

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines.  12FE4M5  
PENNSYLVANIA BILL PAC

ADDRESS (number and street)  PO BOX 27  
 Check if different than previously reported. (ACC)  
HOLLIDAYSBURG PA 16648  
CITY STATE ZIP CODE

2. **FEC IDENTIFICATION NUMBER**  C C00364935  
3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
STATE DISTRICT  
PA

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  M M /  D D /  Y Y Y Y in the State of   
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  M M /  D D /  Y Y Y Y in the State of

5. Covering Period  M M /  D D /  Y Y Y Y through  M M /  D D /  Y Y Y Y  
07 / 01 / 2019 through 09 / 30 / 2019

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 KILGORE, PAUL, , ,  
Signature of Treasurer KILGORE, PAUL, , , [Electronically Filed] Date  M M /  D D /  Y Y Y Y  
08 / 08 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**PENNSYLVANIA BILL PAC**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	0.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	1136.07	32595.05
(b) Total Offsets to Operating Expenditures (from Line 14).....	252.07	434.07
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	884.00	32160.98
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>		
	0.00	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**PENNSYLVANIA BILL PAC**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	0.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	252.07	434.07
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	252.07	434.07

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 9

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1136.07	32595.05
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	629209.99	629209.99
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	- 250.00	1500.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	630096.06	663305.04

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	629843.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	252.07
25. SUBTOTAL (add Line 23 and Line 24).....	630096.06
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	630096.06
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3T  
Transaction ID :

THE 7/3/2019 EXPENSE TO WILLIAM SHUSTER STEMS FROM THE REFUND THE CAMPAIGN RECEIVED ON THE SAME DAY FROM STATE FARM INSURANCE. AN INSURANCE POLICY ON THE FORMER CAMPAIGN VEHICLE WAS PAID BY MR. SHUSTER PERSONALLY. THERE WAS AN OVERPAYMENT MADE ON THE ACCOUNT AND A REFUND ISSUED TO THE CAMPAIGN. INSTEAD OF ASKING FOR A NEW REFUND TO BE ISSUED TO MR. SHUSTER THE REFUND WAS DEPOSITED AND REIMBURSED TO MR. SHUSTER TO SETTLE THE MATTER.

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 6 OF 9  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**PENNSYLVANIA BILL PAC**

**A.** Full Name (Last, First, Middle Initial)  
**STATE FARM**

Mailing Address 3 RAVINA DRIVE

City ATLANTA State GA Zip Code 30346

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 03 2019

Transaction ID : SA14.4148

Amount of Each Receipt this Period  
 252.07

Memo Item  
REFUND

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	252.07
<b>TOTAL</b> This Period (last page this line number only).....▶	252.07

**SCHEDULE 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 7 OF 9	
	<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)  
**PENNSYLVANIA BILL PAC**

Full Name (Last, First, Middle Initial)  
**A. PROFESSIONAL DATA SERVICES**

Mailing Address 824 S MILLEDGE AVE STE 101

City ATHENS State GA Zip Code 30605

Purpose of Disbursement COMPLIANCE SERVICES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 07 / 26 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 768.00

Transaction ID : SB17.4151

Memo Item

Full Name (Last, First, Middle Initial)  
**B. S&T BANK**

Mailing Address 1100 LOGAN BLVD

City ALTOONA State PA Zip Code 16602

Purpose of Disbursement BANK FEE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 07 / 23 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 80.00

Transaction ID : SB17.4152

Memo Item

Full Name (Last, First, Middle Initial)  
**C. S&T BANK**

Mailing Address 1100 LOGAN BLVD

City ALTOONA State PA Zip Code 16602

Purpose of Disbursement BANK FEE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 07 / 31 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 36.00

Transaction ID : SB17.4154

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 884.00

**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 8 OF 9	
	<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)  
**PENNSYLVANIA BILL PAC**

Full Name (Last, First, Middle Initial) <b>A. SHUSTER, WILLIAM, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2019	
Mailing Address 455 OVERLOOK DR			FEC Identification Number C H2PA09035	
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 252.07	
Purpose of Disbursement REIMBURSEMENT FOR STATE FARM REFUND		Category/ Type 001	Transaction ID : SB17.4150	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: PA District: 09				

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	252.07
<b>TOTAL</b> This Period (last page this line number only).....▶	1136.07

**SCHEDULE 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 9 OF 9
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PENNSYLVANIA BILL PAC**

**A. BILL PAC**

Full Name (Last, First, Middle Initial)

Mailing Address 824 S. MILLEDGE AVE. STE. 101

City ATHENS State GA Zip Code 30605

Purpose of Disbursement TRANSFER TO AFFILIATED Category/Type 008

Candidate Name

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

State: District:

Date of Disbursement 08 / 02 / 2019

FEC Identification Number C C00412288

Amount of Each Disbursement this Period 629209.99

Transaction ID : SB18.4160

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	629209.99
<b>TOTAL</b> This Period (last page this line number only).....▶	629209.99