount of Each Disbursement this Period 3.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Water for office Petty Cash	
City Duncansville	State PA		Zip Code 16835
Purpose of Disbursement Expenditure Candidate Name			001 Category/ Type
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. US Postal Service		Transaction ID: SB17-EX2086 Date of Disbursement 07 / 14 / 2003	
Mailing Address 525 Allegheny Street		Amount of Each Disbursement this Period 37.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 roll of stamps Petty Cash	
City Hollidaysburg	State PA		Zip Code 16648
Purpose of Disbursement Expenditure Candidate Name			001 Category/ Type
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. US Postal Service		Transaction ID: SB17-EX2087 Date of Disbursement 07 / 14 / 2003	
Mailing Address 525 Allegheny Street		Amount of Each Disbursement this Period 3.32 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 postage Petty Cash	
City Hollidaysburg	State PA		Zip Code 16648
Purpose of Disbursement Expenditure Candidate Name			001 Category/ Type
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	43.32
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 41 / 120
	<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. Ace Fix-It Hardware		Transaction ID: SB17-EX2088 Date of Disbursement 07 / 14 / 2003
Mailing Address Rte 764		Amount of Each Disbursement this Period 5.50 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Keys made for mailbox Petty Cash
City Duncansville	State PA Zip Code 16835	
Purpose of Disbursement Expenditure	Candidate Name	
Office Sought: House Senate President		
State: District		

Full Name (Last, First, Middle Initial) B. Sams Club		Transaction ID: SB17-EX2088 Date of Disbursement 07 / 14 / 2003
Mailing Address Walmart Plaza		Amount of Each Disbursement this Period 36.70 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Replenished phone card Petty Cash
City Altoona	State PA Zip Code 16802	
Purpose of Disbursement Expenditure	Candidate Name	
Office Sought: House Senate President		
State: District		

Full Name (Last, First, Middle Initial) C. Wal Mart Supercenter		Transaction ID: SB17-EX2090 Date of Disbursement 07 / 14 / 2003
Mailing Address WalMart Plaza		Amount of Each Disbursement this Period 2.50 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Water for office Petty Cash
City Altoona	State PA Zip Code 16801	
Purpose of Disbursement Expenditure	Candidate Name	
Office Sought: House Senate President		
State: District		

SUBTOTAL of Disbursements This Page (optional)	44.79
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)				PAGE 42 / 120
	<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. Manning		Transaction ID: SB17-EX2092 Date of Disbursement 07 / 14 / 2003	
Mailing Address 610 Garber Street			
City Holidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 181.49 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 6/29 to 7/12/2003 Campaign Workers' Salaries
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Hanna		Transaction ID: SB17-EX2093 Date of Disbursement 07 / 14 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 308.66 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 6/29 to 7/12/2003 Campaign Workers' Salaries
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. United Parcel Service		Transaction ID: SB17-EX2094 Date of Disbursement 07 / 14 / 2003	
Mailing Address PO Box 7247-0244			
City Philadelphia	State PA	Zip Code 19170	Amount of Each Disbursement this Period 43.14 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Invoice 0000F10DR4273 Postage
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	533.29
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 43 / 120
	<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. CTIPAdotNET		Transaction ID: SB17-EX2095 Date of Disbursement 07 / 14 / 2003
Mailing Address 5170 E. Trindle Road		Amount of Each Disbursement this Period 31.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Website 7/1 to 9/30/03 Of- fice Expenses
City Mechanicsburg	State PA Zip Code 17050	
Purpose of Disbursement Expenditure	Candidate Name	
001 Category/ Type		
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. DJS Food Designs Inc		Transaction ID: SB17-EX2096 Date of Disbursement 07 / 14 / 2003
Mailing Address The Casino and Snappy Chef 300 Lakemont Park Blvd		Amount of Each Disbursement this Period 2117.61 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Delay Event Fundraising
City Altoona	State PA Zip Code 16602	
Purpose of Disbursement Expenditure	Candidate Name	
003 Category/ Type		
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: SB17-EX2097 Date of Disbursement 07 / 14 / 2003
Mailing Address PO Box 8585		Amount of Each Disbursement this Period 187.28 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 814 696 0225 808 26 Y Tel- ephone
City Philadelphia	State PA Zip Code 19173	
Purpose of Disbursement Expenditure	Candidate Name	
001 Category/ Type		
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	2336.10
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 44 / 120
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Kelley		Transaction ID: SB17-EX2099 Date of Disbursement 07 / 14 / 2003	
Mailing Address 43 Seneca Avenue		Amount of Each Disbursement this Period 500.00	
City Altoona	State PA	Zip Code 16802	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		003 Category/Type	
Candidate Name		Campaign Consultant	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Thomas Automotive Family		Transaction ID: SB17-EX2102 Date of Disbursement 07 / 14 / 2003	
Mailing Address PO Box 165		Amount of Each Disbursement this Period 625.08	
City Bedford	State PA	Zip Code 15522	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/Type	
Candidate Name		Inspection & brakes for van Vehicle Expenses	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Altoona Symphony Orchestra		Transaction ID: SB17-EX2106 Date of Disbursement 07 / 14 / 2003	
Mailing Address PO Box 483		Amount of Each Disbursement this Period 100.00	
City Altoona	State PA	Zip Code 16803	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		004 Category/Type	
Candidate Name		Hole Sponsorship for Golf Classic Print Ads	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	1225.08
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 45 / 120
	<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. TGI Fridays		Transaction ID: SB17-EX2107 Date of Disbursement 07 / 03 / 2003	
Mailing Address Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 98.86
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Meals Meals	
State: District			

Full Name (Last, First, Middle Initial) B. Hampton Inns		Transaction ID: SB17-EX2108 Date of Disbursement 07 / 03 / 2003	
Mailing Address 180 Charlotte Drive			
City Altoona	State PA	Zip Code 16601	Amount of Each Disbursement this Period 472.20
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Carter & Farmer Lodging	
State: District			

Full Name (Last, First, Middle Initial) C. Abes Transportation		Transaction ID: SB17-EX2110 Date of Disbursement 07 / 03 / 2003	
Mailing Address PO Box 21039			
City Washington	State DC	Zip Code 20009	Amount of Each Disbursement this Period 144.00
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Limo Service Taxi/Car/Bus Expense	
State: District			

SUBTOTAL of Disbursements This Page (optional)	715.06
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)				PAGE 46 / 120
	<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. Abes Transportation		Transaction ID: SB17-EX2111 Date of Disbursement 07 / 03 / 2003	
Mailing Address PO Box 21039			
City Washington	State DC	Zip Code 20009	Amount of Each Disbursement this Period 60.00
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Limo Service Taxi/Car/Bus Expense	
State: District			

Full Name (Last, First, Middle Initial) B. Hunan Dynasty		Transaction ID: SB17-EX2112 Date of Disbursement 07 / 03 / 2003	
Mailing Address 215 Pennsylvania Avenue			
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 40.20
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Meals Meals	
State: District			

Full Name (Last, First, Middle Initial) C. Capitol City Brewing		Transaction ID: SB17-EX2113 Date of Disbursement 07 / 03 / 2003	
Mailing Address Street Required			
City Arlington	State VA	Zip Code 22201	Amount of Each Disbursement this Period 31.05
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	meals Meals	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	140.25
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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17 20a 18 20b 19a 20c 19b 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Bistro Bis		Transaction ID: SB17-EX2114 Date of Disbursement 07 / 03 / 2003	
Mailing Address 15 E Street NW			
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 464.40
Purpose of Disbursement Expenditure Candidate Name		003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Breakfast fundraiser 6/4-03 Fundraising	
State: District			

Full Name (Last, First, Middle Initial) B. Hoss Steak And Sea		Transaction ID: SB17-EX2115 Date of Disbursement 07 / 03 / 2003	
Mailing Address Wye Switches			
City Duncansville	State PA	Zip Code 16835	Amount of Each Disbursement this Period 37.50
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	meals Meals	
State: District			

Full Name (Last, First, Middle Initial) C. Eckerd Drug		Transaction ID: SB17-EX2116 Date of Disbursement 07 / 03 / 2003	
Mailing Address 3331 Pleasant Valley			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 5.64
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Photos developed Office Expenses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	507.54
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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17 20a 18 20b 19a 20c 19b 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Wick Copy Center		Transaction ID: SB17-EX2117 Date of Disbursement 07 / 03 / 2003	
Mailing Address 503 E Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 166.10
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	8/23 Invitations Office Expenses
State: District			

Full Name (Last, First, Middle Initial) B. Wick Copy Center		Transaction ID: SB17-EX2118 Date of Disbursement 07 / 03 / 2003	
Mailing Address 503 E Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 34.98
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	invitations and response cards Office Expenses
State: District			

Full Name (Last, First, Middle Initial) C. US Postal Service		Transaction ID: SB17-EX2119 Date of Disbursement 07 / 03 / 2003	
Mailing Address 525 Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 148.00
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Stamps Postage
State: District			

SUBTOTAL of Disbursements This Page (optional)	349.08
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 48 / 120
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. US Postal Service		Transaction ID: SB17-EX2120 Date of Disbursement 07 / 03 / 2003	
Mailing Address 525 Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 111.00
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Stamps Postage
State: District			

Full Name (Last, First, Middle Initial) B. Wick Copy Center		Transaction ID: SB17-EX2121 Date of Disbursement 07 / 03 / 2003	
Mailing Address 503 E Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 11.66
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Labels Office Expenses
State: District			

Full Name (Last, First, Middle Initial) C. Wick Copy Center		Transaction ID: SB17-EX2122 Date of Disbursement 07 / 03 / 2003	
Mailing Address 503 E Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 97.52
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Invitations, rsvp cards, labels Office Expenses
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	220.18
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 50 / 120
	<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. Wick Copy Center		Transaction ID: SB17-EX2123 Date of Disbursement 07 / 03 / 2003	
Mailing Address 503 E Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 36.57
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	invitations, rsvp cards Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) B. Wick Copy Center		Transaction ID: SB17-EX2124 Date of Disbursement 07 / 03 / 2003	
Mailing Address 503 E Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 36.57
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	labels, envelopes, invita- tions Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) C. US Postal Service		Transaction ID: SB17-EX2125 Date of Disbursement 07 / 03 / 2003	
Mailing Address 525 Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 111.00
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Stamps Postage	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	184.14
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)				PAGE 51 / 120
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. US Postal Service		Transaction ID: SB17-EX2126 Date of Disbursement 07 / 03 / 2003	
Mailing Address 525 Allegheny Street		Amount of Each Disbursement this Period 37.00	
City Hollidaysburg	State PA	Zip Code 16848	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		roll of stamps Postage	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Juda		Transaction ID: SB17-EX2137 Date of Disbursement 07 / 18 / 2003	
Mailing Address 321 21st Avenue		Amount of Each Disbursement this Period 55.15	
City Altoona	State PA	Zip Code 16601	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		mileage reimbursement Petty Cash	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Kurtz		Transaction ID: SB17-EX2135 Date of Disbursement 07 / 18 / 2003	
Mailing Address 303 Laurel Street		Amount of Each Disbursement this Period 122.87	
City Bellwood	State PA	Zip Code 16817	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		supplies for display boards Petty Cash	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	215.02
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)				PAGE 52 / 120
	<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. Family Dollar Stores		Transaction ID: SB17-EX2131 Date of Disbursement 07 / 18 / 2003	
Mailing Address 118 Hollidaysburg Plaza			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 11.66
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Office supplies Petty Cash	
State: District			

Full Name (Last, First, Middle Initial) B. Dollar General Store		Transaction ID: SB17-EX2132 Date of Disbursement 07 / 18 / 2003	
Mailing Address 502 Third Avenue			
City Duncansville	State PA	Zip Code 16635	Amount of Each Disbursement this Period 3.00
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	water for office Petty Cash	
State: District			

Full Name (Last, First, Middle Initial) C. United Parcel Service		Transaction ID: SB17-EX2138 Date of Disbursement 07 / 25 / 2003	
Mailing Address PO Box 7247-0244			
City Philadelphia	State PA	Zip Code 19170	Amount of Each Disbursement this Period 14.18
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Loan payoff Postage	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	28.84
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: (check only one)				PAGE 53 / 120
	<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. Young		Transaction ID: SB17-EX2139 Date of Disbursement 07 / 25 / 2003	
Mailing Address 311 Stone Street			
City Osceola Mills	State PA	Zip Code 16806	Amount of Each Disbursement this Period 39.90
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Expense reimbursement Meals
State: District			

Full Name (Last, First, Middle Initial) B. Hanna		Transaction ID: SB17-EX2140 Date of Disbursement 07 / 25 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 67.10
Purpose of Disbursement Expenditure Candidate Name		003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Delay event reimbursement Fundraising
State: District			

Full Name (Last, First, Middle Initial) C. Charter Communications VI LLC		Transaction ID: SB17-EX2141 Date of Disbursement 07 / 25 / 2003	
Mailing Address 2200 Beale Avenue			
City Altoona	State PA	Zip Code 16801	Amount of Each Disbursement this Period 59.95
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	7/21 to 8/20 8335 20 042 0024080 Utilities
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	160.95
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 54 / 120
	<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. Ciocca Benton And Company		Transaction ID: SB17-EX2142 Date of Disbursement 07 / 25 / 2003	
Mailing Address PO Box 1473			
City Altoona	State PA	Zip Code 16803	Amount of Each Disbursement this Period 9.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼	General	Paper supplies Office Expenses
State: District			

Full Name (Last, First, Middle Initial) B. AT/T Wireless Services		Transaction ID: SB17-EX2143 Date of Disbursement 07 / 25 / 2003	
Mailing Address PO 944039			
City Maitland	State FL	Zip Code 32704	Amount of Each Disbursement this Period 228.66 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼	General	2202375986 6/9 to 7/8 Telephone
State: District			

Full Name (Last, First, Middle Initial) C. Parker		Transaction ID: SB17-EX2146 Date of Disbursement 07 / 25 / 2003	
Mailing Address 7988 Lincoln Way West Saint Thomas, PA			
City Saint Thomas	State PA	Zip Code 17252	Amount of Each Disbursement this Period 23.46 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼	General	mileage reimbursement-Wal-fordsburg Vehicle Expenses
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	261.12
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)				PAGE 55 / 120
	<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. Schaffer		Transaction ID: SB17-EX2148 Date of Disbursement 07 / 25 / 2003	
Mailing Address 1501 Bass Lake Road			
City Holly Springs	State NC	Zip Code 27540	Amount of Each Disbursement this Period 200.00
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	August rent Rent
State: District			

Full Name (Last, First, Middle Initial) B. Hanna		Transaction ID: SB17-EX2148 Date of Disbursement 07 / 28 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 308.66
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	7/13 to 7/26/2003 Campaign Workers' Salaries
State: District			

Full Name (Last, First, Middle Initial) C. Manning		Transaction ID: SB17-EX2152 Date of Disbursement 07 / 28 / 2003	
Mailing Address 610 Garber Street			
City Hollidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 190.34
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	7/13 to 7/26/2003 Campaign Workers' Salaries
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	699.00
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 56 / 120
	<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. PA UC Fund		Transaction ID: SB17-EX2153 Date of Disbursement 07 / 29 / 2003	
Mailing Address PO Box 60190			
City Harrisburg	State PA	Zip Code 17106	Amount of Each Disbursement this Period 68.53 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	2nd Quarter 2003 07-18569 Payroll Taxes	
State: District			

Full Name (Last, First, Middle Initial) B. PA Department Of Revenue		Transaction ID: SB17-EX2154 Date of Disbursement 07 / 29 / 2003	
Mailing Address DEPT 280414			
City Harrisburg	State PA	Zip Code 17126	Amount of Each Disbursement this Period 101.78 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	P/E 6/30/03 25-1851208 Pa- yroll Taxes	
State: District			

Full Name (Last, First, Middle Initial) C. M and T Bank		Transaction ID: SB17-EX2155 Date of Disbursement 07 / 29 / 2003	
Mailing Address 301 W Plank Road			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 28.08 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	840 2nd quarter 2003 Payr- oll Taxes	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	199.39
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 57 / 120
	<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. Altoona Area School District		Transaction ID: SB17-EX2156 Date of Disbursement 07 / 29 / 2003	
Mailing Address Stevens Building 200 E Crawford Avenue, Rear		Amount of Each Disbursement this Period 32.34 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 P/E 8/30/2003 25-1881208 Payroll Taxes	
City Altoona	State PA		Zip Code 16602
Purpose of Disbursement Expenditure			001 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Hollidaysburg Area School Dist		Transaction ID: SB17-EX2157 Date of Disbursement 07 / 29 / 2003	
Mailing Address 201 Jackson Street		Amount of Each Disbursement this Period 0.43 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Payroll Taxes Payroll Taxes	
City Hollidaysburg	State PA		Zip Code 16648
Purpose of Disbursement Expenditure			001 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Dick Corporation		Transaction ID: SB17-EX2158 Date of Disbursement 08 / 04 / 2003	
Mailing Address PO Box 10898		Amount of Each Disbursement this Period 227.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Delay event reimbursements Fundraising	
City Pittsburgh	State PA		Zip Code 15238
Purpose of Disbursement Expenditure			003 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	268.77
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)				PAGE 58 / 120
	<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. Hanna		Transaction ID: SB17-EX2159 Date of Disbursement 08 / 04 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 38.93
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Expense reimbursement Meals
State: District			

Full Name (Last, First, Middle Initial) B. Hanna		Transaction ID: SB17-EX2160 Date of Disbursement 08 / 04 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 14.80
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Expense reimbursement Postage
State: District			

Full Name (Last, First, Middle Initial) C. M and T Bank		Transaction ID: SB17-EX2161 Date of Disbursement 08 / 04 / 2003	
Mailing Address 301 W Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 244.10
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		941 3rd quarter 25-1881208 Payroll Taxes
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	297.83
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 59 / 120
	<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. Manning		Transaction ID: SB17-EX2162 Date of Disbursement 08 / 04 / 2003	
Mailing Address 610 Garber Street			
City Holidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 41.40
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	mileage reimbursement Vehicle Expenses
State: District			

Full Name (Last, First, Middle Initial) B. Campaign Resource Strategies		Transaction ID: SB17-EX2163 Date of Disbursement 08 / 04 / 2003	
Mailing Address 25452 Brickell Drive			
City Chantilly	State VA	Zip Code 20152	Amount of Each Disbursement this Period 123.77
Purpose of Disbursement Expenditure Candidate Name		003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	poster for harrisburg luncheon Fundraising
State: District			

Full Name (Last, First, Middle Initial) C. Campaign Resource Strategies		Transaction ID: SB17-EX2164 Date of Disbursement 08 / 04 / 2003	
Mailing Address 25452 Brickell Drive			
City Chantilly	State VA	Zip Code 20152	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement Expenditure Candidate Name		003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Consulting fee-August Campaign Consultant
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	2665.17
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 60 / 120
	<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. Thomas Automotive Family		Transaction ID: SB17-EX2167 Date of Disbursement 08 / 04 / 2003	
Mailing Address PO Box 165			
City Bedford	State PA	Zip Code 15522	Amount of Each Disbursement this Period 35.00
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Acct #8148960225 Vehicle Expenses

Full Name (Last, First, Middle Initial) B. Shanksville Athletic Boosters		Transaction ID: SB17-EX2168 Date of Disbursement 08 / 06 / 2003	
Mailing Address 187 Three Point Lane			
City Berlin	State PA	Zip Code 15530	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement Expenditure Candidate Name		004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Tournament Sponsor Print Ads

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: SB17-EX2169 Date of Disbursement 08 / 06 / 2003	
Mailing Address PO Box 8585			
City Philadelphia	State PA	Zip Code 19173	Amount of Each Disbursement this Period 176.92
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		814 896 0225 808 26 Y Telephone

SUBTOTAL of Disbursements This Page (optional)	▶	261.92
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 61 / 120
	<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. Manning		Transaction ID: SB17-EX2171 Date of Disbursement 08 / 11 / 2003	
Mailing Address 610 Garber Street			
City Holidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 99.59 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 7/27 to 8/9/2003 Campaign Workers' Salaries
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Hanna		Transaction ID: SB17-EX2172 Date of Disbursement 08 / 11 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 308.66 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 7/27 to 8/9/2003 Campaign Workers' Salaries
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. IS2 Technologies, Inc.		Transaction ID: SB17-EX2173 Date of Disbursement 08 / 14 / 2003	
Mailing Address 3018 Pleasant Valley Blvd			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 1190.38 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Dell Inspiron Laptop Office Expenses
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	1598.63
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)				PAGE 62 / 120
	<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. O.K. Stuckey And Son		Transaction ID: SB17-EX2174 Date of Disbursement 08 / 14 / 2003	
Mailing Address 400 Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 700.13 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		003 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Jobs 975-978 BoyScouts Fu-ndraising

Full Name (Last, First, Middle Initial) B. O.K. Stuckey And Son		Transaction ID: SB17-EX2175 Date of Disbursement 08 / 14 / 2003	
Mailing Address 400 Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 846.41 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Letterhead Jobs 911 & 912 Office Expenses

Full Name (Last, First, Middle Initial) C. First Commonwealth Bank		Transaction ID: SB17-EX2176 Date of Disbursement 08 / 14 / 2003	
Mailing Address PO Box 0537			
City Indiana	State PA	Zip Code 15701	Amount of Each Disbursement this Period 15.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Annual charge 3421 Bank Service Charge

SUBTOTAL of Disbursements This Page (optional)	▶	1561.54
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 63 / 120
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. First Commonwealth Bank		Transaction ID: SB17-EX2177 Date of Disbursement 08 / 14 / 2003	
Mailing Address PO Box 0537			
City Indiana	State PA	Zip Code 15701	Amount of Each Disbursement this Period 15.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Annual charge 3439 Bank Service Charge	
State: District			

Full Name (Last, First, Middle Initial) B. Austins Texas Hot Dogs		Transaction ID: SB17-EX2180 Date of Disbursement 08 / 14 / 2003	
Mailing Address Delgrosso Park			
City Tipton	State PA	Zip Code 16684	Amount of Each Disbursement this Period 14.58 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Food for workers Petty Cash	
State: District			

Full Name (Last, First, Middle Initial) C. Hanna		Transaction ID: SB17-EX2181 Date of Disbursement 08 / 14 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 18.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Cash for Huntingdon Fair Petty Cash	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	48.58
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 64 / 120
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. US Postal Service		Transaction ID: SB17-EX2182 Date of Disbursement 08 / 14 / 2003	
Mailing Address 525 Allegheny Street		Amount of Each Disbursement this Period 37.00	
City Hollidaysburg	State PA	Zip Code 16648	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/Type	
Candidate Name		Roll of stamps Petty Cash	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Manning		Transaction ID: SB17-EX2183 Date of Disbursement 08 / 14 / 2003	
Mailing Address 610 Garber Street		Amount of Each Disbursement this Period 3.00	
City Hollidaysburg	State PA	Zip Code 16648	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/Type	
Candidate Name		Water for office Petty Cash	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Kurtz		Transaction ID: SB17-EX2184 Date of Disbursement 08 / 14 / 2003	
Mailing Address 303 Laurel Street		Amount of Each Disbursement this Period 46.31	
City Bellwood	State PA	Zip Code 16817	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/Type	
Candidate Name		Supplies for shelf Petty Cash	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	86.31
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 65 / 120
	<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. Hanna		Transaction ID: SB17-EX2185 Date of Disbursement 08 / 14 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 59.93
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Miscellaneous expenses Petty Cash	
State: District			

Full Name (Last, First, Middle Initial) B. Chris Hallmark Shop		Transaction ID: SB17-EX2186 Date of Disbursement 07 / 25 / 2003	
Mailing Address Pleasant Valley Shopping Center			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 28.93
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Russian Judge's visit Off-ice Expenses	
State: District			

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB17-EX2220 Date of Disbursement 07 / 25 / 2003	
Mailing Address Account Address			
City Altoona	State PA	Zip Code 00000-0	Amount of Each Disbursement this Period 38.03
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Bank Service Charge	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	121.89
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 66 / 120
	<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. Hunan Dynasty		Transaction ID: SB17-EX2188 Date of Disbursement 07 / 25 / 2003	
Mailing Address 215 Pennsylvania Avenue			
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1098.40 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Fundraising
Purpose of Disbursement Expenditure		003 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. U.S. House Members Dine		Transaction ID: SB17-EX2188 Date of Disbursement 07 / 25 / 2003	
Mailing Address Street Required			
City Washington	State DC	Zip Code 20515	Amount of Each Disbursement this Period 37.30 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Meals
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Pizza Hut		Transaction ID: SB17-EX2190 Date of Disbursement 07 / 25 / 2003	
Mailing Address 18478 Lincoln Highway			
City Breezewood	State PA	Zip Code 15533	Amount of Each Disbursement this Period 21.25 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Dinner-Delay trip Meals
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	1156.95
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 67 / 120
	<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. U.S. House Members Dine		Transaction ID: SB17-EX2191 Date of Disbursement 07 / 25 / 2003	
Mailing Address Street Required		Amount of Each Disbursement this Period 42.50 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Meals	
City Washington	State DC		Zip Code 20515
Purpose of Disbursement Expenditure Candidate Name			002 Category/ Type
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Capital Grille		Transaction ID: SB17-EX2192 Date of Disbursement 07 / 25 / 2003	
Mailing Address 8003		Amount of Each Disbursement this Period 162.45 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Campaign dinner Meals	
City Washington	State DC		Zip Code 20004
Purpose of Disbursement Expenditure Candidate Name			002 Category/ Type
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. FedEx Express		Transaction ID: SB17-EX2193 Date of Disbursement 07 / 25 / 2003	
Mailing Address PO Box 371481		Amount of Each Disbursement this Period 12.85 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Shuster for Congress committee Postage	
City Pittsburgh	State PA		Zip Code 15250
Purpose of Disbursement Expenditure Candidate Name			001 Category/ Type
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	217.80
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 68 / 120
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. FedEx Express		Transaction ID: SB17-EX2194 Date of Disbursement 07 / 25 / 2003	
Mailing Address PO Box 371461			
City Pittsburgh	State PA	Zip Code 15250	Amount of Each Disbursement this Period 12.85 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Shuster for Congress committee Postage	
State: District			

Full Name (Last, First, Middle Initial) B. Trover Shop 1		Transaction ID: SB17-EX2195 Date of Disbursement 07 / 25 / 2003	
Mailing Address 221 Pennsylvania Avenue SE			
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 4.50 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Miscellaneous Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) C. Trover Shop 1		Transaction ID: SB17-EX2196 Date of Disbursement 07 / 25 / 2003	
Mailing Address 221 Pennsylvania Avenue SE			
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 46.53 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Misc Office Expenses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	63.88
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)				PAGE 69 / 120
	<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. U.S. House Members Dine		Transaction ID: SB17-EX2197 Date of Disbursement 07 / 25 / 2003	
Mailing Address Street Required			
City Washington	State DC	Zip Code 20515	Amount of Each Disbursement this Period 9.95 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Meals
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Giant Eagle		Transaction ID: SB17-EX2198 Date of Disbursement 07 / 25 / 2003	
Mailing Address 516-520 W. Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 29.99 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Morrison Cove picnic-sheet cake Meals
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Wines And Spirits		Transaction ID: SB17-EX2199 Date of Disbursement 07 / 25 / 2003	
Mailing Address 3415 Pleasant Valley Blvd			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 32.82 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Supplies for DeLay event Fundraising
Purpose of Disbursement Expenditure		003 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	72.76
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 70 / 120
	<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. A.C. Moore		Transaction ID: SB17-EX2200 Date of Disbursement 07 / 25 / 2003	
Mailing Address 516-520 W. Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 27.76 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Supplies for DeLay event Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) B. Thompson Pharmacy		Transaction ID: SB17-EX2201 Date of Disbursement 07 / 25 / 2003	
Mailing Address 600 E. Chestnut Avenue			
City Altoona	State PA	Zip Code 16601	Amount of Each Disbursement this Period 32.12 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Snacks for Gift baskets Meals	
State: District			

Full Name (Last, First, Middle Initial) C. Wal Mart Supercenter		Transaction ID: SB17-EX2202 Date of Disbursement 07 / 25 / 2003	
Mailing Address WalMart Plaza			
City Altoona	State PA	Zip Code 16601	Amount of Each Disbursement this Period 101.31 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Supplies for gift baskets Office Expenses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	161.19
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 71 / 120
	<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. Kens Cigar And Tobacco		Transaction ID: SB17-EX2203 Date of Disbursement 07 / 25 / 2003	
Mailing Address 517 Allegheny Street		Amount of Each Disbursement this Period 15.95 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Gifts for Delay event Off-ice Expenses	
City Holidaysburg	State PA		Zip Code 16648
Purpose of Disbursement Expenditure Candidate Name			001 Category/ Type
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Staples-291		Transaction ID: SB17-EX2204 Date of Disbursement 07 / 25 / 2003	
Mailing Address Plank Road/Orchard Plaza		Amount of Each Disbursement this Period 45.08 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 paper and supplies Office Expenses	
City Altoona	State PA		Zip Code 16602
Purpose of Disbursement Expenditure Candidate Name			001 Category/ Type
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Curve Baseball LP		Transaction ID: SB17-EX2205 Date of Disbursement 07 / 25 / 2003	
Mailing Address 1000 Park Avenue		Amount of Each Disbursement this Period 28.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Gifts for DeLay event Off-ice Expenses	
City Altoona	State PA		Zip Code 16602
Purpose of Disbursement Expenditure Candidate Name			001 Category/ Type
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	89.03
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 72 / 120
	<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. Thompson Pharmacy		Transaction ID: SB17-EX2206 Date of Disbursement 07 / 25 / 2003	
Mailing Address 600 E. Chestnut Avenue			
City Altoona	State PA	Zip Code 16601	Amount of Each Disbursement this Period 4.95
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Supplies for Gift baskets- DeLay Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) B. Eckerd Drug		Transaction ID: SB17-EX2207 Date of Disbursement 07 / 25 / 2003	
Mailing Address 3331 Pleasant Valley			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 23.00
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	supplies for DeLay event Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) C. Courtyard By Marriott		Transaction ID: SB17-EX2208 Date of Disbursement 07 / 25 / 2003	
Mailing Address 2 Convention Center Blvd			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 151.51
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	DeLay event Lodging	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	179.55
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	<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		Transaction ID: SB17-EX2209	
Mailing Address 2 Convention Center Blvd		Date of Disbursement 07 / 25 / 2003	
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 59.95
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼	General	DeLay event-Alex Lodging
State: District			

Full Name (Last, First, Middle Initial) B. Courtyard By Marriott		Transaction ID: SB17-EX2210	
Mailing Address 2 Convention Center Blvd		Date of Disbursement 07 / 25 / 2003	
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 59.95
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼	General	DeLay event-Ang Lodging
State: District			

Full Name (Last, First, Middle Initial) C. Thompson Pharmacy		Transaction ID: SB17-EX2211	
Mailing Address 600 E. Chestnut Avenue		Date of Disbursement 07 / 25 / 2003	
City Altoona	State PA	Zip Code 16601	Amount of Each Disbursement this Period 14.82
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼	General	supplies Office Expenses
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	134.72
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 74 / 120
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. US Postal Service		Transaction ID: SB17-EX2212 Date of Disbursement 07 / 25 / 2003	
Mailing Address 525 Allegheny Street		Amount of Each Disbursement this Period 74.00	
City Hollidaysburg	State PA	Zip Code 16648	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 rolls of stamps Postage
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	State: District	

Full Name (Last, First, Middle Initial) B. Wal Mart Supercenter		Transaction ID: SB17-EX2213 Date of Disbursement 07 / 25 / 2003	
Mailing Address WalMart Plaza		Amount of Each Disbursement this Period 44.16	
City Altoona	State PA	Zip Code 16601	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 candy-Martinsburg parade Office Expenses
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	State: District	

Full Name (Last, First, Middle Initial) C. The Coney		Transaction ID: SB17-EX2214 Date of Disbursement 07 / 25 / 2003	
Mailing Address 642 Philadelphia Street		Amount of Each Disbursement this Period 23.01	
City Indiana	State PA	Zip Code 15701	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Katie & Amy Meals
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	State: District	

SUBTOTAL of Disbursements This Page (optional)	▶	141.17
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 75 / 120
	<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. Sheetz Inc		Transaction ID: SB17-EX2216 Date of Disbursement 07 / 25 / 2003	
Mailing Address 5700 Sixth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 19.22
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	gasoline Vehicle Expenses	
State: District			

Full Name (Last, First, Middle Initial) B. Staples-291		Transaction ID: SB17-EX2216 Date of Disbursement 07 / 25 / 2003	
Mailing Address Plank Road/Orchard Plaza			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 39.63
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	office supplies Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) C. US Postal Service		Transaction ID: SB17-EX2217 Date of Disbursement 07 / 25 / 2003	
Mailing Address 525 Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 148.00
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	rolls of stamps Postage	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	201.05
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)				PAGE 76 / 120
	<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. Staples-291		Transaction ID: SB17-EX2218 Date of Disbursement 07 / 25 / 2003	
Mailing Address Plank Road/Orchard Plaza			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 45.30
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	office supplies Office Expenses
State: District			

Full Name (Last, First, Middle Initial) B. M and T Bank		Transaction ID: SB17-EX2222 Date of Disbursement 07 / 09 / 2003	
Mailing Address 301 W Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 10.00
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: Primary Other (specify) ▼	General	Bank Service Charge
State: District			

Full Name (Last, First, Middle Initial) C. Charter Communications VI LLC		Transaction ID: SB17-EX2225 Date of Disbursement 08 / 20 / 2003	
Mailing Address 2200 Beale Avenue			
City Altoona	State PA	Zip Code 16601	Amount of Each Disbursement this Period 58.95
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	8/21 to 9/20 8335 20 042 0024080 Utilities
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	115.25
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)				PAGE 77 / 120
	<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. AT/T Wireless Services		Transaction ID: SB17-EX2226 Date of Disbursement 08 / 20 / 2003	
Mailing Address PO 944039		Amount of Each Disbursement this Period 225.89 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 7/9 to 8/8 2202375966 Telephone	
City Maitland	State FL		Zip Code 32794
Purpose of Disbursement Expenditure			001 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. PA Council Of Republican Women		Transaction ID: SB17-EX2227 Date of Disbursement 08 / 20 / 2003	
Mailing Address State Headquarters 806 North Second Street		Amount of Each Disbursement this Period 100.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Annual Convention ad Print Ads	
City Harrisburg	State PA		Zip Code 17102
Purpose of Disbursement Expenditure			004 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Altoona Symphony Orchestra		Transaction ID: SB17-EX2228 Date of Disbursement 08 / 20 / 2003	
Mailing Address PO Box 483		Amount of Each Disbursement this Period 200.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 1/2 page ad in booklet Print Ads	
City Altoona	State PA		Zip Code 16803
Purpose of Disbursement Expenditure			004 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	525.89
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 78 / 120
	<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. Hanna		Transaction ID: SB17-EX2229 Date of Disbursement 08 / 25 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 308.66 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 8/10 to 8/23/2003 Campaign Workers' Salaries
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Manning		Transaction ID: SB17-EX2230 Date of Disbursement 08 / 25 / 2003	
Mailing Address 610 Garber Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 110.66 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 8/10 to 8/23/2003 Campaign Workers' Salaries
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Young		Transaction ID: SB17-EX2231 Date of Disbursement 08 / 27 / 2003	
Mailing Address 311 Stone Street			
City Osceola Mills	State PA	Zip Code 16868	Amount of Each Disbursement this Period 18.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Expense reimbursement Meals
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	437.32
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 79 / 120
	<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. IS2 Technologies, Inc.		Transaction ID: SB17-EX2232 Date of Disbursement 08 / 27 / 2003	
Mailing Address 3018 Pleasant Valley Blvd			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 487.58
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Office XP software Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) B. IS2 Technologies, Inc.		Transaction ID: SB17-EX2233 Date of Disbursement 08 / 27 / 2003	
Mailing Address 3018 Pleasant Valley Blvd			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 23.13
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	mouse Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) C. IS2 Technologies, Inc.		Transaction ID: SB17-EX2234 Date of Disbursement 08 / 27 / 2003	
Mailing Address 3018 Pleasant Valley Blvd			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 130.58
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Set up laptop and software Office Expenses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	641.29
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 80 / 120
	<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. Ciocca Benton And Company		Transaction ID: SB17-EX2236 Date of Disbursement 08 / 27 / 2003	
Mailing Address PO Box 1473			
City Altoona State PA Zip Code 16603	Amount of Each Disbursement this Period 7500.00		
Purpose of Disbursement Expenditure Candidate Name	001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Hanna		Transaction ID: SB17-EX2236 Date of Disbursement 08 / 27 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona State PA Zip Code 16602	Amount of Each Disbursement this Period 3.00		
Purpose of Disbursement Expenditure Candidate Name	002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Hanna		Transaction ID: SB17-EX2237 Date of Disbursement 08 / 27 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona State PA Zip Code 16602	Amount of Each Disbursement this Period 20.13		
Purpose of Disbursement Expenditure Candidate Name	001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	7523.13
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)				PAGE 81 / 120
	<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. Band Of Gold		Transaction ID: SB17-EX2239 Date of Disbursement 08 / 29 / 2003	
Mailing Address 216 Crawford Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 250.00
Purpose of Disbursement Expenditure		003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Music for Volunteer picnic Fundraising	
State: District			

Full Name (Last, First, Middle Initial) B. Kurtz		Transaction ID: SB17-EX2242 Date of Disbursement 08 / 29 / 2003	
Mailing Address 303 Laurel Street			
City Bellwood	State PA	Zip Code 16617	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Fruit for Volunteer picnic Meals	
State: District			

Full Name (Last, First, Middle Initial) C. Giansante		Transaction ID: SB17-EX2283 Date of Disbursement 08 / 29 / 2003	
Mailing Address RR 2 Box 581			
City Hollidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 80.34
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	phone reimbursement Telep- hone	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	410.34
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 82 / 120
	<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 and T Bank		Transaction ID: SB17-EX2244 Date of Disbursement 09 / 03 / 2003	
Mailing Address 301 W Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 216.18
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	941 3rd quarter 25-1881208 Payroll Taxes	
State: District			

Full Name (Last, First, Middle Initial) B. New Enterprise Stone/Lime		Transaction ID: SB17-EX2245 Date of Disbursement 09 / 03 / 2003	
Mailing Address PO Box 77			
City New Entorprisc	State PA	Zip Code 16664	Amount of Each Disbursement this Period 1740.50
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Travel reimbursement-Phil-adelphia Airplane	
State: District			

Full Name (Last, First, Middle Initial) C. Petermans Florists Inc.		Transaction ID: SB17-EX2247 Date of Disbursement 09 / 03 / 2003	
Mailing Address 608 North Fourth Avenue Juniata			
City Altoona	State PA	Zip Code 16601	Amount of Each Disbursement this Period 40.28
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Gift for Rep Geist Office Expenses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	1996.96
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)				PAGE 83 / 120
	<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. Manning		Transaction ID: SB17-EX2248 Date of Disbursement 09 / 03 / 2003	
Mailing Address 610 Garber Street			
City Holidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 28.98
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Mileage reimbursement Veh- icle Expenses
State: District			

Full Name (Last, First, Middle Initial) B. Campaign Resource Strategies		Transaction ID: SB17-EX2248 Date of Disbursement 09 / 03 / 2003	
Mailing Address 25452 Brickell Drive			
City Chantilly	State VA	Zip Code 20152	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement Expenditure Candidate Name		003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Consulting fee-September 2003 Campaign Consultant
State: District			

Full Name (Last, First, Middle Initial) C. Hanna		Transaction ID: SB17-EX2250 Date of Disbursement 09 / 04 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 1.45
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Turnpike toll Parking And Tolls
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	2530.43
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)				PAGE 84 / 120
	<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. Hanna		Transaction ID: SB17-EX2251 Date of Disbursement 09 / 04 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 108.25
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Various supplies-Volunteer picnic Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) B. Young		Transaction ID: SB17-EX2252 Date of Disbursement 09 / 04 / 2003	
Mailing Address 311 Stone Street			
City Osceola Mills	State PA	Zip Code 16666	Amount of Each Disbursement this Period 33.04
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Campaign lunch in Bedford Meals	
State: District			

Full Name (Last, First, Middle Initial) C. Shuster William		Transaction ID: SB17-EX2253 Date of Disbursement 09 / 04 / 2003	
Mailing Address B Overlook Drive			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 388.00
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Reimbursement for A Mistri ticket Airplane	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	530.29
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 85 / 120
	<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. Staples-291		Transaction ID: SB17-EX2254 Date of Disbursement 08 / 20 / 2003	
Mailing Address Plank Road/Orchard Plaza			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 74.70 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	office supplies Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) B. Staples-291		Transaction ID: SB17-EX2255 Date of Disbursement 08 / 20 / 2003	
Mailing Address Plank Road/Orchard Plaza			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 19.04 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	mailing labels Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) C. Staples-291		Transaction ID: SB17-EX2256 Date of Disbursement 08 / 20 / 2003	
Mailing Address Plank Road/Orchard Plaza			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 26.45 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Office Expenses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	120.19
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 86 / 120
	<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. Staples-291		Transaction ID: SB17-EX2257 Date of Disbursement 08 / 20 / 2003	
Mailing Address Plank Road/Orchard Plaza			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 9.52
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		mailing labels Office Expenses
State: District			

Full Name (Last, First, Middle Initial) B. Pie Cucina		Transaction ID: SB17-EX2258 Date of Disbursement 08 / 20 / 2003	
Mailing Address 181 E. Brown Street			
City Blairsville	State PA	Zip Code 15717	Amount of Each Disbursement this Period 11.00
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Meals
State: District			

Full Name (Last, First, Middle Initial) C. U.S. House Members Dine		Transaction ID: SB17-EX2259 Date of Disbursement 08 / 20 / 2003	
Mailing Address Street Required			
City Washington	State DC	Zip Code 20515	Amount of Each Disbursement this Period 92.00
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Meals
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	112.52
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)				PAGE 87 / 120
	<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. U.S. House Members Dine		Transaction ID: SB17-EX2280 Date of Disbursement 08 / 20 / 2003	
Mailing Address Street Required			
City Washington	State DC	Zip Code 20515	Amount of Each Disbursement this Period 54.45
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Meals	
State: District			

Full Name (Last, First, Middle Initial) B. U.S. House Members Dine		Transaction ID: SB17-EX2281 Date of Disbursement 08 / 20 / 2003	
Mailing Address Street Required			
City Washington	State DC	Zip Code 20515	Amount of Each Disbursement this Period 0.95
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Meals	
State: District			

Full Name (Last, First, Middle Initial) C. FedEx Express		Transaction ID: SB17-EX2282 Date of Disbursement 08 / 20 / 2003	
Mailing Address PO Box 371481			
City Pittsburgh	State PA	Zip Code 15250	Amount of Each Disbursement this Period 12.78
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	to M&T Bank Postage	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	77.19
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 88 / 120
	<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. Grapevine Restaurant		Transaction ID: SB17-EX2283 Date of Disbursement 08 / 20 / 2003	
Mailing Address PO Box 66			
City Indiana	State PA	Zip Code 15701	Amount of Each Disbursement this Period 85.96
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Meals	
State: District			

Full Name (Last, First, Middle Initial) B. Hilton Harrisburg and Towers		Transaction ID: SB17-EX2284 Date of Disbursement 08 / 20 / 2003	
Mailing Address One North Second Street			
City Harrisburg	State PA	Zip Code 17101	Amount of Each Disbursement this Period 593.21
Purpose of Disbursement Expenditure Candidate Name		003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Harrisburg luncheon Fundraising	
State: District			

Full Name (Last, First, Middle Initial) C. Young Chow Restaurant		Transaction ID: SB17-EX2285 Date of Disbursement 08 / 20 / 2003	
Mailing Address 312 Pennsylvania Avenue SE			
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 84.00
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Meals	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	743.17
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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17 20a 18 20b 19a 20c 19b 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Copy Rite		Transaction ID: SB17-EX2288 Date of Disbursement 08 / 20 / 2003	
Mailing Address 301 Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 137.80 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	paper products Office Expenses
State: District			

Full Name (Last, First, Middle Initial) B. Copy Rite		Transaction ID: SB17-EX2287 Date of Disbursement 08 / 20 / 2003	
Mailing Address 301 Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 27.56 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	copies made Office Expenses
State: District			

Full Name (Last, First, Middle Initial) C. Ftd.Corn		Transaction ID: SB17-EX2288 Date of Disbursement 08 / 20 / 2003	
Mailing Address Street Required			
City Downers Grove	State IL	Zip Code 60515	Amount of Each Disbursement this Period 58.98 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Gifts Office Expenses
State: District			

SUBTOTAL of Disbursements This Page (optional)	225.34
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 90 / 120
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. FedEx Express		Transaction ID: SB17-EX2269 Date of Disbursement 08 / 20 / 2003	
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 14.84 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 to Alex fr Army Postage	
City Pittsburgh	State PA		Zip Code 15250
Purpose of Disbursement Expenditure Candidate Name			001 Category/ Type
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Il Primo Italian Oven		Transaction ID: SB17-EX2270 Date of Disbursement 08 / 20 / 2003	
Mailing Address 4129 Glades Pike		Amount of Each Disbursement this Period 21.78 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Meals	
City Somerset	State PA		Zip Code 15501
Purpose of Disbursement Expenditure Candidate Name			002 Category/ Type
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Lowes Of Altoona		Transaction ID: SB17-EX2271 Date of Disbursement 08 / 20 / 2003	
Mailing Address 1707 McMahon Road		Amount of Each Disbursement this Period 24.08 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 supplies Office Expenses	
City Altoona	State PA		Zip Code 16802
Purpose of Disbursement Expenditure Candidate Name			001 Category/ Type
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	60.70
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 91 / 120
	<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. Altoona Mirror		Transaction ID: SB17-EX2272 Date of Disbursement 08 / 20 / 2003	
Mailing Address PO Box 2008			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 148.50
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Yearly subscription Subscriptions
State: District			

Full Name (Last, First, Middle Initial) B. Wick Copy Center		Transaction ID: SB17-EX2273 Date of Disbursement 08 / 20 / 2003	
Mailing Address 503 E Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 608.44
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Invitations, responses Office Expenses
State: District			

Full Name (Last, First, Middle Initial) C. US Postal Service		Transaction ID: SB17-EX2274 Date of Disbursement 08 / 20 / 2003	
Mailing Address 525 Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 333.00
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		for invitations Postage
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	1089.94
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		Transaction ID: SB17-EX2275	
Mailing Address 5700 Sixth Avenue		Date of Disbursement 08 / 20 / 2003	
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 18.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 gasoline Vehicle Expenses
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. A.C. Moore		Transaction ID: SB17-EX2276	
Mailing Address 516-520 W. Plank Road		Date of Disbursement 08 / 20 / 2003	
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 29.63 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 supplies for fundraiser Office Expenses
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Manning		Transaction ID: SB17-EX2277	
Mailing Address 610 Garber Street		Date of Disbursement 08 / 08 / 2003	
City Hollidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 90.73 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 8/24 to 9/6/2003 Campaign Workers' Salaries
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	138.56
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 93 / 120
	<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. Hanna		Transaction ID: SB17-EX2278 Date of Disbursement 09 / 08 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 308.66 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 8/24 to 9/8/2003 Campaign Workers' Salaries
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Manning		Transaction ID: SB17-EX2281 Date of Disbursement 09 / 22 / 2003	
Mailing Address 610 Garber Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 58.12 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 9/7 to 9/20/2003 Campaign Workers' Salaries
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Hanna		Transaction ID: SB17-EX2282 Date of Disbursement 09 / 22 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 308.66 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 9/7 to 9/20/2003 Campaign Workers' Salaries
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	670.44
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)				PAGE 94 / 120
	<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. Lakemont Park		Transaction ID: SB17-EX2285 Date of Disbursement 09 / 23 / 2003	
Mailing Address 700 Park Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 3319.18
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Appreciation Picnic Meals	
State: District			

Full Name (Last, First, Middle Initial) B. Charter Communications VI LLC		Transaction ID: SB17-EX2286 Date of Disbursement 09 / 23 / 2003	
Mailing Address 2200 Beale Avenue			
City Altoona	State PA	Zip Code 16601	Amount of Each Disbursement this Period 59.95
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Administrative/Salary/Overhead Expenses Utilities	
State: District			

Full Name (Last, First, Middle Initial) C. AT/T Wireless Services		Transaction ID: SB17-EX2287 Date of Disbursement 09 / 23 / 2003	
Mailing Address PO 944039			
City Maitland	State FL	Zip Code 32794	Amount of Each Disbursement this Period 224.27
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Administrative/Salary/Overhead Expenses Telephone	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	3597.40
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 95 / 120
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. The Barash Group		Transaction ID: SB17-EX2288 Date of Disbursement 09 / 23 / 2003	
Mailing Address PO Box 77			
City State College	State PA	Zip Code 16804	Amount of Each Disbursement this Period 1118.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		004 Category/ Type	
Office Sought: House Senate President	State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Advertising Expenses Print Ads

Full Name (Last, First, Middle Initial) B. Huntingdon Co. Republican Comm		Transaction ID: SB17-EX2291 Date of Disbursement 09 / 23 / 2003	
Mailing Address PO Box 61			
City Huntingdon	State PA	Zip Code 16652	Amount of Each Disbursement this Period 100.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		004 Category/ Type	
Office Sought: House Senate President	State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Advertising Expenses Print Ads

Full Name (Last, First, Middle Initial) C. Blair Co Chamber Of Commerce		Transaction ID: SB17-EX2292 Date of Disbursement 09 / 23 / 2003	
Mailing Address Devorris Center-Suite 12 3900 Industrial Park Dr			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 266.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Overhead Expenses Dués

SUBTOTAL of Disbursements This Page (optional)	▶	1484.00
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 96 / 120
	<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. Somerset Co Sportsmens League		Transaction ID: SB17-EX2295 Date of Disbursement 09 / 23 / 2003	
Mailing Address PO Box 76			
City New Baltimore	State PA	Zip Code 15553	Amount of Each Disbursement this Period 100.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		004 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Advertising Expenses Print Ads
State: District			

Full Name (Last, First, Middle Initial) B. Parker		Transaction ID: SB17-EX2296 Date of Disbursement 09 / 23 / 2003	
Mailing Address 7968 Lincoln Way West Saint Thomas, PA			
City Saint Thomas	State PA	Zip Code 17252	Amount of Each Disbursement this Period 48.65 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Travel Vehicle Expenses
State: District			

Full Name (Last, First, Middle Initial) C. Blair Co Assoc for the Blind		Transaction ID: SB17-EX2298 Date of Disbursement 09 / 23 / 2003	
Mailing Address 300 Fifth Avenue			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 100.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		004 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Advertising Expenses Print Ads
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	248.65
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 97 / 120
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: SB17-EX2299 Date of Disbursement 09 / 23 / 2003	
Mailing Address PO Box 8585			
City Philadelphia	State PA	Zip Code 19173	Amount of Each Disbursement this Period 171.70
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Telephone	
State: District			

Full Name (Last, First, Middle Initial) B. Hanna		Transaction ID: SB17-EX2300 Date of Disbursement 09 / 23 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 23.64
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

Full Name (Last, First, Middle Initial) C. Johnstown Holiday Inn		Transaction ID: SB17-EX2302 Date of Disbursement 09 / 30 / 2003	
Mailing Address 250 Market Street			
City Johnstown	State PA	Zip Code 15907	Amount of Each Disbursement this Period 1500.00
Purpose of Disbursement Expenditure Candidate Name		003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Solicitation and Fundrais- ing Expenses Fundraising	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	1695.34
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 98 / 120
	<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. Shuster William		Transaction ID: SB17-EX2303 Date of Disbursement 09 / 30 / 2003	
Mailing Address 9 Overlook Drive			
City Hollidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 72.45 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Administrative/Salary/Overhead Expenses Vehicle Expenses	
State: District			

Full Name (Last, First, Middle Initial) B. Manning		Transaction ID: SB17-EX2304 Date of Disbursement 09 / 30 / 2003	
Mailing Address 610 Garber Street			
City Hollidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 19.32 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Administrative/Salary/Overhead Expenses Vehicle Expenses	
State: District			

Full Name (Last, First, Middle Initial) C. Sunoco		Transaction ID: SB17-EX2306 Date of Disbursement 09 / 23 / 2003	
Mailing Address 1700 Seventh Avenue			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 28.30 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Administrative/Salary/Overhead Expenses Vehicle Expenses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	121.07
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 99 / 120
	<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. Grand Slam Catering		Transaction ID: SB17-EX2307 Date of Disbursement 09 / 23 / 2003	
Mailing Address 1000 Park Avenue			
City Altoona	State PA	Zip Code 16601	Amount of Each Disbursement this Period 220.00
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Administrative/Salary/Ove- rhead Expenses Meals
State: District			

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Transaction ID: SB17-EX2308 Date of Disbursement 09 / 23 / 2003	
Mailing Address 300 First Street SE			
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1690.91
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Administrative/Salary/Ove- rhead Expenses Meals
State: District			

Full Name (Last, First, Middle Initial) C. Champps Restaurant and Bar		Transaction ID: SB17-EX2309 Date of Disbursement 09 / 23 / 2003	
Mailing Address 1201 S Joyce Street C-10			
City Arlington	State VA	Zip Code 22202	Amount of Each Disbursement this Period 186.95
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Administrative/Salary/Ove- rhead Expenses Meals
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	2097.86
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 100 / 120
	<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. Keystone Novelty		Transaction ID: SB17-EX2310 Date of Disbursement 09 / 23 / 2003	
Mailing Address 1315 Pleasant Valley Blvd			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 45.58
Purpose of Disbursement Expenditure		OD1 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

Full Name (Last, First, Middle Initial) B. Sheetz Inc		Transaction ID: SB17-EX2311 Date of Disbursement 09 / 23 / 2003	
Mailing Address 5700 Sixth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 13.65
Purpose of Disbursement Expenditure		OD1 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Vehicle Ex- penses	
State: District			

Full Name (Last, First, Middle Initial) C. Sheetz Inc		Transaction ID: SB17-EX2312 Date of Disbursement 09 / 23 / 2003	
Mailing Address 5700 Sixth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 14.30
Purpose of Disbursement Expenditure		OD1 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Vehicle Ex- penses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	73.53
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)				PAGE 101 / 120
	<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. K-Mart		Transaction ID: SB17-EX2313 Date of Disbursement 09 / 23 / 2003	
Mailing Address Plank Road			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 79.73
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

Full Name (Last, First, Middle Initial) B. Exxon		Transaction ID: SB17-EX2314 Date of Disbursement 09 / 23 / 2003	
Mailing Address 542 South Center Street			
City Ebensburg	State PA	Zip Code 15631	Amount of Each Disbursement this Period 22.10
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Vehicle Ex- penses	
State: District			

Full Name (Last, First, Middle Initial) C. Sunoco		Transaction ID: SB17-EX2315 Date of Disbursement 09 / 23 / 2003	
Mailing Address 1700 Seventh Avenue			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 6.35
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	108.18
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 102 / 120
	<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. Stop 35		Transaction ID: SB17-EX2316 Date of Disbursement 09 / 23 / 2003	
Mailing Address Street Required			
City Mifflintown	State PA	Zip Code 17059	Amount of Each Disbursement this Period 22.23
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Travel Expenses Meals
State: District			

Full Name (Last, First, Middle Initial) B. Zachs Sports And Spirits		Transaction ID: SB17-EX2317 Date of Disbursement 09 / 23 / 2003	
Mailing Address 5820 Sixth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 74.14
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Travel Expenses Meals
State: District			

Full Name (Last, First, Middle Initial) C. The Everett Flower Shop		Transaction ID: SB17-EX2318 Date of Disbursement 09 / 23 / 2003	
Mailing Address 40 North Spring Street			
City Everett	State PA	Zip Code 15537	Amount of Each Disbursement this Period 47.70
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Administrative/Salary/Overhead Expenses Office Expenses
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	144.07
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 103 / 120
	<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. CVS Pharmacy		Transaction ID: SB17-EX2319 Date of Disbursement 09 / 23 / 2003	
Mailing Address 3200 Pleasant Valley Blvd		Amount of Each Disbursement this Period 3.83 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
City Altoona	State PA		Zip Code 16602
Purpose of Disbursement Expenditure			001 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Sheetz Inc		Transaction ID: SB17-EX2323 Date of Disbursement 09 / 23 / 2003	
Mailing Address 5700 Sixth Avenue		Amount of Each Disbursement this Period 14.75 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Administrative/Salary/Ove- rhead Expenses Vehicle Ex- penses	
City Altoona	State PA		Zip Code 16602
Purpose of Disbursement Expenditure			001 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Sheetz Inc		Transaction ID: SB17-EX2322 Date of Disbursement 09 / 23 / 2003	
Mailing Address 5700 Sixth Avenue		Amount of Each Disbursement this Period 14.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Administrative/Salary/Ove- rhead Expenses Vehicle Ex- penses	
City Altoona	State PA		Zip Code 16602
Purpose of Disbursement Expenditure			001 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	32.58
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 104 / 120
	<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. Sheetz Inc		Transaction ID: SB17-EX2321	
Mailing Address 5700 Sixth Avenue		Date of Disbursement 09 / 23 / 2003	
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 17.65
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼	General	Administrative/Salary/Overhead Expenses Vehicle Expenses
State: District			

Full Name (Last, First, Middle Initial) B. Sheetz Inc		Transaction ID: SB17-EX2320	
Mailing Address 5700 Sixth Avenue		Date of Disbursement 09 / 23 / 2003	
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼	General	Administrative/Salary/Overhead Expenses Vehicle Expenses
State: District			

Full Name (Last, First, Middle Initial) C. Eckerd Drug		Transaction ID: SB17-EX2324	
Mailing Address 3331 Pleasant Valley		Date of Disbursement 09 / 23 / 2003	
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 24.40
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼	General	Administrative/Salary/Overhead Expenses Office Expenses
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	142.05
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)				PAGE 105 / 120
	<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. Thompson Pharmacy		Transaction ID: SB17-EX2326 Date of Disbursement 09 / 23 / 2003	
Mailing Address 600 E. Chestnut Avenue			
City Altoona	State PA	Zip Code 16601	Amount of Each Disbursement this Period 254.88
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

Full Name (Last, First, Middle Initial) B. A.C. Moore		Transaction ID: SB17-EX2326 Date of Disbursement 09 / 23 / 2003	
Mailing Address 516-520 W. Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 34.68
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

Full Name (Last, First, Middle Initial) C. Jo-Ann Fabrics		Transaction ID: SB17-EX2327 Date of Disbursement 09 / 23 / 2003	
Mailing Address Pleasant Valley Shopping Center			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 14.68
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	304.22
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)				PAGE 106 / 120
	<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. Thompson Pharmacy		Transaction ID: SB17-EX2328 Date of Disbursement 09 / 23 / 2003	
Mailing Address 600 E. Chestnut Avenue			
City Altoona	State PA	Zip Code 16601	Amount of Each Disbursement this Period 87.25
Purpose of Disbursement Expenditure		OD1 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

Full Name (Last, First, Middle Initial) B. A.C. Moore		Transaction ID: SB17-EX2328 Date of Disbursement 09 / 23 / 2003	
Mailing Address 516-520 W. Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 15.08
Purpose of Disbursement Expenditure		OD1 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

Full Name (Last, First, Middle Initial) C. Copy Rite		Transaction ID: SB17-EX2330 Date of Disbursement 09 / 23 / 2003	
Mailing Address 301 Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 119.78
Purpose of Disbursement Expenditure		OD1 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	222.11
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 107 / 120
	<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. Staples-291		Transaction ID: SB17-EX2331 Date of Disbursement 09 / 23 / 2003	
Mailing Address Plank Road/Orchard Plaza			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 84.77
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

Full Name (Last, First, Middle Initial) B. Staples-291		Transaction ID: SB17-EX2335 Date of Disbursement 09 / 23 / 2003	
Mailing Address Plank Road/Orchard Plaza			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 101.05
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

Full Name (Last, First, Middle Initial) C. Keystone Novelty		Transaction ID: SB17-EX2333 Date of Disbursement 09 / 23 / 2003	
Mailing Address 1315 Pleasant Valley Blvd			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 38.22
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	225.04
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 108 / 120
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. US Postal Service		Transaction ID: SB17-EX2334 Date of Disbursement 09 / 23 / 2003	
Mailing Address 525 Allegheny Street		Amount of Each Disbursement this Period 3.95	
City Hollidaysburg	State PA	Zip Code 16848	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		Administrative/Salary/Ove- rhead Expenses Postage	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Allegro Restaurant		Transaction ID: SB17-EX2336 Date of Disbursement 09 / 23 / 2003	
Mailing Address 3926 Broad Avenue		Amount of Each Disbursement this Period 677.88	
City Altoona	State PA	Zip Code 16601	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name		Administrative/Salary/Ove- rhead Expenses Meals	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. A.C. Moore		Transaction ID: SB17-EX2337 Date of Disbursement 09 / 23 / 2003	
Mailing Address 518-520 W. Plank Road		Amount of Each Disbursement this Period 34.42	
City Altoona	State PA	Zip Code 16602	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	716.25
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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. The Dream Restaurant		Transaction ID: SB17-EX2338	
Mailing Address 1500 Allegheny Street		Date of Disbursement 09 / 23 / 2003	
City Holidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 24.24
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		Administrative/Salary/Ove- rhead Expenses Meals

SUBTOTAL of Disbursements This Page (optional)	▶	24.24
TOTAL This Period (last page this line number only)	▶	65106.50

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 110 / 120
	<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. Daily American		Transaction ID: SB17-EX2078 Date of Disbursement 07 / 03 / 2003
Mailing Address 334 W Main Street PO Box 638		Amount of Each Disbursement this Period 2000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Donations Donations
City Somerset	State PA Zip Code 15501	
Purpose of Disbursement Expenditure	012 Category/ Type	
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Golden Tiger Football Assoc		Transaction ID: SB17-EX2081 Date of Disbursement 07 / 14 / 2003
Mailing Address RR 2 Box 242B		Amount of Each Disbursement this Period 100.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Tickets for the Pig Roast Promotional Tickets
City Hollidaysburg	State PA Zip Code 16648	
Purpose of Disbursement Expenditure	012 Category/ Type	
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tyrone Area YMCA		Transaction ID: SB17-EX2098 Date of Disbursement 07 / 14 / 2003
Mailing Address 1082 Logan Avenue		Amount of Each Disbursement this Period 30.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Pavilion Rental Donations
City Tyrone	State PA Zip Code 16888	
Purpose of Disbursement Expenditure	012 Category/ Type	
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	2130.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 111 / 120
	<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. Mistri		Transaction ID: SB17-EX2100 Date of Disbursement 07 / 14 / 2003	
Mailing Address 318 Maryland Avenue, NE			
City Washington	State DC	Zip Code 20002	Amount of Each Disbursement this Period 160.00
Purpose of Disbursement Expenditure Candidate Name		012 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		Donations Donations
State: District			

Full Name (Last, First, Middle Initial) B. Debbie S King For Treasurer		Transaction ID: SB17-EX2101 Date of Disbursement 07 / 14 / 2003	
Mailing Address 530 Garber Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Expenditure Candidate Name		011 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		Local contribution Political Contributions
State: District			

Full Name (Last, First, Middle Initial) C. Indiana Council Of Rep Women		Transaction ID: SB17-EX2103 Date of Disbursement 07 / 14 / 2003	
Mailing Address 1250 Oak Street			
City Indiana	State PA	Zip Code 15701	Amount of Each Disbursement this Period 12.00
Purpose of Disbursement Expenditure Candidate Name		012 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		Flag Day Luncheon ticket Promotional Tickets
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	1172.00
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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17 20a 18 20b 19a 20c 19b 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Evangelical Lutheran Church		Transaction ID: SB17-EX2104 Date of Disbursement 07 / 14 / 2003	
Mailing Address 130 N. Washington Street			
City Greencastle State PA Zip Code 17225	Amount of Each Disbursement this Period 25.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Purpose of Disbursement Expenditure Candidate Name	012 Category/ Type		
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		
		In memory of John Landis Grove Donations	

Full Name (Last, First, Middle Initial) B. Fedeli		Transaction ID: SB17-EX2105 Date of Disbursement 07 / 14 / 2003	
Mailing Address RD 2			
City Tyrone State PA Zip Code 16686	Amount of Each Disbursement this Period 25.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Purpose of Disbursement Expenditure Candidate Name	012 Category/ Type		
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		
		In memory of Albert F Amato Donations	

Full Name (Last, First, Middle Initial) C. US Hotel Restaurant		Transaction ID: SB17-EX2108 Date of Disbursement 07 / 03 / 2003	
Mailing Address 401 South Juniata Street			
City Hollidaysburg State PA Zip Code 16848	Amount of Each Disbursement this Period 1214.01 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Purpose of Disbursement Expenditure Candidate Name	011 Category/ Type		
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		
		In-kind DSK for Treasurer Political Contributions	

SUBTOTAL of Disbursements This Page (optional)	1264.01
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)				PAGE 113 / 120
	<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. Bush-Cheney 04 Inc.		Transaction ID: SB17-EX2127 Date of Disbursement 07 / 17 / 2003	
Mailing Address PO Box 10648			
City Arlington	State VA	Zip Code 22210	Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 George W Bush Presidential 00 (DC) Political Contributions
Purpose of Disbursement Expenditure		011 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Parker		Transaction ID: SB17-EX2147 Date of Disbursement 07 / 25 / 2003	
Mailing Address 7968 Lincoln Way West Saint Thomas, PA			
City Saint Thomas	State PA	Zip Code 17252	Amount of Each Disbursement this Period 29.86 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Dinner ticket and door prize Promotional Tickets
Purpose of Disbursement Expenditure		012 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Huntingdon Co. EMS Ptr.		Transaction ID: SB17-EX2165 Date of Disbursement 08 / 04 / 2003	
Mailing Address 302 Eighth Street			
City Huntingdon	State PA	Zip Code 16852	Amount of Each Disbursement this Period 250.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Annual EMS dinner tickets Promotional Tickets
Purpose of Disbursement Expenditure		012 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	1279.86
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 114 / 120
	<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. Larry O. Sather Campaign		Transaction ID: SB17-EX2168 Date of Disbursement 08 / 04 / 2003	
Mailing Address 302 Eighth Street			
City Huntingdon	State PA	Zip Code 16852	Amount of Each Disbursement this Period 250.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		012 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼	General	Spaghetti fundraiser tickets Promotional Tickets
State: District			

Full Name (Last, First, Middle Initial) B. National MS Society		Transaction ID: SB17-EX2170 Date of Disbursement 08 / 08 / 2003	
Mailing Address 506 Third Avenue			
City Duncansville	State PA	Zip Code 16835	Amount of Each Disbursement this Period 75.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		012 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼	General	Donation-MS 150 Ride Donations
State: District			

Full Name (Last, First, Middle Initial) C. Huntingdon Co. Jr. Livestock		Transaction ID: SB17-EX2221 Date of Disbursement 08 / 14 / 2003	
Mailing Address Street Required			
City Huntingdon	State PA	Zip Code 16852	Amount of Each Disbursement this Period 354.12 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		012 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼	General	Livestock auction Donations
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	679.12
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)				PAGE 115 / 120
	<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. Fulton Co Youth Livestock		Transaction ID: SB17-EX2280 Date of Disbursement 08 / 22 / 2003	
Mailing Address 216 North Second Street Suite One		Amount of Each Disbursement this Period 300.00	
City Mc Connellsburg	State PA	Zip Code 17233	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		012 Category/ Type	
Candidate Name		Livestock Auction Donations	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Franklin Co Area Dev Corp.		Transaction ID: SB17-EX2246 Date of Disbursement 09 / 03 / 2003	
Mailing Address 1900 Wayne Road		Amount of Each Disbursement this Period 150.00	
City Chambersburg	State PA	Zip Code 17201	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		012 Category/ Type	
Candidate Name		Industry Appreciation dinner ticket Promotional Tickets	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Lifetime of Leadership		Transaction ID: SB17-EX2289 Date of Disbursement 09 / 23 / 2003	
Mailing Address PO Box 2054		Amount of Each Disbursement this Period 375.00	
City Altoona	State PA	Zip Code 16803	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		012 Category/ Type	
Candidate Name		Administrative/Salary/Overhead Expenses Promotional Tickets	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	825.00
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 116 / 120
	<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. Huntingdon Co. Republican Comm		Transaction ID: SB17-EX2290 Date of Disbursement 09 / 23 / 2003	
Mailing Address PO Box 61			
City Huntingdon	State PA	Zip Code 16852	Amount of Each Disbursement this Period 250.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Administrative/Salary/Overhead Expenses Promotional Tickets
Purpose of Disbursement Expenditure Candidate Name		012 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Somerset Jr. Livestock Sale Committee		Transaction ID: SB17-EX2297 Date of Disbursement 09 / 23 / 2003	
Mailing Address 291 Poverty Hollow Road			
City Somerset	State PA	Zip Code 15501	Amount of Each Disbursement this Period 640.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Donations Donations
Purpose of Disbursement Expenditure Candidate Name		012 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Bedford Co. Republican Comm		Transaction ID: SB17-EX2901 Date of Disbursement 09 / 30 / 2003	
Mailing Address 368 Lohr Road			
City Schellsburg	State PA	Zip Code 15559	Amount of Each Disbursement this Period 120.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Donations Promotional Tickets
Purpose of Disbursement Expenditure Candidate Name		012 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1010.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
 (check only one)

PAGE 117 / 120

<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 Republican Party		Transaction ID: SB17-EX2305	
Mailing Address 1250 Oak Street		Date of Disbursement 09 / 30 / 2003	
City Indiana	State PA	Zip Code 15701	Amount of Each Disbursement this Period 40.00
Purpose of Disbursement Expenditure		012 Category/ Type	
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		Donations Promotional Tic- kets

SUBTOTAL of Disbursements This Page (optional)	▶	40.00
TOTAL This Period (last page this line number only)	▶	8399.99

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 118 / 120
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 13a <input checked="" type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Transaction ID: SC10-LN7

LOAN SOURCE Full Name (Last, First, Middle Initial) First National Bank	Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 101 Lincoln Way West	
City Mc Connellsburg State PA ZIP Code 17233	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5577.50	5577.50	.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
06 th 14 th 2002	20040614	8.9970% (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	0.00
TOTALS This Period (last page in this line only)	0.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 9
 10

NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

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

Nature of Debt (Purpose):
 Invoice: 814 686 0225 808
 28 Y Administr

Mailing Address PO Box 8585

City State ZIP Code
 Philadelphia PA 19173

Outstanding Balance Beginning This Period

Transaction ID: SD10-INV2261

.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

154.12

.00

154.12

1) SUBTOTALS This Period This Page (optional)	▶	154.12
2) TOTALS This Period (last page this line number only)	▶	154.12
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)	▶	

