

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 16648

2. **FEC IDENTIFICATION NUMBER** C00364935
CITY STATE ZIP CODE
STATE DISTRICT
3. IS THIS REPORT NEW (N) OR AMENDED (A)
PA 09

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

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 04 22 2008 in the State of PA
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 01 01 2008 through 04 02 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Frederick A Ciocca

Signature of Treasurer Electronically Filed by Frederick A Ciocca Date 04 10 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Bill Shuster for Congress

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	4

D	D
0	2

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	135480.00	598682.47
(b) Total Contribution Refunds (from Line 20(d)).....	250.00	250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	135230.00	598432.47
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	47693.05	413448.81
(b) Total Offsets to Operating Expenditures (from Line 14).....	.00	1823.35
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	47693.05	411625.46
8. Cash on Hand at Close of Reporting Period (from Line 27).....	273620.92	
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).....	15279.94	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
 Bill Shuster for Congress

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	4

D	D
0	2

Y	Y	Y	Y
2	0	0	8

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).....

79900.00

309587.47

(ii) Unitemized.....

1430.00

21145.00

(iii) TOTAL of contributions

81330.00

330732.47

from individuals..... ▶

.00

.00

(b) Political Party Committees.....

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

54150.00

267950.00

(d) The Candidate.....

.00

.00

(e) TOTAL CONTRIBUTIONS (other than loans)

135480.00

598682.47

(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

30000.00

(c) TOTAL LOANS

.00

30000.00

(add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

.00

1823.35

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

.00

.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

135480.00

630505.82

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	47693.05	413448.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	.00	.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	.00	.00
(b) Of all Other Loans.....	.00	15000.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	.00	15000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	250.00	250.00
(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)).....	250.00	250.00
21. OTHER DISBURSEMENTS.....	2093.46	20069.50
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	50036.51	448768.31

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	188177.43
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	135480.00
25. SUBTOTAL (add Line 23 and Line 24).....	323657.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	50036.51
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	273620.92

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 113
(check only one)

<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

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

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Ralph J Albarano, Jr.

Mailing Address PO Box 806

City State Zip Code
Duncansville PA 16635

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

Name of Employer Occupation
R. J. Albarano & Sons Inc. Builder/Developer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
02 / 21 / 2008

Transaction ID: SA11Ai-CN6006

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

1050.00

B.

Full Name (Last, First, Middle Initial)
Thomas J Balestrieri

Mailing Address 115 Rock Haven Ln

City State Zip Code
Pittsburgh PA 15228

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

Name of Employer Occupation
The Buncher Company Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
02 / 21 / 2008

Transaction ID: SA11Ai-CN6001

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

500.00

C.

Full Name (Last, First, Middle Initial)
Sonia Singh Balhara

Mailing Address 3325 Muirfield Dr

City State Zip Code
Chambersburg PA 17201

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

Name of Employer Occupation
None None

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 26 / 2008

Transaction ID: SA11Ai-CN6094

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

1000.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 113
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

<p>A. Full Name (Last, First, Middle Initial) David E Barenfeld</p> <p>Mailing Address PO Box 889</p> <p>City State Zip Code Ellwood City PA 16117</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Ellwood Group Inc President & CEO</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">500.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 11 / 2008</p> <p>Transaction ID: SA11Ai-CN6038</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Joshua E Barnhart</p> <p>Mailing Address 822 Walnut St</p> <p>City State Zip Code Roaring Spring PA 16673</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation NPC Inc. Sales/Business Development</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">600.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 26 / 2008</p> <p>Transaction ID: SA11Ai-CN6119</p> <p>Amount of Each Receipt this Period 600.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Mark N Barnhart</p> <p>Mailing Address 822 Walnut Street</p> <p>City State Zip Code Roaring Spring PA 16673</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation NPC Inc. CEO</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">600.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 26 / 2008</p> <p>Transaction ID: SA11Ai-CN6118</p> <p>Amount of Each Receipt this Period 600.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	1700.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 113
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<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

A.	Full Name (Last, First, Middle Initial) Robert J Beiter, Jr		Date of Receipt
	Mailing Address 898 Truax Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Everett	PA	15537
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11Ai-CN5994
Name of Employer Szanca Solutions Inc		Occupation Research Analyst	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Mr. Harry K Benjamin		Date of Receipt
	Mailing Address 3412 Crescent Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 3 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Altoona	PA	16602
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11Ai-CN6142
Name of Employer Edgemate Inc		Occupation President	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 600.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) John R Bittner		Date of Receipt
	Mailing Address 470 Forbes Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 3 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Bedford	PA	15522
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11Ai-CN6126
Name of Employer Snyder's Gateway Inc		Occupation Manager	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1400.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 113
(check only one)

<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

A.

Full Name (Last, First, Middle Initial)
Jeanne M Bolger

Mailing Address 109 Allegheny St (Rear) E

City State Zip Code
Martinsburg PA 16662

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

Name of Employer Blair County Occupation Jury Commissioner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2008

Transaction ID: SA11Ai-CN6116

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Peggy J Bosma-LaMascus

Mailing Address 120 Kenwood Road

City State Zip Code
Chambersburg PA 17201

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

Name of Employer Patriot Federal Credit Union Occupation President/CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2075.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: SA11Ai-CN6153

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Christopher E Bossi

Mailing Address 405 Granada Way

City State Zip Code
Altoona PA 16601

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

Name of Employer INRange Systems Inc. Occupation President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2008

Transaction ID: SA11Ai-CN6114

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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

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

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

FOR LINE NUMBER: PAGE 9 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Harold L Brake

Mailing Address 224 Rhondel Drive
PO Box 275

City State Zip Code
Saint Thomas PA 17252

FEC ID number of contributing federal political committee. C

Name of Employer Charles E Brake Co Inc Occupation Chairman

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt M M / D D / Y Y Y Y
03 / 11 / 2008

Transaction ID: SA11Ai-CN6057

Amount of Each Receipt this Period 1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Randall L Brake

Mailing Address 420 Lindman Drive

City State Zip Code
Chambersburg PA 17201

FEC ID number of contributing federal political committee. C

Name of Employer Charles E Brake Co Inc Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 650.00

Date of Receipt M M / D D / Y Y Y Y
03 / 11 / 2008

Transaction ID: SA11Ai-CN6056

Amount of Each Receipt this Period 650.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Art G Bruaw, Jr.

Mailing Address PO Box 277

City State Zip Code
Saint Thomas PA 17252

FEC ID number of contributing federal political committee. C

Name of Employer E. C. Barnes Inc Occupation President/Distributor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt M M / D D / Y Y Y Y
02 / 22 / 2008

Transaction ID: SA11Ai-CN6008

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2650.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 113
	<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

A.	Full Name (Last, First, Middle Initial) Nancy P Campbell		Date of Receipt
	Mailing Address 167 Mountain View Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 28 / 2008
	City Hollidaysburg	State PA	Zip Code 16648
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11Ai-CN6127
	Amount of Each Receipt this Period		500.00
Name of Employer Hoss's Steak & Sea Houses		Occupation Owner	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008	Election Cycle-to-Date ▼		
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1150.00		

B.	Full Name (Last, First, Middle Initial) Geoffrey D Caruso		Date of Receipt
	Mailing Address 50 Windsor St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 19 / 2008
	City Indiana	State PA	Zip Code 15701
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11Ai-CN6078
	Amount of Each Receipt this Period		500.00
Name of Employer MobilVox		Occupation Senior Software Engineer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008	Election Cycle-to-Date ▼		
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	500.00		

C.	Full Name (Last, First, Middle Initial) Morley A Cohn		Date of Receipt
	Mailing Address 4305 2nd Ave		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2008
	City Altoona	State PA	Zip Code 16602
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11Ai-CN6183
	Amount of Each Receipt this Period		200.00
Name of Employer Kopp Drug		Occupation Pharmacist/President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008	Election Cycle-to-Date ▼		
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	500.00		

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Richard J Corman

Mailing Address 1409 Jessamine Station Rd

City State Zip Code
Nicholasville KY 40356

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

Name of Employer Occupation
Owner R.J. Corman Railroad

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	8

Transaction ID: SA11Ai-CN6158

Amount of Each Receipt this Period
4600.00

2300 primary 2300 general

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Richard J Corman

Mailing Address 1409 Jessamine Station Rd

City State Zip Code
Nicholasville KY 40356

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

Name of Employer Occupation
Owner R.J. Corman Railroad

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	8

Transaction ID: SA11Ai-CN6159

Amount of Each Receipt this Period
-2300.00

Redesignated to 2008 General

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]
Redesignated

C. Full Name (Last, First, Middle Initial)
Richard J Corman

Mailing Address 1409 Jessamine Station Rd

City State Zip Code
Nicholasville KY 40356

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

Name of Employer Occupation
Owner R.J. Corman Railroad

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	8

Transaction ID: SA11Ai-CN6160

Amount of Each Receipt this Period
2300.00

Redesignated from 2008 Primary

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]
Redesignation

SUBTOTAL of Receipts This Page (optional) ▶ **4600.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 113
(check only one)

<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

A.

Full Name (Last, First, Middle Initial)
Polly Degol

Mailing Address RD 5 Box 253-A

City Tyrone State PA Zip Code 16686

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

Name of Employer None Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt MM / DD / YYYY
03 / 26 / 2008

Transaction ID: SA11Ai-CN6106

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Donald L Detwiler

Mailing Address 233 Stonehedge Road

City Hollidaysburg State PA Zip Code 16648

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

Name of Employer New Enterprise Stone and Lime Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2200.00

Date of Receipt MM / DD / YYYY
03 / 11 / 2008

Transaction ID: SA11Ai-CN6053

Amount of Each Receipt this Period 600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Paul I Detwiler, III

Mailing Address 5029 Pennknoll Heights

City Everett State PA Zip Code 15537

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

Name of Employer New Enterprise Stone and Lime Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY
03 / 19 / 2008

Transaction ID: SA11Ai-CN6073

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **2100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 113
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<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

A.	Full Name (Last, First, Middle Initial) Donald Devorris		Date of Receipt MM / DD / YYYY 03 / 19 / 2008
	Mailing Address 304 E Ward Avenue		Transaction ID: SA11Ai-CN6074
	City Altoona	State PA	Zip Code 16602
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Blair Electric Services	Occupation President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3100.00		

B.	Full Name (Last, First, Middle Initial) John J Dolan		Date of Receipt MM / DD / YYYY 02 / 21 / 2008
	Mailing Address 145 N Seventh Street		Transaction ID: SA11Ai-CN6002
	City Indiana	State PA	Zip Code 15701
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer First Commonwealth Financial	Occupation President & CEO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00		

C.	Full Name (Last, First, Middle Initial) Hampton H Durbin		Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 509 East 26th Avenue		Transaction ID: SA11Ai-CN6144
	City Altoona	State PA	Zip Code 16601
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
	Name of Employer Durbin and Associates	Occupation Contractor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00		

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 14 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
James W Dyer

Mailing Address 3833 Whitman Rd

City Annandale State VA Zip Code 22003

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

Name of Employer Clark & Weinstock Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 02 / 21 / 2008
Transaction ID: SA11Ai-CN6007
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
James A Filson

Mailing Address RD 1 Box 203

City Hesston State PA Zip Code 16647

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

Name of Employer Seven Points Marina Occupation President & Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 03 / 11 / 2008
Transaction ID: SA11Ai-CN6045
 Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Harold C Gabler, Jr.

Mailing Address 691 Montgomery Avenue

City Chambersburg State PA Zip Code 17201

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

Name of Employer H C Gabler Inc Occupation COB

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 03 / 26 / 2008
Transaction ID: SA11Ai-CN6093
 Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 113
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<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

A.	Full Name (Last, First, Middle Initial) Linda G Gabler		Date of Receipt MM / DD / YYYY 03 / 26 / 2008
	Mailing Address 3718 Eucalyptus Ct		Transaction ID: SA11Ai-CN6099
	City Chambersburg	State PA	Zip Code 17201
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 650.00
	Name of Employer None	Occupation Homemaker	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 650.00		

B.	Full Name (Last, First, Middle Initial) Maxine L Gindlesperger		Date of Receipt MM / DD / YYYY 03 / 26 / 2008
	Mailing Address 295 Stonehedge Cir S		Transaction ID: SA11Ai-CN6101
	City Chambersburg	State PA	Zip Code 17201
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
	Name of Employer e-lynxx Corporation	Occupation COO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3075.00		

C.	Full Name (Last, First, Middle Initial) Maxine L Gindlesperger		Date of Receipt MM / DD / YYYY 03 / 26 / 2008
	Mailing Address 295 Stonehedge Cir S		Transaction ID: SA11Ai-CN6167
	City Chambersburg	State PA	Zip Code 17201
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -775.00
	Name of Employer e-lynxx Corporation	Occupation COO	Reattributed to William Gindlesperger <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] Reattributed
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		

SUBTOTAL of Receipts This Page (optional)	▶	2150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
William A Gindlesperger

Mailing Address 295 Stonegate Cir S

City Chambersburg State PA Zip Code 17201

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

Name of Employer e-Lynxx Corporation Occupation CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 775.00

Date of Receipt 03 / 26 / 2008
Transaction ID: SA11Ai-CN6168
 Amount of Each Receipt this Period 775.00

Reattributed from Maxine Gindlesperger
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Reattribution

B. Full Name (Last, First, Middle Initial)
Janet R Gleason

Mailing Address 255 Silver Birch Lane

City Johnstown State PA Zip Code 15905

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

Name of Employer None Occupation Housewife

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 03 / 04 / 2008
Transaction ID: SA11Ai-CN6033
 Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Michael P Gleason

Mailing Address 2313 Engelwood Drive

City Pittsburgh State PA Zip Code 15241

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

Name of Employer The Gleason Group Occupation Vice President/Insurance

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 11 / 2008
Transaction ID: SA11Ai-CN6039
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2800.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 113
(check only one)

<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

A.

Full Name (Last, First, Middle Initial)
Robert A Gleason, III

Mailing Address 930 Windan Ln

City Johnstown State PA Zip Code 15905

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

Name of Employer The Gleason Group Occupation Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 11 / 2008

Transaction ID: SA11Ai-CN6040

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Edmund C Graber

Mailing Address 10102 Lawyers Road

City Vienna State VA Zip Code 22181

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

Name of Employer Edmund Graber Associates Occupation Consultant-Government Affairs

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 19 / 2008

Transaction ID: SA11Ai-CN6088

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Ellis J Griffith

Mailing Address HCR 1 Box 54

City Broad Top State PA Zip Code 16621

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

Name of Employer Self Employed Occupation Retired/Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 26 / 2008

Transaction ID: SA11Ai-CN6115

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
William J Haberstroh

Mailing Address 45 Sylvan Heights Dr

City Hollidaysburg State PA Zip Code 16648

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 650.00

Date of Receipt 03 / 11 / 2008
Transaction ID: SA11Ai-CN6054

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
William G Harris

Mailing Address 502 Cherry Lane

City Johnstown State PA Zip Code 15904

FEC ID number of contributing federal political committee. C

Name of Employer Cambria County Occupation County Commissioner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 19 / 2008
Transaction ID: SA11Ai-CN6071

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Daniel R Hawbaker

Mailing Address 5881 Buffalo Run Rd W

City Port Matilda State PA Zip Code 16870

FEC ID number of contributing federal political committee. C

Name of Employer Glenn O Hawbaker Inc Occupation Construction-Real Estate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 11 / 2008
Transaction ID: SA11Ai-CN6041

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 113
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<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

A.	Full Name (Last, First, Middle Initial) John D Helman	Date of Receipt MM / DD / YYYY 03 / 26 / 2008
	Mailing Address 1350 Spring Side Dr W	Transaction ID: SA11Ai-CN6095
	City State Zip Code Chambersburg PA 17201	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Brechbill Helman Construction Co	Occupation Project Manager	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) R Lee Hite	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 501 Beaumont Drive	Transaction ID: SA11Ai-CN6143
	City State Zip Code Altoona PA 16602	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer The Hite Company	Occupation President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2050.00	

C.	Full Name (Last, First, Middle Initial) Rick Ianieri	Date of Receipt MM / DD / YYYY 03 / 04 / 2008
	Mailing Address 2249 Turk Rd	Transaction ID: SA11Ai-CN6027
	City State Zip Code Doylestown PA 18901	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Coherent Systems International	Occupation President & CEO	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Harry D Johnston

Mailing Address 1207 Back Run Road

City State Zip Code
Mc Connellsburg PA 17233

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

Name of Employer Self Employed Occupation
Self Employed Physician-General Practitioner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 19 / 2008

Transaction ID: SA11Ai-CN6075

Amount of Each Receipt this Period
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Dr. John P Joyce, MD

Mailing Address 1101 Logan Blvd

City State Zip Code
Altoona PA 16602

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

Name of Employer Self Employed Occupation
Self Employed Dermatologist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 11 / 2008

Transaction ID: SA11Ai-CN6043

Amount of Each Receipt this Period
600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Joseph G Keller

Mailing Address 120 Queen Anne Drive

City State Zip Code
Hollidaysburg PA 16648

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

Name of Employer Keller Engineering Inc Occupation
Keller Engineering Inc Civil Engineer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 13 / 2008

Transaction ID: SA11Ai-CN6060

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1400.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 113
(check only one)

<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

A. Full Name (Last, First, Middle Initial)
Dennis M Kelly

Mailing Address 600 Cove Lane

City State Zip Code
Roaring Spring PA 16673

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: SA11Ai-CN6149

Amount of Each Receipt this Period
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Sandra L Kinzer

Mailing Address 463 Baltimore St E

City State Zip Code
Greencastle PA 17225

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

Name of Employer Century Inc Occupation Bookkeeper

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
03 / 26 / 2008

Transaction ID: SA11Ai-CN6104

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
D. Scott Kroh

Mailing Address 809 Neldon St

City State Zip Code
Latrobe PA 15650

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

Name of Employer Robindale Energy Services Inc Occupation President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
03 / 03 / 2008

Transaction ID: SA11Ai-CN6016

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1800.00**

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

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

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

FOR LINE NUMBER: PAGE 22 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Lena C Kuchera
Mailing Address 1800 Dolphin Dr
City Johnstown State PA Zip Code 15904
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt 03 / 04 / 2008
Transaction ID: SA11Ai-CN6030
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Lena C Kuchera
Mailing Address 1800 Dolphin Dr
City Johnstown State PA Zip Code 15904
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00
Date of Receipt 03 / 28 / 2008
Transaction ID: SA11Ai-CN6138
Amount of Each Receipt this Period 300.00
Split with William
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ronald Kuchera
Mailing Address 1125 Weaver Rd
City Johnstown State PA Zip Code 15904
FEC ID number of contributing federal political committee. **C**
Name of Employer Kuchera Industries Occupation CFO
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 03 / 04 / 2008
Transaction ID: SA11Ai-CN6031
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
William Kuchera, Jr

Mailing Address 1800 Dolphin Dr

City State Zip Code
Johnstown PA 15904

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

Name of Employer Occupation
Kuchera Industries CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	0	8

Transaction ID: SA11Ai-CN6139

Amount of Each Receipt this Period
300.00

Split with Lena
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
P Joseph Lehman, Jr.

Mailing Address 315 Quince Ct

City State Zip Code
Hollidaysburg PA 16648

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

Name of Employer Occupation
P Joseph Lehman Inc Engineer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	1	/	2	0	0	8

Transaction ID: SA11Ai-CN6049

Amount of Each Receipt this Period
600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Enrique J Lenz

Mailing Address 1303 Aldbury Way

City State Zip Code
Reston VA 20194

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

Name of Employer Occupation
MobilVox President - CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	0	8

Transaction ID: SA11Ai-CN6079

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1400.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 113
(check only one)

<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

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

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
M Douglas Lingsch

Mailing Address 15 Commerce Ct

City Bedford State PA Zip Code 15522

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

Name of Employer MDL Manufacturing Inc Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 03 / 28 / 2008
Transaction ID: SA11Ai-CN6135
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
M Douglas Lingsch

Mailing Address 15 Commerce Ct

City Bedford State PA Zip Code 15522

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

Name of Employer MDL Manufacturing Inc Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt: 03 / 28 / 2008
Transaction ID: SA11Ai-CN6165
 Amount of Each Receipt this Period: -200.00

Redesignated to 2008 General
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Redesignated

C.

Full Name (Last, First, Middle Initial)
M Douglas Lingsch

Mailing Address 15 Commerce Ct

City Bedford State PA Zip Code 15522

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

Name of Employer MDL Manufacturing Inc Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 03 / 28 / 2008
Transaction ID: SA11Ai-CN6166
 Amount of Each Receipt this Period: 200.00

Redesignated from 2008 Primary
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Redesignation

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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

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

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

FOR LINE NUMBER: PAGE 25 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Alan R Loessy
Mailing Address 371 Roland Avenue
City Chambersburg State PA Zip Code 17201
FEC ID number of contributing federal political committee. **C**
Name of Employer Letterkenny Army Depot Occupation Public Affairs Officer
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1250.00
Date of Receipt 03 / 26 / 2008
Transaction ID: SA11Ai-CN6098
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Robert M McGowan, Jr
Mailing Address 245 Tall Timber Dr
City Johnstown State PA Zip Code 15904
FEC ID number of contributing federal political committee. **C**
Name of Employer Argon St Occupation VP-General Manager
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2200.00
Date of Receipt 03 / 04 / 2008
Transaction ID: SA11Ai-CN6028
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Robert M McGowan, Jr
Mailing Address 245 Tall Timber Dr
City Johnstown State PA Zip Code 15904
FEC ID number of contributing federal political committee. **C**
Name of Employer Argon St Occupation VP-General Manager
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2800.00
Date of Receipt 03 / 28 / 2008
Transaction ID: SA11Ai-CN6140
Amount of Each Receipt this Period 600.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1600.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 26 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Robert M McGowan, Jr
Mailing Address 245 Tall Timber Dr
City Johnstown State PA Zip Code 15904
FEC ID number of contributing federal political committee. **C**
Name of Employer Argon St Occupation VP-General Manager
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2300.00
Date of Receipt 03 / 28 / 2008
Transaction ID: SA11Ai-CN6163
Amount of Each Receipt this Period -500.00
Redesignated to 2008 General
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Redesignated

B. Full Name (Last, First, Middle Initial)
Robert M McGowan, Jr
Mailing Address 245 Tall Timber Dr
City Johnstown State PA Zip Code 15904
FEC ID number of contributing federal political committee. **C**
Name of Employer Argon St Occupation VP-General Manager
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2800.00
Date of Receipt 03 / 28 / 2008
Transaction ID: SA11Ai-CN6164
Amount of Each Receipt this Period 500.00
Redesignated from 2008 Primary
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Redesignation

C. Full Name (Last, First, Middle Initial)
Michael W McLanahan
Mailing Address 1111 Pine Street
City Hollidaysburg State PA Zip Code 16648
FEC ID number of contributing federal political committee. **C**
Name of Employer McLanahan Corporation Occupation Businessman
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 750.00
Date of Receipt 03 / 19 / 2008
Transaction ID: SA11Ai-CN6065
Amount of Each Receipt this Period 600.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Frederick S McMillen
Mailing Address 4900 Cherry Street
City Allison Park State PA Zip Code 15101
FEC ID number of contributing federal political committee. **C**
Name of Employer Power Contracting Inc Occupation Accountant
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 03 / 04 / 2008
Transaction ID: SA11Ai-CN6037
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Shawn D Meyers
Mailing Address 254 Norland Ave
City Chambersburg State PA Zip Code 17201
FEC ID number of contributing federal political committee. **C**
Name of Employer Steiger Steiger & Meyers Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 700.00
Date of Receipt 02 / 15 / 2008
Transaction ID: SA11Ai-CN5998
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Robert W Montler
Mailing Address RR 3 Box 430F
City Altoona State PA Zip Code 16601
FEC ID number of contributing federal political committee. **C**
Name of Employer Lee Industries Inc Occupation Executive
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt 03 / 13 / 2008
Transaction ID: SA11Ai-CN6061
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
W. Mickey Nye
 Mailing Address 750 King St E
 City State Zip Code
 Shippensburg PA 17257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Salzmann & Hughes
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 1 5 / 2 0 0 8
Transaction ID: SA11Ai-CN5999
 Amount of Each Receipt this Period
 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Todd A Orange
 Mailing Address 259 Rebecca Ave
 City State Zip Code
 Leechburg PA 15656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MobilVox Director Of Field Operations
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 1 9 / 2 0 0 8
Transaction ID: SA11Ai-CN6076
 Amount of Each Receipt this Period
 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John H Over
 Mailing Address 511 Walnut Street
 City State Zip Code
 Roaring Spring PA 16673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The EADS Group Consulting Engineer
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 800.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 1 9 / 2 0 0 8
Transaction ID: SA11Ai-CN6072
 Amount of Each Receipt this Period
 600.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1600.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Imler Poultry
Mailing Address 3421 Beale Avenue
City Altoona State PA Zip Code 16601
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00
Date of Receipt 03 / 28 / 2008
Transaction ID: SA11Ai-CN6145
Amount of Each Receipt this Period 500.00
100% from Fred Imler
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Fred N Imler, II
Mailing Address 3421 Beale Avenue
City Altoona State PA Zip Code 16601
FEC ID number of contributing federal political committee. **C**
Name of Employer Imlers Poultry LLP Occupation Executive
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00
Date of Receipt 03 / 28 / 2008
Transaction ID: SA11Ai-CN6146
Amount of Each Receipt this Period 500.00
Partnership contribution-Imler Poultry
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
\$500.00 MEMO Partnership Attributed

C. Full Name (Last, First, Middle Initial)
Lawruk Properties
Mailing Address 210 Plank Rd W
City Altoona State PA Zip Code 16602
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
600.00
Date of Receipt 03 / 11 / 2008
Transaction ID: SA11Ai-CN6051
Amount of Each Receipt this Period 600.00
100% from Daniel Lawruk
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **1100.00**
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 30 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Daniel R Lawruk

Mailing Address 41 Majestic Circle

City Hollidaysburg State PA Zip Code 16648

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

Name of Employer Lawruk Builders Inc. Occupation Construction Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1600.00

Date of Receipt 03 / 11 / 2008
Transaction ID: SA11Ai-CN6052
 Amount of Each Receipt this Period 600.00

Partnership-Lawruk Properties
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 \$600.00 MEMO Partnership Attributed

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

Mailing Address 5506 Sixth Avenue Rear

City Altoona State PA Zip Code 16602

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 03 / 28 / 2008
Transaction ID: SA11Ai-CN6147
 Amount of Each Receipt this Period 1500.00

100% from Michael Fiore
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Michael A Fiore

Mailing Address RR 3 Box 608

City Hollidaysburg State PA Zip Code 16648

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

Name of Employer Fiore Brothers Inc Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 03 / 28 / 2008
Transaction ID: SA11Ai-CN6148
 Amount of Each Receipt this Period 1500.00

Partnership contribution-MLR
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 \$1500.00 MEMO Partnership Attributed

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Mark E Pasquerilla

Mailing Address 945 Menoher Blvd

City State Zip Code
Johnstown PA 15905

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

Name of Employer Occupation
Crown American Realty Trust Corporate Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2008

Transaction ID: SA11Ai-CN6123

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Annette C Patterson

Mailing Address 140 Allison Way

City State Zip Code
Hollidaysburg PA 16648

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

Name of Employer Occupation
none Housewife

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: SA11Ai-CN6130

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Robert F Pennington

Mailing Address 300 Union Ave

City State Zip Code
Altoona PA 16602

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

Name of Employer Occupation
Coldwell Banker Real Estate Owner/Broker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2008

Transaction ID: SA11Ai-CN6113

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
R. Kathleen Perini
Mailing Address 13601 Paradise Church Rd
City Hagerstown State MD Zip Code 21742
FEC ID number of contributing federal political committee. C
Name of Employer None Occupation Homemaker
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1550.00
Date of Receipt 03 / 26 / 2008
Transaction ID: SA11Ai-CN6105
Amount of Each Receipt this Period 1500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Karen E Pfeffer
Mailing Address 160 Stonehedge Road
City Hollidaysburg State PA Zip Code 16648
FEC ID number of contributing federal political committee. C
Name of Employer Self Employed Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2200.00
Date of Receipt 03 / 19 / 2008
Transaction ID: SA11Ai-CN6067
Amount of Each Receipt this Period 600.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Neil M Port
Mailing Address 125 Summit Drive
City Hollidaysburg State PA Zip Code 16648
FEC ID number of contributing federal political committee. C
Name of Employer Neil Port & Associates LLC Occupation Consultant
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00
Date of Receipt 03 / 28 / 2008
Transaction ID: SA11Ai-CN6137
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2600.00
TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 33 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Patricia L Raugh
Mailing Address 715 Lexington Ave PO Box 1802
City Altoona State PA Zip Code 16601
FEC ID number of contributing federal political committee. **C**
Name of Employer State Farm Insurance Occupation Insurance Agent
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 28 / 2008
Transaction ID: SA11Ai-CN6151
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Debra P Rea
Mailing Address 119 Stonehedge Rd
City Hollidaysburg State PA Zip Code 16648
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 28 / 2008
Transaction ID: SA11Ai-CN6133
Amount of Each Receipt this Period 600.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Gail Reeder
Mailing Address 10970 McFarland Rd
City Mercersburg State PA Zip Code 17236
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation Housewife
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 26 / 2008
Transaction ID: SA11Ai-CN6170
Amount of Each Receipt this Period 750.00
Reattributed from Jeffrey Reeder
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Reattribution

SUBTOTAL of Receipts This Page (optional) ▶ **850.00**
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Jeffrey N Reeder

Mailing Address 10970 McFarland Rd

City State Zip Code
Mercersburg PA 17236

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

Name of Employer Occupation
Universal Projects Inc Businessman

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
03 / 26 / 2008

Transaction ID: SA11Ai-CN6096

Amount of Each Receipt this Period
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Jeffrey N Reeder

Mailing Address 10970 McFarland Rd

City State Zip Code
Mercersburg PA 17236

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

Name of Employer Occupation
Universal Projects Inc Businessman

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
03 / 26 / 2008

Transaction ID: SA11Ai-CN6169

Amount of Each Receipt this Period
-750.00

Reattributed to Gail Reeder
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Reattributed

C. Full Name (Last, First, Middle Initial)
Sean M Reilly

Mailing Address 826 Kerper St

City State Zip Code
Philadelphia PA 19111

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
02 / 22 / 2008

Transaction ID: SA11Ai-CN6010

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Gary L Reinert, Sr.
Mailing Address 946 Carle Street Apt #9
City State Zip Code
Baden PA 15005
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
SAFE Businessman/Owner
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
1000.00
Date of Receipt
M M / D D / Y Y Y Y
03 / 04 / 2008
Transaction ID: SA11Ai-CN6025
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Todd N Roadman
Mailing Address 121 Diehl Field Road
City State Zip Code
Bedford PA 15522
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Reed Wertz and Roadman Insurance & Financial Planning
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
1250.00
Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2008
Transaction ID: SA11Ai-CN6059
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
S Kent Rockwell
Mailing Address 960 Penn Avenue Suite 800
City State Zip Code
Pittsburgh PA 15222
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Rockwell Venture Capital President
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
500.00
Date of Receipt
M M / D D / Y Y Y Y
02 / 22 / 2008
Transaction ID: SA11Ai-CN6013
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
James C Roddey
Mailing Address 1413 Oak Street
City State Zip Code
Oakmont PA 15139
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Star Cable Association President
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt MM / DD / YYYY
02 / 21 / 2008
Transaction ID: SA11Ai-CN6003
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
James E Rooney
Mailing Address 412 Farrington Dr
City State Zip Code
Seven Fields PA 16046
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
University Of Pittsburgh Institute Director
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt MM / DD / YYYY
03 / 04 / 2008
Transaction ID: SA11Ai-CN6029
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
L Michael Ross
Mailing Address 330 Overhill Drive
City State Zip Code
Chambersburg PA 17201
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Franklin Co Area Dev Corp Economic developer/President
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt MM / DD / YYYY
03 / 26 / 2008
Transaction ID: SA11Ai-CN6102
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 113

(check only one)

<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

A. Full Name (Last, First, Middle Initial)
Donald A Ruggery, Sr.

Mailing Address 37 Clara Vista Dr

City Hollidaysburg State PA Zip Code 16648

FEC ID number of contributing federal political committee. C

Name of Employer Spherion Corp Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt 03 / 31 / 2008

Transaction ID: SA11Ai-CN6182

Amount of Each Receipt this Period 600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2801 Liberty Ave

City Pittsburgh State PA Zip Code 15222

FEC ID number of contributing federal political committee. C

Name of Employer Sargent Electric Company Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt 03 / 04 / 2008

Transaction ID: SA11Ai-CN6032

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
David G Sciamanna

Mailing Address 575 Montgomery Avenue

City Chambersburg State PA Zip Code 17201

FEC ID number of contributing federal political committee. C

Name of Employer Greater Chambersburg Chamber of Comm Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 03 / 26 / 2008

Transaction ID: SA11Ai-CN6103

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Patricia Serotkin
Mailing Address 1072 Center St N
City Ebensburg State PA Zip Code 15931
FEC ID number of contributing federal political committee. **C**
Name of Employer St Francis University Occupation VP - Strategic Initiatives
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
2100.00
Date of Receipt 02 / 22 / 2008
Transaction ID: SA11Ai-CN6009
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Michael J Settimio
Mailing Address 1515 Fordham Circle
City Altoona State PA Zip Code 16602
FEC ID number of contributing federal political committee. **C**
Name of Employer S&T Bank Occupation Banker
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
400.00
Date of Receipt 03 / 28 / 2008
Transaction ID: SA11Ai-CN6131
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Michael D Starchville
Mailing Address 1062 Noels Creek Road
City Lilly State PA Zip Code 15938
FEC ID number of contributing federal political committee. **C**
Name of Employer Crown American Properties LP Occupation Vice President
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
500.00
Date of Receipt 03 / 28 / 2008
Transaction ID: SA11Ai-CN6134
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1100.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Peter H Stephaich

Mailing Address 906 Amberson Ave

City Pittsburgh State PA Zip Code 15232

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

Name of Employer Blue Danube Incorporated Occupation Chairman & CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
03 / 04 / 2008

Transaction ID: SA11Ai-CN6026

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
John R Stoner

Mailing Address 7714 Renninger Road

City Mercersburg State PA Zip Code 17236

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

Name of Employer Self Occupation Retired Agricultural Farmer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
02 / 15 / 2008

Transaction ID: SA11Ai-CN5997

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John R Stoner

Mailing Address 7714 Renninger Road

City Mercersburg State PA Zip Code 17236

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

Name of Employer Self Occupation Retired Agricultural Farmer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt MM / DD / YYYY
03 / 11 / 2008

Transaction ID: SA11Ai-CN6058

Amount of Each Receipt this Period 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Russell C Swank, III

Mailing Address 179 Snowball Hill

City State Zip Code
Stahlstown PA 15687

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

Name of Employer Swank Associated Company Inc Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 04 / 2008

Transaction ID: SA11Ai-CN6036

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Robert D Sweet

Mailing Address 358 Calvary Hollow Road

City State Zip Code
Alum Bank PA 15521

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

Name of Employer Creative Pultrusions Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 19 / 2008

Transaction ID: SA11Ai-CN6070

Amount of Each Receipt this Period
600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Bruce J Thaler, DMD

Mailing Address 132 Twin Oaks Ln

City State Zip Code
Hollidaysburg PA 16648

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

Name of Employer Blair Dental Occupation Dentist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2150.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: SA11Ai-CN6152

Amount of Each Receipt this Period
600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1700.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 113
(check only one)

<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

A.

Full Name (Last, First, Middle Initial)
John Ventura

Mailing Address 9 Linden Street

City Hollidaysburg State PA Zip Code 16648

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

Name of Employer Courtesy Motors Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 11 / 2008

Transaction ID: SA11Ai-CN6048

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Jack M Victory

Mailing Address 300 F St NE

City Washington State DC Zip Code 20002

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

Name of Employer Capitol Hill Consulting Group Occupation Senior Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 19 / 2008

Transaction ID: SA11Ai-CN6077

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Michael E Ward

Mailing Address 35 Frankstown Rd

City Hollidaysburg State PA Zip Code 16648

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

Name of Employer Ward Corporation Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt 03 / 11 / 2008

Transaction ID: SA11Ai-CN6042

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
William T Ward

Mailing Address 81 Sylvan Heights Drive

City Hollidaysburg State PA Zip Code 16648

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

Name of Employer Ward Trucking Corp Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 850.00

Date of Receipt 03 / 11 / 2008
Transaction ID: SA11Ai-CN6046
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Angel D Williams

Mailing Address 2711 Leona Lane

City Coraopolis State PA Zip Code 15108

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

Name of Employer St. Clair Hospital Occupation Credit Collection Associate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 04 / 2008
Transaction ID: SA11Ai-CN6024
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John J Wolf

Mailing Address RR 1 Box 611-C
Grandview Road

City Altoona State PA Zip Code 16601

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

Name of Employer Wolf Furniture Enterprises Inc Occupation Retail Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 28 / 2008
Transaction ID: SA11Ai-CN6128
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 113
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Hok Fung Yau

Mailing Address 1883 E. Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

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

Name of Employer Optia/United Computer Products Co Inc Occupation Computer Sales

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4200.00

Date of Receipt 03 / 19 / 2008

Transaction ID: SA11Ai-CN6066

Amount of Each Receipt this Period 2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Hok Fung Yau

Mailing Address 1883 E. Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

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

Name of Employer Optia/United Computer Products Co Inc Occupation Computer Sales

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4400.00

Date of Receipt 03 / 26 / 2008

Transaction ID: SA11Ai-CN6111

Amount of Each Receipt this Period 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Hok Fung Yau

Mailing Address 1883 E. Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

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

Name of Employer Optia/United Computer Products Co Inc Occupation Computer Sales

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt 03 / 26 / 2008

Transaction ID: SA11Ai-CN6112

Amount of Each Receipt this Period 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Hok Shun Yau

Mailing Address 1883 E. Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

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

Name of Employer Optia/United Computer Products Co Inc Occupation Computer Sales

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4200.00

Date of Receipt 03 / 19 / 2008
Transaction ID: SA11Ai-CN6068
 Amount of Each Receipt this Period 2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Hok Shun Yau

Mailing Address 1883 E. Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

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

Name of Employer Optia/United Computer Products Co Inc Occupation Computer Sales

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4400.00

Date of Receipt 03 / 26 / 2008
Transaction ID: SA11Ai-CN6107
 Amount of Each Receipt this Period 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Hok Shun Yau

Mailing Address 1883 E. Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

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

Name of Employer Optia/United Computer Products Co Inc Occupation Computer Sales

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt 03 / 26 / 2008
Transaction ID: SA11Ai-CN6108
 Amount of Each Receipt this Period 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Hoklai Yau

Mailing Address 204 Linwood Drive

City Altoona State PA Zip Code 16602

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

Name of Employer Optia/United Computer Products Co Inc Occupation Computer Sales

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4200.00

Date of Receipt MM / DD / YYYY
03 / 19 / 2008

Transaction ID: SA11Ai-CN6064

Amount of Each Receipt this Period 2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Hoklai Yau

Mailing Address 204 Linwood Drive

City Altoona State PA Zip Code 16602

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

Name of Employer Optia/United Computer Products Co Inc Occupation Computer Sales

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4400.00

Date of Receipt MM / DD / YYYY
03 / 26 / 2008

Transaction ID: SA11Ai-CN6109

Amount of Each Receipt this Period 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Hoklai Yau

Mailing Address 204 Linwood Drive

City Altoona State PA Zip Code 16602

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

Name of Employer Optia/United Computer Products Co Inc Occupation Computer Sales

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt MM / DD / YYYY
03 / 26 / 2008

Transaction ID: SA11Ai-CN6110

Amount of Each Receipt this Period 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

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

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
George D Zamias

Mailing Address 300 Market St

City State Zip Code
Johnstown PA 15901

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

Name of Employer Self Employed Occupation Developer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	8

Transaction ID: SA11Ai-CN6015

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Carol L Zimmerman

Mailing Address 2257 Castlegreen Dr

City State Zip Code
Greencastle PA 17225

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

Name of Employer None Occupation Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	8

Transaction ID: SA11Ai-CN6023

Amount of Each Receipt this Period
1450.00

Reattributed from J Joseph Zimmerman
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Reattribution

C. Full Name (Last, First, Middle Initial)
J Joseph Zimmerman

Mailing Address 2257 Castlegreen Dr

City State Zip Code
Greencastle PA 17225

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

Name of Employer Valley Quarries Inc Occupation Executive Vice President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 6050.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	8

Transaction ID: SA11Ai-CN6018

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 47 / 113
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
J Joseph Zimmerman

Mailing Address 2257 Castlegreen Dr

City State Zip Code
Greencastle PA 17225

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

Name of Employer Valley Quarries Inc Occupation Executive Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **3750.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	8

Transaction ID: SA11Ai-CN6020

Amount of Each Receipt this Period
-2300.00

Redesignated to 2008 General
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Redesignated

B.

Full Name (Last, First, Middle Initial)
J Joseph Zimmerman

Mailing Address 2257 Castlegreen Dr

City State Zip Code
Greencastle PA 17225

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

Name of Employer Valley Quarries Inc Occupation Executive Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **6050.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	8

Transaction ID: SA11Ai-CN6021

Amount of Each Receipt this Period
2300.00

Redesignated from 2008 Primary
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Redesignation

C.

Full Name (Last, First, Middle Initial)
J Joseph Zimmerman

Mailing Address 2257 Castlegreen Dr

City State Zip Code
Greencastle PA 17225

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

Name of Employer Valley Quarries Inc Occupation Executive Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **4600.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	8

Transaction ID: SA11Ai-CN6022

Amount of Each Receipt this Period
-1450.00

Reattributed to Carol Zimmerman
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Reattributed

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶ **79900.00**

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
PPL People For Good Govt

Mailing Address Two North Ninth Street

City State Zip Code
Allentown PA 18101

FEC ID number of contributing federal political committee. **C** C00228106

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: SA11C-CN6174

Amount of Each Receipt this Period
1000.00

check 0035000057

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Air Line Pilots Association

Mailing Address 1625 Massachusetts Avenue NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 03 / 2008

Transaction ID: SA11C-CN6019

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 800 Cabin Hill Drive

City State Zip Code
Greensburg PA 15601

FEC ID number of contributing federal political committee. **C** C00335232

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 19 / 2008

Transaction ID: SA11C-CN6087

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

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

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

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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
American Airlines
Mailing Address 1101 17th Street NW No. 600
City Washington State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C** C00107300
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt: MM / DD / YYYY 03 / 19 / 2008
Transaction ID: SA11C-CN6081
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Gas Association
Mailing Address 400 N. Capitol Street NW
City Washington State DC Zip Code 20001
FEC ID number of contributing federal political committee. **C** C00007450
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt: MM / DD / YYYY 03 / 19 / 2008
Transaction ID: SA11C-CN6085
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Medical Association
Mailing Address 25 Massachusetts Ave NW Suite 600
City Washington State DC Zip Code 20001
FEC ID number of contributing federal political committee. **C** C00000422
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt: MM / DD / YYYY 02 / 22 / 2008
Transaction ID: SA11C-CN6014
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 50 / 113
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
American Physical Therapy Association
Mailing Address 1111 Fairfax St N
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C** C00012880
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt: 03 / 26 / 2008
Transaction ID: SA11C-CN6125
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Anheuser-Busch Companies
Mailing Address 1401 I Street NW Suite 200
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00034488
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt: 03 / 31 / 2008
Transaction ID: SA11C-CN6186
Amount of Each Receipt this Period: 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
ARTBA
Mailing Address 1219 28th St NW
City Washington State DC Zip Code 20007
FEC ID number of contributing federal political committee. **C** C00118208
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00
Date of Receipt: 03 / 19 / 2008
Transaction ID: SA11C-CN6090
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**SCHEDULE A (FEC Form 3)
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Associated Equipment Distributors
Mailing Address 121 Henry St N
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C** C00010124
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt: 03 / 19 / 2008
Transaction ID: SA11C-CN6089
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
AT&T Inc
Mailing Address 175 Houston-Room 7-A-50 E
City San Antonio State TX Zip Code 78205
FEC ID number of contributing federal political committee. **C** C00109017
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00
Date of Receipt: 03 / 19 / 2008
Transaction ID: SA11C-CN6083
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Automotive Free International Trade
Mailing Address 1625 Prince Street Suite 225
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C** C00250399
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00
Date of Receipt: 03 / 26 / 2008
Transaction ID: SA11C-CN6161
Amount of Each Receipt this Period: 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Blank Rome LLP

Mailing Address 600 New Hampshire Ave NW

City State Zip Code
Washington DC 20037

FEC ID number of contributing federal political committee. **C** C00150797

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 2 2 / 2 0 0 8

Transaction ID: SA11C-CN6012

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 700 13th St NW Suite 575

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00004879

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 1 9 / 2 0 0 8

Transaction ID: SA11C-CN6080

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1500 Market Street 33rd Floor East Tower

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 8 / 2 0 0 8

Transaction ID: SA11C-CN6181

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Constructors Assoc of Western PA

Mailing Address 1201 Banksville Road

City Pittsburgh State PA Zip Code 15216

FEC ID number of contributing federal political committee. **C** C00341016

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 26 / 2008
Transaction ID: SA11C-CN6122
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 21250 Hawthorne Blvd Ste 800

City Torrance State CA Zip Code 90503

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 28 / 2008
Transaction ID: SA11C-CN6179
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address One James River Plaza - 20th Fl PO Box 26666

City Richmond State VA Zip Code 23261

FEC ID number of contributing federal political committee. **C** C00108209

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 03 / 19 / 2008
Transaction ID: SA11C-CN6086
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

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

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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Duke Energy Corporation
Mailing Address 422 Church St PB05D S
City State Zip Code
Charlotte NC 28202
FEC ID number of contributing federal political committee. **C** C00083535
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00
Date of Receipt
MM / DD / YYYY
03 / 28 / 2008
Transaction ID: SA11C-CN6175
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
FAA Managers Association Inc.
Mailing Address #315 4410 Massachusetts Ave NW
City State Zip Code
Washington DC 20016
FEC ID number of contributing federal political committee. **C** C00366070
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
3000.00
Date of Receipt
MM / DD / YYYY
03 / 28 / 2008
Transaction ID: SA11C-CN6178
Amount of Each Receipt this Period
3000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Family
Mailing Address 1001 Liberty Ave Suite 850
City State Zip Code
Pittsburgh PA 15222
FEC ID number of contributing federal political committee. **C** C00336842
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00
Date of Receipt
MM / DD / YYYY
02 / 22 / 2008
Transaction ID: SA11C-CN6011
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
FirstEnergy
Mailing Address 76 S Main Street
City Akron State OH Zip Code 44308
FEC ID number of contributing federal political committee. **C** C00140855
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 03 / 28 / 2008
Transaction ID: SA11C-CN6171
Amount of Each Receipt this Period 2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Giant Eagle Inc
Mailing Address 101 Kappa Dr
RIDC Park
City Pittsburgh State PA Zip Code 15238
FEC ID number of contributing federal political committee. **C** C00426072
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00
Date of Receipt 03 / 04 / 2008
Transaction ID: SA11C-CN6035
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Michael Baker Corporation
Mailing Address 100 Airside Drive
City Moon Township State PA Zip Code 15108
FEC ID number of contributing federal political committee. **C** C00403477
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 03 / 04 / 2008
Transaction ID: SA11C-CN6034
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Miller Brewing Company
Mailing Address 3939 Highland Blvd W
City Milwaukee State WI Zip Code 53201
FEC ID number of contributing federal political committee. **C** C00102780
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt: 03 / 29 / 2008
Transaction ID: SA11C-CN6156
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
National Air Traffic Controllers
Mailing Address 1325 Massachusetts Avenue NW
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00238725
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt: 03 / 29 / 2008
Transaction ID: SA11C-CN6155
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
National Beer Wholesalers Assoc
Mailing Address 1101 King St Suite 600
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C** C00144766
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt: 03 / 24 / 2008
Transaction ID: SA11C-CN6092
Amount of Each Receipt this Period: 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

FOR LINE NUMBER: PAGE 57 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
National Funeral Directors Association

Mailing Address 13625 Bishop's Drive

City State Zip Code
Brookfield WI 53005

FEC ID number of contributing federal political committee. **C** C00204008

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2008

Transaction ID: SA11C-CN6150

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 200 Civic Center Drive

City State Zip Code
Columbus OH 43215

FEC ID number of contributing federal political committee. **C** C00051979

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2008

Transaction ID: SA11C-CN6180

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Northeast Utilities Employees

Mailing Address 601 Pennsylvania Ave NW
Suite 620

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00102160

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2008

Transaction ID: SA11C-CN6172

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
NRA-Political Victory Fund

Mailing Address 11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 9 / 2 0 0 8

Transaction ID: SA11C-CN6154

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1605 King Street

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 1 / 2 9 / 2 0 0 8

Transaction ID: SA11C-CN5993

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
NUCA Legislative Information

Mailing Address 4301 N Fairfax Drive
Suite 360

City State Zip Code
Arlington VA 22203

FEC ID number of contributing federal political committee. **C** C00004101

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 8 / 2 0 0 8

Transaction ID: SA11C-CN6177

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Nuclear Energy Institute
Mailing Address 1776 Eye St NW - 4th Floor
City Washington State DC Zip Code 20006
FEC ID number of contributing federal political committee. **C** C00239848
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 03 / 28 / 2008
Transaction ID: SA11C-CN6173
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
OldCastle Materials Inc
Mailing Address 101 Constitution Avenue NW Suite 600W
City Washington State DC Zip Code 20001
FEC ID number of contributing federal political committee. **C** C00346353
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 03 / 19 / 2008
Transaction ID: SA11C-CN6091
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
PMA Group
Mailing Address 2345 Crystal Dr Suite 300
City Arlington State VA Zip Code 22202
FEC ID number of contributing federal political committee. **C** C00280321
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 03 / 19 / 2008
Transaction ID: SA11C-CN6082
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Portland Cement Association Inc

Mailing Address 500 New Jersey Ave NW
Seventh Floor

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 28 / 2008

Transaction ID: SA11C-CN6176

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Power Pac of Edison Electric Institute

Mailing Address 701 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 19 / 2008

Transaction ID: SA11C-CN6084

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
PPG Better Government Team

Mailing Address One PPG PI - 40 E

City Pittsburgh State PA Zip Code 15272

FEC ID number of contributing federal political committee. **C** C00034298

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 26 / 2008

Transaction ID: SA11C-CN6124

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
S&T Bank

Mailing Address PO Box 190
800 Philadelphia Street

City Indiana State PA Zip Code 15701

FEC ID number of contributing federal political committee. **C** C00263483

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 650.00

Date of Receipt MM / DD / YYYY
01 / 02 / 2008

Transaction ID: SA11C-CN5979

Amount of Each Receipt this Period 650.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

FEC ID number of contributing federal political committee. **C** C00219121

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1150.00

Date of Receipt MM / DD / YYYY
03 / 11 / 2008

Transaction ID: SA11C-CN6050

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

FEC ID number of contributing federal political committee. **C** C00219121

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1650.00

Date of Receipt MM / DD / YYYY
03 / 13 / 2008

Transaction ID: SA11C-CN6062

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1650.00

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

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

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

FOR LINE NUMBER: PAGE 62 / 113
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial)
Southern Company Employees
 Mailing Address 601 Pennsylvania Ave NW
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C** C00144774
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00
 Date of Receipt 03 / 29 / 2008
Transaction ID: SA11C-CN6157
 Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Xcel Energy Employee
 Mailing Address 1225 17th St Suite 1200
 City Denver State CO Zip Code 80202
 FEC ID number of contributing federal political committee. **C** C00107771
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
 Date of Receipt 03 / 31 / 2008
Transaction ID: SA11C-CN6184
 Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2000.00
TOTAL This Period (last page this line number only) ► 54150.00

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)

<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

A.

Full Name (Last, First, Middle Initial)
S&T Bank

Transaction ID: SB19B-LP76
Date of Disbursement

Mailing Address Commercial Lending
208 West Plank Road

/ /

City Altoona State PA Zip Code 16602

Amount of Each Disbursement this Period

Purpose of Disbursement
Repay Loan

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

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Interest only payment

State: District:

B.

Full Name (Last, First, Middle Initial)
S&T Bank

Transaction ID: SB19B-LP77
Date of Disbursement

Mailing Address Commercial Lending
208 West Plank Road

/ /

City Altoona State PA Zip Code 16602

Amount of Each Disbursement this Period

Purpose of Disbursement
Repay Loan

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

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Interest only payment

State: District:

C.

Full Name (Last, First, Middle Initial)
S&T Bank

Transaction ID: SB19B-LP78
Date of Disbursement

Mailing Address Commercial Lending
208 West Plank Road

/ /

City Altoona State PA Zip Code 16602

Amount of Each Disbursement this Period

Purpose of Disbursement
Repay Loan

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

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Interest only payment

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" 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 type="checkbox"/> 21

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

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) S&T Bank</p> <p>Mailing Address Commercial Lending 208 West Plank Road</p> <p>City Altoona State PA Zip Code 16602</p> <p>Purpose of Disbursement Loan interest Expenditure</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-LP76</p> <p>Date of Disbursement 01 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 93.64</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Interest only payment</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) S&T Bank</p> <p>Mailing Address Commercial Lending 208 West Plank Road</p> <p>City Altoona State PA Zip Code 16602</p> <p>Purpose of Disbursement Loan interest Expenditure</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-LP77</p> <p>Date of Disbursement 03 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 72.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Interest only payment</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) S&T Bank</p> <p>Mailing Address Commercial Lending 208 West Plank Road</p> <p>City Altoona State PA Zip Code 16602</p> <p>Purpose of Disbursement Loan interest Expenditure</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-LP78</p> <p>Date of Disbursement 03 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 71.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Interest only payment</p>

SUBTOTAL of Disbursements This Page (optional) ►

237.39

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)

<input checked="" 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 type="checkbox"/> 21

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

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) US Postal Service</p> <p>Mailing Address 525 Allegheny Street</p> <p>City Hollidaysburg State PA Zip Code 16648</p> <p>Purpose of Disbursement Stamps</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX5313</p> <p>Date of Disbursement 01 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 164.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Stamps</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) US Postal Service</p> <p>Mailing Address 525 Allegheny Street</p> <p>City Hollidaysburg State PA Zip Code 16648</p> <p>Purpose of Disbursement Stamps</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX5318</p> <p>Date of Disbursement 01 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 92.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Stamps</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) US Postal Service</p> <p>Mailing Address 525 Allegheny Street</p> <p>City Hollidaysburg State PA Zip Code 16648</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX5320</p> <p>Date of Disbursement 01 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 19.70</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Postage</p>

SUBTOTAL of Disbursements This Page (optional) ▶

275.70

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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) US Postal Service Mailing Address 525 Allegheny Street City Hollidaysburg State PA Zip Code 16648 Purpose of Disbursement PO Box Yearly Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX5264 Date of Disbursement 02 / 19 / 2008 Amount of Each Disbursement this Period 68.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PO Box Yearly Fee
B.	Full Name (Last, First, Middle Initial) US Postal Service Mailing Address 525 Allegheny Street City Hollidaysburg State PA Zip Code 16648 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX5334 Date of Disbursement 03 / 04 / 2008 Amount of Each Disbursement this Period 14.55 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Postage
C.	Full Name (Last, First, Middle Initial) US Postal Service Mailing Address 525 Allegheny Street City Hollidaysburg State PA Zip Code 16648 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX5335 Date of Disbursement 03 / 04 / 2008 Amount of Each Disbursement this Period 121.57 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Postage

SUBTOTAL of Disbursements This Page (optional) ▶

204.12

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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) US Postal Service <hr/> Mailing Address 525 Allegheny Street <hr/> City Hollidaysburg State PA Zip Code 16648 <hr/> Purpose of Disbursement stamps Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5372 Date of Disbursement 03 / 25 / 2008 <hr/> Amount of Each Disbursement this Period 16.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 stamps
B.	Full Name (Last, First, Middle Initial) US Postal Service <hr/> Mailing Address 525 Allegheny Street <hr/> City Hollidaysburg State PA Zip Code 16648 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5373 Date of Disbursement 03 / 25 / 2008 <hr/> Amount of Each Disbursement this Period 205.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Postage
C.	Full Name (Last, First, Middle Initial) US Postal Service <hr/> Mailing Address 525 Allegheny Street <hr/> City Hollidaysburg State PA Zip Code 16648 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5374 Date of Disbursement 03 / 25 / 2008 <hr/> Amount of Each Disbursement this Period 41.24 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Postage

SUBTOTAL of Disbursements This Page (optional) ▶	262.64
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Ciocca Benton & Okonak P.C.

Mailing Address 912 Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Office Supplies

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5262
Date of Disbursement

02 / 19 / 2008

Amount of Each Disbursement this Period

22.86

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

Office Supplies

B.

Full Name (Last, First, Middle Initial)
Copy Rite & Banner Zone

Mailing Address 301 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Copies made

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5233
Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

136.80

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

Copies made

C.

Full Name (Last, First, Middle Initial)
Copy Rite & Banner Zone

Mailing Address 301 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Copies made

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5234
Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

10.00

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

Copies made

SUBTOTAL of Disbursements This Page (optional)

169.66

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Copy Rite & Banner Zone

Mailing Address 301 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Copies made

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5235
Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

28.64

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

Copies made

B.

Full Name (Last, First, Middle Initial)
Copy Rite & Banner Zone

Mailing Address 301 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Copies made

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5312
Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

40.28

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

Copies made

C.

Full Name (Last, First, Middle Initial)
Copy Rite & Banner Zone

Mailing Address 301 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Copies made of petitions

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5252
Date of Disbursement

02 / 19 / 2008

Amount of Each Disbursement this Period

39.30

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

Copies made of petitions

SUBTOTAL of Disbursements This Page (optional) ▶

108.22

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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

<p>A. Full Name (Last, First, Middle Initial) Copy Rite & Banner Zone</p> <p>Mailing Address 301 Allegheny Street</p> <p>City Hollidaysburg State PA Zip Code 16648</p> <p>Purpose of Disbursement Copies made</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX5282</p> <p>Date of Disbursement 03 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 3.74</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Copies made</p>
<p>B. Full Name (Last, First, Middle Initial) The Orchards</p> <p>Mailing Address 1580 Orchard Drive</p> <p>City Chambersburg State PA Zip Code 17201</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX5329</p> <p>Date of Disbursement 03 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 351.59</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Meals</p>
<p>C. Full Name (Last, First, Middle Initial) Altoona Mirror</p> <p>Mailing Address PO Box 2008</p> <p>City Altoona State PA Zip Code 16603</p> <p>Purpose of Disbursement Holiday Ads</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX5238</p> <p>Date of Disbursement 01 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 92.88</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Holiday Ads</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>448.21</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

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

Transaction ID: SB17-EX5246
Date of Disbursement

Mailing Address PO Box 2008

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	0	8

City Altoona State PA Zip Code 16603

Amount of Each Disbursement this Period

491.55

Purpose of Disbursement
3x5 print ad
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: 2008
 Primary General
 Other (specify) ▼
State: District:

3x5 print ad

B.

Full Name (Last, First, Middle Initial)
Verizon

Transaction ID: SB17-EX5230
Date of Disbursement

Mailing Address PO Box 660748

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	0	8

City Dallas State TX Zip Code 75266

Amount of Each Disbursement this Period

180.74

Purpose of Disbursement
Telephone
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: 2008
 Primary General
 Other (specify) ▼
State: District:

Telephone

C.

Full Name (Last, First, Middle Initial)
Verizon

Transaction ID: SB17-EX5251
Date of Disbursement

Mailing Address PO Box 660748

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	0	8

City Dallas State TX Zip Code 75266

Amount of Each Disbursement this Period

181.42

Purpose of Disbursement
Telephone
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: 2008
 Primary General
 Other (specify) ▼
State: District:

Telephone

SUBTOTAL of Disbursements This Page (optional)

853.71

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Verizon

Mailing Address PO Box 660748

City Dallas State TX Zip Code 75266

Purpose of Disbursement Telephone

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5291
Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

176.31

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

Telephone

B.

Full Name (Last, First, Middle Initial)
Sheetz Inc

Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement Gasoline

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5322
Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

29.84

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

Gasoline

C.

Full Name (Last, First, Middle Initial)
Sheetz Inc

Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement Gasoline

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5327
Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

46.30

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

Gasoline

SUBTOTAL of Disbursements This Page (optional) ►

252.45

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Sheetz Inc

Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Gasoline

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5330
Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

27.01

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

Gasoline

B.

Full Name (Last, First, Middle Initial)
Exxon

Mailing Address 542 South Center Street

City Ebensburg State PA Zip Code 15931

Purpose of Disbursement
Gasoline

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5326
Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

39.15

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

Gasoline

C.

Full Name (Last, First, Middle Initial)
PA UC Fund

Mailing Address PO Box 68568

City Harrisburg State PA Zip Code 17106

Purpose of Disbursement
4th Quarter 2007

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5222
Date of Disbursement

01 / 28 / 2008

Amount of Each Disbursement this Period

32.03

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

4th Quarter 2007

SUBTOTAL of Disbursements This Page (optional)

98.19

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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) Blair Co Republican Committee Mailing Address c/o 513 Allegheny Street City Hollidaysburg State PA Zip Code 16648 Purpose of Disbursement Membership dues Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5352 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 8 Amount of Each Disbursement this Period 400.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Membership dues
B.	Full Name (Last, First, Middle Initial) Ramada Inn Altoona Mailing Address One Sheraton Drive City Altoona State PA Zip Code 16601 Purpose of Disbursement Catering Expenses-Military Banquet Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5209 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 8 Amount of Each Disbursement this Period 246.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Catering Expenses-Military Banquet
C.	Full Name (Last, First, Middle Initial) Ramada Inn Altoona Mailing Address One Sheraton Drive City Altoona State PA Zip Code 16601 Purpose of Disbursement Banquet for Election Announcement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5269 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 8 Amount of Each Disbursement this Period 297.56 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Banquet for Election Announcement

SUBTOTAL of Disbursements This Page (optional) ▶	944.32
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

<p>A. Full Name (Last, First, Middle Initial) Huntingdon Co. Republican Comm</p> <p>Mailing Address PO Box 61</p> <p>City Huntingdon State PA Zip Code 16652</p> <p>Purpose of Disbursement Full page ad</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX5358</p> <p>Date of Disbursement 04 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 95.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Full page ad</p>
<p>B. Full Name (Last, First, Middle Initial) The Dream Restaurant</p> <p>Mailing Address 1500 Allegheny Street</p> <p>City Hollidaysburg State PA Zip Code 16648</p> <p>Purpose of Disbursement Meal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX5311</p> <p>Date of Disbursement 01 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 42.53</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Meal</p>
<p>C. Full Name (Last, First, Middle Initial) The Dream Restaurant</p> <p>Mailing Address 1500 Allegheny Street</p> <p>City Hollidaysburg State PA Zip Code 16648</p> <p>Purpose of Disbursement Meal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX5325</p> <p>Date of Disbursement 03 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 25.16</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Meal</p>

SUBTOTAL of Disbursements This Page (optional)	162.69
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)

Capitol Hill Club

Mailing Address 300 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Breakfast Banquet/other meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5304

Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

564.50

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

Breakfast Banquet/other meals

B.

Full Name (Last, First, Middle Initial)

Capitol Hill Club

Mailing Address 300 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Various meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5268

Date of Disbursement

02 / 19 / 2008

Amount of Each Disbursement this Period

59.16

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

Various meals

C.

Full Name (Last, First, Middle Initial)

Capitol Hill Club

Mailing Address 300 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Various dinners

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5323

Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

246.35

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

Various dinners

SUBTOTAL of Disbursements This Page (optional) ▶

870.01

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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)

Capitol Hill Club

Mailing Address 300 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Various Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX5301

Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

286.23

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

Various Meals

B.

Full Name (Last, First, Middle Initial)

Capitol Hill Club

Mailing Address 300 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX5362

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

8.12

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

Meals

C.

Full Name (Last, First, Middle Initial)

Capitol Hill Club

Mailing Address 300 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Various meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX5353

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

178.81

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

Various meals

SUBTOTAL of Disbursements This Page (optional) ►

473.16

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
UPS

Mailing Address PO Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement

Overnite charges

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5293

Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

18.49

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

Overnite charges

B.

Full Name (Last, First, Middle Initial)
Hilton Harrisburg and Towers

Mailing Address One North Second Street

City Harrisburg State PA Zip Code 17101

Purpose of Disbursement

Lodging

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5344

Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

227.65

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

Lodging

C.

Full Name (Last, First, Middle Initial)
Hilton Harrisburg and Towers

Mailing Address One North Second Street

City Harrisburg State PA Zip Code 17101

Purpose of Disbursement

Lodging

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5345

Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

415.67

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

Lodging

SUBTOTAL of Disbursements This Page (optional) ▶

661.81

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
The Capital Grille

Mailing Address 601 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5331
Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

56.00

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

Meals

B.

Full Name (Last, First, Middle Initial)
The Capital Grille

Mailing Address 601 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5332
Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

454.00

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

Meals

C.

Full Name (Last, First, Middle Initial)
The Capital Grille

Mailing Address 601 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5333
Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

100.00

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

Meals

SUBTOTAL of Disbursements This Page (optional) ▶

610.00

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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) The Capital Grille Mailing Address 601 Pennsylvania Avenue NW City Washington State DC Zip Code 20004 Purpose of Disbursement Dinner meeting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5365 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 8 Amount of Each Disbursement this Period 249.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Dinner meeting
B.	Full Name (Last, First, Middle Initial) IS2 Technologies Inc. Mailing Address 3018 Pleasant Valley Blvd City Altoona State PA Zip Code 16602 Purpose of Disbursement Panda Anivirus 3 year renewal Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5296 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 8 Amount of Each Disbursement this Period 662.61 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Panda Anivirus 3 year renewal
C.	Full Name (Last, First, Middle Initial) Amtrak Mailing Address Market Street City Philadelphia State PA Zip Code 19019 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5367 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 8 Amount of Each Disbursement this Period 42.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Travel

SUBTOTAL of Disbursements This Page (optional)	954.01
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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Sylvester Management Corp

Mailing Address PO Box 986

City Irmo State SC Zip Code 29063

Purpose of Disbursement

FEC conference

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5363

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

475.00

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

FEC conference

B.

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

Mailing Address 5115 Excelsior Blvd Suite 103

City Minneapolis State MN Zip Code 55416

Purpose of Disbursement

Software Annual License

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5237

Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

2000.00

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

Software Annual License

C.

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

Mailing Address 5115 Excelsior Blvd Suite 103

City Minneapolis State MN Zip Code 55416

Purpose of Disbursement

Data Hosting fee

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5279

Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

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

Data Hosting fee

SUBTOTAL of Disbursements This Page (optional) ▶

3475.00

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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Bull Feathers

Mailing Address 410 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5307
Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

90.00

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

Meals

B.

Full Name (Last, First, Middle Initial)
Bull Feathers

Mailing Address 410 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Campaign meeting

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5324
Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

240.55

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

Campaign meeting

C.

Full Name (Last, First, Middle Initial)
Trattoria Alberto

Mailing Address 506 Eighth Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Reception Dinner

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5366
Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

255.00

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

Reception Dinner

SUBTOTAL of Disbursements This Page (optional) ▶

585.55

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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) The Stop 35 Inc Mailing Address 1 Stop 35 Pl City Mifflintown State PA Zip Code 17059 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5343 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 20.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Meals
B.	Full Name (Last, First, Middle Initial) Roger Osbaugh Mailing Address 1153 Leisure Drive City Chambersburg State PA Zip Code 17201 Purpose of Disbursement Mileage reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5257 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 8 Amount of Each Disbursement this Period 8.08 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Mileage reimbursement
C.	Full Name (Last, First, Middle Initial) Roger Osbaugh Mailing Address 1153 Leisure Drive City Chambersburg State PA Zip Code 17201 Purpose of Disbursement Mileage reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5294 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 8 Amount of Each Disbursement this Period 35.66 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Mileage reimbursement

SUBTOTAL of Disbursements This Page (optional) ▶

64.56

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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Roger Osbaugh

Mailing Address 1153 Leisure Drive

City Chambersburg State PA Zip Code 17201

Purpose of Disbursement
Mileage and expenses reimbursement
Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: SB17-EX5349
Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

61.08

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

Mileage and expenses reimbursement

B.

Full Name (Last, First, Middle Initial)
Copper Kettle

Mailing Address 1049 Lincoln Way East

City Chambersburg State PA Zip Code 17201

Purpose of Disbursement
Meals
Candidate Name

002
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: SB17-EX5310
Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

51.22

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

Meals

C.

Full Name (Last, First, Middle Initial)
American Express

Mailing Address PO Box 360002

City Fort Lauderdale State FL Zip Code 33335

Purpose of Disbursement
Membership renewal fee
Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: SB17-EX5306
Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

75.00

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

Membership renewal fee

SUBTOTAL of Disbursements This Page (optional)

187.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) US Members Dining Room Mailing Address H-117 The Capitol HOB Rayburn Bldg City Washington State DC Zip Code 20515 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5303 Date of Disbursement 01 / 29 / 2008 Amount of Each Disbursement this Period 10.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Meals
B.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 25505 City Lehigh Valley State PA Zip Code 18002 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5227 Date of Disbursement 01 / 29 / 2008 Amount of Each Disbursement this Period 1251.97 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Telephone
C.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 25505 City Lehigh Valley State PA Zip Code 18002 Purpose of Disbursement New Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5305 Date of Disbursement 01 / 29 / 2008 Amount of Each Disbursement this Period 551.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 New Phone

SUBTOTAL of Disbursements This Page (optional) ▶	1814.11
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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 25505 City Lehigh Valley State PA Zip Code 18002 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5276 Date of Disbursement 03 / 04 / 2008 Amount of Each Disbursement this Period 704.33 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Telephone
B.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 25505 City Lehigh Valley State PA Zip Code 18002 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5348 Date of Disbursement 03 / 25 / 2008 Amount of Each Disbursement this Period 526.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Telephone
C.	Full Name (Last, First, Middle Initial) DSK Consultants Mailing Address 530 Garber Street City Hollidaysburg State PA Zip Code 16648 Purpose of Disbursement Quarterly retainer for fundraising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5210 Date of Disbursement 01 / 10 / 2008 Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Quarterly retainer for fundraising

SUBTOTAL of Disbursements This Page (optional) ▶

4230.93

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
ATLANTIC broadband

Mailing Address Box 371801

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement
Internet and Cable

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5216
Date of Disbursement

01 / 10 / 2008

Amount of Each Disbursement this Period

109.48

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

Internet and Cable

B.

Full Name (Last, First, Middle Initial)
ATLANTIC broadband

Mailing Address Box 371801

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement
Internet Services

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5228
Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

56.72

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

Internet Services

C.

Full Name (Last, First, Middle Initial)
ATLANTIC broadband

Mailing Address Box 371801

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement
Internet Services

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5247
Date of Disbursement

02 / 19 / 2008

Amount of Each Disbursement this Period

109.15

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

Internet Services

SUBTOTAL of Disbursements This Page (optional) ▶

275.35

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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
ATLANTIC broadband

Transaction ID: SB17-EX5248
Date of Disbursement

Mailing Address Box 371801

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	0	8

City Pittsburgh State PA Zip Code 15250

Amount of Each Disbursement this Period

56.72

Purpose of Disbursement
Internet Services

001

Category/
Type

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

Candidate Name

Internet Services

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
ATLANTIC broadband

Transaction ID: SB17-EX5289
Date of Disbursement

Mailing Address Box 371801

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	8

City Pittsburgh State PA Zip Code 15250

Amount of Each Disbursement this Period

109.15

Purpose of Disbursement
Internet service

001

Category/
Type

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

Candidate Name

Internet service

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
ATLANTIC broadband

Transaction ID: SB17-EX5290
Date of Disbursement

Mailing Address Box 371801

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	8

City Pittsburgh State PA Zip Code 15250

Amount of Each Disbursement this Period

56.72

Purpose of Disbursement
Internet Service

001

Category/
Type

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

Candidate Name

Internet Service

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

222.59

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) CenPenn Realty LLC</p> <p>Mailing Address 513 Allegheny Street</p> <p>City Hollidaysburg State PA Zip Code 16648</p> <p>Purpose of Disbursement January 2008 rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX5219</p> <p>Date of Disbursement 01 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>January 2008 rent</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) CenPenn Realty LLC</p> <p>Mailing Address 513 Allegheny Street</p> <p>City Hollidaysburg State PA Zip Code 16648</p> <p>Purpose of Disbursement February 2008 rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX5240</p> <p>Date of Disbursement 01 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>February 2008 rent</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) CenPenn Realty LLC</p> <p>Mailing Address 513 Allegheny Street</p> <p>City Hollidaysburg State PA Zip Code 16648</p> <p>Purpose of Disbursement March 2008 rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX5273</p> <p>Date of Disbursement 02 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>March 2008 rent</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) CenPenn Realty LLC Mailing Address 513 Allegheny Street City Hollidaysburg State PA Zip Code 16648 Purpose of Disbursement April 2008 rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5354 Date of Disbursement 03 / 25 / 2008 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 April 2008 rent
B.	Full Name (Last, First, Middle Initial) S&T Bank Mailing Address 1100 Logan Blvd City Altoona State PA Zip Code 16602 Purpose of Disbursement Bank Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5220 Date of Disbursement 01 / 01 / 2008 Amount of Each Disbursement this Period 25.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Bank Service Charge
C.	Full Name (Last, First, Middle Initial) S&T Bank Mailing Address 1100 Logan Blvd City Altoona State PA Zip Code 16602 Purpose of Disbursement Bank Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5243 Date of Disbursement 02 / 01 / 2008 Amount of Each Disbursement this Period 25.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Bank Service Charge

SUBTOTAL of Disbursements This Page (optional) ▶	550.00
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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
S&T Bank

Transaction ID: SB17-EX5278
Date of Disbursement

Mailing Address 1100 Logan Blvd

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	0	8

City Altoona State PA Zip Code 16602

Amount of Each Disbursement this Period

7.00

Purpose of Disbursement
Bank Service Charge

001

Category/
Type

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

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

Bank Service Charge

State: District:

B.

Full Name (Last, First, Middle Initial)
S&T Bank

Transaction ID: SB17-EX5288
Date of Disbursement

Mailing Address 1100 Logan Blvd

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	0	8

City Altoona State PA Zip Code 16602

Amount of Each Disbursement this Period

25.00

Purpose of Disbursement
Bank Service Charge

001

Category/
Type

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

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

Bank Service Charge

State: District:

C.

Full Name (Last, First, Middle Initial)
S&T Bank

Transaction ID: SB17-EX5357
Date of Disbursement

Mailing Address 1100 Logan Blvd

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	0	8

City Altoona State PA Zip Code 16602

Amount of Each Disbursement this Period

25.00

Purpose of Disbursement
Bank Service Charge

001

Category/
Type

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

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

Bank Service Charge

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

57.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Nemacolin Woodlands Resort & Spa

Mailing Address 1001 LaFayette Drive

City Farmington State PA Zip Code 15437

Purpose of Disbursement
Lodging

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5336

Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

32.10

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

Lodging

B.

Full Name (Last, First, Middle Initial)
e2c consulting Inc.

Mailing Address PO Box 29576

City Washington State DC Zip Code 20017

Purpose of Disbursement
Fundraising Consulting Fee - Jan 08

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5218

Date of Disbursement

01 / 10 / 2008

Amount of Each Disbursement this Period

4000.00

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

Fundraising Consulting Fee
- Jan 08

C.

Full Name (Last, First, Middle Initial)
e2c consulting Inc.

Mailing Address PO Box 29576

City Washington State DC Zip Code 20017

Purpose of Disbursement
Fundraising Consulting Fee - Feb 08

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5241

Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

4000.00

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

Fundraising Consulting Fee
- Feb 08

SUBTOTAL of Disbursements This Page (optional)

8032.10

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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) e2c consulting Inc.	Transaction ID: SB17-EX5267 Date of Disbursement 02 / 19 / 2008
	Mailing Address PO Box 29576	Amount of Each Disbursement this Period 4000.00
	City Washington State DC Zip Code 20017	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Fundraising Consulting Fee - Mar 08
	Purpose of Disbursement Fundraising Consulting Fee - Mar 08 Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) e2c consulting Inc.	Transaction ID: SB17-EX5355 Date of Disbursement 03 / 25 / 2008
	Mailing Address PO Box 29576	Amount of Each Disbursement this Period 4000.00
	City Washington State DC Zip Code 20017	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Fundraising Consulting Fee - Apr 08
	Purpose of Disbursement Fundraising Consulting Fee - Apr 08 Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Brent Gates	Transaction ID: SB17-EX5244 Date of Disbursement 02 / 19 / 2008
	Mailing Address 310 Penn Street Suite 200	Amount of Each Disbursement this Period 298.78
	City Hollidaysburg State PA Zip Code 16648	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Mileage reimbursement
	Purpose of Disbursement Mileage reimbursement Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	8298.78
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) Canan Station Print Shoppe <hr/> Mailing Address PO Box 632 <hr/> City Altoona State PA Zip Code 16603 <hr/> Purpose of Disbursement Invitations & RSVP Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5280 Date of Disbursement 03 / 04 / 2008 <hr/> Amount of Each Disbursement this Period 153.70 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Invitations & RSVP
B.	Full Name (Last, First, Middle Initial) Canan Station Print Shoppe <hr/> Mailing Address PO Box 632 <hr/> City Altoona State PA Zip Code 16603 <hr/> Purpose of Disbursement Envelopes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5281 Date of Disbursement 03 / 04 / 2008 <hr/> Amount of Each Disbursement this Period 143.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Envelopes
C.	Full Name (Last, First, Middle Initial) Canan Station Print Shoppe <hr/> Mailing Address PO Box 632 <hr/> City Altoona State PA Zip Code 16603 <hr/> Purpose of Disbursement Invitations and RSVP Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5299 Date of Disbursement 03 / 13 / 2008 <hr/> Amount of Each Disbursement this Period 214.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Invitations and RSVP

SUBTOTAL of Disbursements This Page (optional) ▶	511.45
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE 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 / 113

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) Canan Station Print Shoppe <hr/> Mailing Address PO Box 632 <hr/> City Altoona State PA Zip Code 16603 <hr/> Purpose of Disbursement Envelopes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5300 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 206.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Envelopes
B.	Full Name (Last, First, Middle Initial) Deluxe Business Checks And Solutions <hr/> Mailing Address PO Box 742572 <hr/> City Cincinnati State OH Zip Code 45274 <hr/> Purpose of Disbursement Checks order Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5361 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 282.78 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Checks order
C.	Full Name (Last, First, Middle Initial) Nicole Fedeli-Turiano <hr/> Mailing Address 4 Devon Drive <hr/> City Hollidaysburg State PA Zip Code 16648 <hr/> Purpose of Disbursement Various office supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX5232 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 78.79 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Various office supplies

SUBTOTAL of Disbursements This Page (optional) ▶	568.30
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Nicole Fedeli-Turiano

Mailing Address 4 Devon Drive

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
1/1/2008 to 1/31/2008 final payroll

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5242
Date of Disbursement

01 / 31 / 2008

Amount of Each Disbursement this Period

815.00

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

1/1/2008 to 1/31/2008 final payroll

B.

Full Name (Last, First, Middle Initial)
Nicole Fedeli-Turiano

Mailing Address 4 Devon Drive

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Payroll 2/1/2008 to 2/29/2008

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5271
Date of Disbursement

02 / 29 / 2008

Amount of Each Disbursement this Period

150.00

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

Payroll 2/1/2008 to 2/29/2008

C.

Full Name (Last, First, Middle Initial)
S&T Bank - Payroll

Mailing Address 1100 Logan Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement
EFTPS 940 -2007

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5224
Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

16.33

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

EFTPS 940 -2007

SUBTOTAL of Disbursements This Page (optional)

981.33

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) S&T Bank - Payroll Mailing Address 1100 Logan Blvd City Altoona State PA Zip Code 16602 Purpose of Disbursement PA Telefile 4th Quarter 2007 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX5225 Date of Disbursement 01 / 31 / 2008 Amount of Each Disbursement this Period 15.66 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PA Telefile 4th Quarter 2007
B.	Full Name (Last, First, Middle Initial) S&T Bank - Payroll Mailing Address 1100 Logan Blvd City Altoona State PA Zip Code 16602 Purpose of Disbursement EFTPS - January 2008 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX5286 Date of Disbursement 02 / 08 / 2008 Amount of Each Disbursement this Period 149.47 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EFTPS - January 2008
C.	Full Name (Last, First, Middle Initial) S&T Bank - Payroll Mailing Address 1100 Logan Blvd City Altoona State PA Zip Code 16602 Purpose of Disbursement EFTPS - February 2008 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX5287 Date of Disbursement 03 / 03 / 2008 Amount of Each Disbursement this Period 52.92 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EFTPS - February 2008

SUBTOTAL of Disbursements This Page (optional) ▶	218.05
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) S&T Bank - Payroll	Transaction ID: SB17-EX5346 Date of Disbursement 03 / 31 / 2008
	Mailing Address 1100 Logan Blvd	Amount of Each Disbursement this Period 26.85
	City Altoona State PA Zip Code 16602	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement EFTPS - March 2008 Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EFTPS - March 2008

B.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: SB17-EX5215 Date of Disbursement 01 / 10 / 2008
	Mailing Address PO Box 6463	Amount of Each Disbursement this Period 136.81
	City Carol Stream State IL Zip Code 60197	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Telephone

C.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: SB17-EX5229 Date of Disbursement 01 / 29 / 2008
	Mailing Address PO Box 6463	Amount of Each Disbursement this Period 152.40
	City Carol Stream State IL Zip Code 60197	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Telephone

SUBTOTAL of Disbursements This Page (optional)	316.06
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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

<p>A. Full Name (Last, First, Middle Initial) AT&T Mobility</p> <p>Mailing Address PO Box 6463</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Telephone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX5275</p> <p>Date of Disbursement 03 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 138.58</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Telephone</p>
<p>B. Full Name (Last, First, Middle Initial) AT&T Mobility</p> <p>Mailing Address PO Box 6463</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Telephone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX5347</p> <p>Date of Disbursement 03 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 132.42</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Telephone</p>
<p>C. Full Name (Last, First, Middle Initial) Jeremy Shoemaker</p> <p>Mailing Address 1247 Scotland Avenue</p> <p>City Chambersburg State PA Zip Code 17201</p> <p>Purpose of Disbursement Mileage reimbursement Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX5258</p> <p>Date of Disbursement 02 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 413.38</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Mileage reimbursement</p>

SUBTOTAL of Disbursements This Page (optional) ▶

684.38

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

**SCHEDULE 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
<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

A.	Full Name (Last, First, Middle Initial) Targeted Creative Communications Inc	Transaction ID: SB17-EX5253 Date of Disbursement 02 / 19 / 2008
	Mailing Address 106 South Columbus Street	Amount of Each Disbursement this Period 474.00
	City Alexandria State VA Zip Code 22314	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement GOP Phone Calls Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	005 Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	GOP Phone Calls

B.	Full Name (Last, First, Middle Initial) Targeted Creative Communications Inc	Transaction ID: SB17-EX5254 Date of Disbursement 02 / 19 / 2008
	Mailing Address 106 South Columbus Street	Amount of Each Disbursement this Period 545.00
	City Alexandria State VA Zip Code 22314	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Petition Drive Phone Calls Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	005 Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Petition Drive Phone Calls

C.	Full Name (Last, First, Middle Initial) Targeted Creative Communications Inc	Transaction ID: SB17-EX5255 Date of Disbursement 02 / 19 / 2008
	Mailing Address 106 South Columbus Street	Amount of Each Disbursement this Period 550.00
	City Alexandria State VA Zip Code 22314	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Petition Drive Phone Calls Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	005 Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Petition Drive Phone Calls

SUBTOTAL of Disbursements This Page (optional)	1569.00
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)

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
The Printing Department

Mailing Address PO Box 426

City Scotland State PA Zip Code 17254

Purpose of Disbursement

Invitations

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5259

Date of Disbursement

02 / 19 / 2008

Amount of Each Disbursement this Period

598.70

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

Invitations

B.

Full Name (Last, First, Middle Initial)
Meghan L Johnson

Mailing Address 301 Maple Hollow Road

City Duncansville State PA Zip Code 16635

Purpose of Disbursement
Payroll 3/01/2008 to 3/31/2008

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5356

Date of Disbursement

03 / 31 / 2008

Amount of Each Disbursement this Period

150.00

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

Payroll 3/01/2008 to 3/31-
/2008

C.

Full Name (Last, First, Middle Initial)
New Franklin Volunteer Fire Company

Mailing Address 3444 Wayne Road

City Chambersburg State PA Zip Code 17201

Purpose of Disbursement
Catering for Fundraiser 01.26.2008

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX5274

Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

1740.00

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

Catering for Fundraiser
01.26.2008

SUBTOTAL of Disbursements This Page (optional) ▶

2488.70

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

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

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

FOR LINE NUMBER: (check only one)

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

A.

Full Name (Last, First, Middle Initial)
District Chop House #2003

Mailing Address 509 7th Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement Meeting dinner
Candidate Name

002
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX5321
Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

534.09

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

Meeting dinner

B.

Full Name (Last, First, Middle Initial)
Hilton Capital Cafe

Mailing Address 1919 Connecticut Avenue NW

City Washington State DC Zip Code 20009

Purpose of Disbursement Dinner meeting
Candidate Name

002
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX5377
Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

450.27

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

Dinner meeting

SUBTOTAL of Disbursements This Page (optional)

984.36

TOTAL This Period (last page this line number only)

45201.19

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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

A.

Full Name (Last, First, Middle Initial)
William Shuster

Transaction ID: SB21-EX5270
Date of Disbursement

Mailing Address 9 Overlook Drive

02 / 19 / 2008

City Hollidaysburg State PA Zip Code 16648

Amount of Each Disbursement this Period

15.00

Purpose of Disbursement
Raffle Tickets for various events

012
Category/
Type

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

Candidate Name
William Shuster

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Raffle Tickets for various events

State: PA District: 09

B.

Full Name (Last, First, Middle Initial)
William Shuster

Transaction ID: SB21-EX5284
Date of Disbursement

Mailing Address 9 Overlook Drive

03 / 04 / 2008

City Hollidaysburg State PA Zip Code 16648

Amount of Each Disbursement this Period

34.00

Purpose of Disbursement
Various raffle tickets

012
Category/
Type

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

Candidate Name
William Shuster

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Various raffle tickets

State: PA District: 09

C.

Full Name (Last, First, Middle Initial)
William Shuster

Transaction ID: SB21-EX5302
Date of Disbursement

Mailing Address 9 Overlook Drive

03 / 13 / 2008

City Hollidaysburg State PA Zip Code 16648

Amount of Each Disbursement this Period

30.00

Purpose of Disbursement
Dinner Tickets

012
Category/
Type

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

Candidate Name
William Shuster

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Dinner Tickets

State: PA District: 09

SUBTOTAL of Disbursements This Page (optional) ▶

79.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

<p>A. Full Name (Last, First, Middle Initial) Precious Life Inc</p> <p>Mailing Address 1716 12th Avenue</p> <p>City Altoona State PA Zip Code 16601</p> <p>Purpose of Disbursement Gold Sponsorship & 6 tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-EX5263</p> <p>Date of Disbursement 02 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 260.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Gold Sponsorship & 6 tickets</p>
<p>B. Full Name (Last, First, Middle Initial) Juniata Co Republican Committee</p> <p>Mailing Address Joan L. Fulkroad RR #2 Box 1430</p> <p>City Mifflintown State PA Zip Code 17059</p> <p>Purpose of Disbursement Ticket for Presidents' Day Dinner</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-EX5277</p> <p>Date of Disbursement 03 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Ticket for Presidents' Day Dinner</p>
<p>C. Full Name (Last, First, Middle Initial) Juniata Co Republican Committee</p> <p>Mailing Address Joan L. Fulkroad RR #2 Box 1430</p> <p>City Mifflintown State PA Zip Code 17059</p> <p>Purpose of Disbursement Annual Spring Fling - 4 tix</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-EX5297</p> <p>Date of Disbursement 03 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 120.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Annual Spring Fling - 4 tix</p>

SUBTOTAL of Disbursements This Page (optional) ►

395.00

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 105 / 113

<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

A.

Full Name (Last, First, Middle Initial)
Bedford Co. Republican Committee

Transaction ID: SB21-EX5359

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	0	8

Mailing Address Michelle Kovel
418 State Street

Amount of Each Disbursement this Period

500.00

City Everett State PA Zip Code 15537

Purpose of Disbursement
Table sponsor for Spring Dinner

012

Category/
Type

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

Candidate Name

Table sponsor for Spring Dinner

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Mifflin Co Republican Committee

Transaction ID: SB21-EX5298

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	8

Mailing Address 1449 North River Road

Amount of Each Disbursement this Period

100.00

City Granville State PA Zip Code 17029

Purpose of Disbursement
Spring Banquet donation

012

Category/
Type

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

Candidate Name

Spring Banquet donation

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Franklin Co Republican Committee

Transaction ID: SB21-EX5265

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	0	8

Mailing Address Suite 293 South Gate Mall

Amount of Each Disbursement this Period

500.00

City Chambersburg State PA Zip Code 17201

Purpose of Disbursement
Table and Full Page Ad

012

Category/
Type

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

Candidate Name

Table and Full Page Ad

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1100.00

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

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

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

FOR LINE NUMBER: (check only one)

<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

<p>A. Full Name (Last, First, Middle Initial) Indiana Council Of Republican Women</p> <p>Mailing Address 1250 Oak Street</p> <p>City Indiana State PA Zip Code 15701</p> <p>Purpose of Disbursement Lincoln Day Dinner</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-EX5350</p> <p>Date of Disbursement 03 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Lincoln Day Dinner</p>
<p>B. Full Name (Last, First, Middle Initial) Fulton County Republican Committee</p> <p>Mailing Address PO Box 432</p> <p>City Hustontown State PA Zip Code 17229</p> <p>Purpose of Disbursement Spring Dinner</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-EX5360</p> <p>Date of Disbursement 04 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Spring Dinner</p>
<p>C. Full Name (Last, First, Middle Initial) Central PA Humane Society</p> <p>Mailing Address 1837 E. Pleasant Valley Blvd</p> <p>City Altoona State PA Zip Code 16602</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-EX5217</p> <p>Date of Disbursement 01 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Donation</p>

SUBTOTAL of Disbursements This Page (optional) ►

250.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 107 / 113

<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

A. Full Name (Last, First, Middle Initial)
Fayette County Republican Committee

Mailing Address 40 West South Street

City State Zip Code
Uniontown PA 15401

Purpose of Disbursement
Spring Dinner donation
Candidate Name

012
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: SB21-EX5285
Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

100.00

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

Spring Dinner donation

B. Full Name (Last, First, Middle Initial)
First Book Blair County #308

Mailing Address C/O Roaring Spring Community Libr
320 East Main Street

City State Zip Code
Roaring Spring PA 16673

Purpose of Disbursement
donation
Candidate Name

012
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: SB21-EX5236
Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

25.00

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

donation

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

Mailing Address 1111 N. Juniata Street

City State Zip Code
Hollidaysburg PA 16648

Purpose of Disbursement
Blair Co Young Republicans stickers
Candidate Name

012
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: SB21-EX5292
Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

144.46

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

Blair Co Young Republicans stickers

SUBTOTAL of Disbursements This Page (optional) ▶

269.46

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

2093.46

**SCHEDULE 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 / 113

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

A.

Full Name (Last, First, Middle Initial)
Richard J Corman

Mailing Address 1409 Jessamine Station Rd

City State Zip Code
Nicholasville KY 40356

Purpose of Disbursement
Contribution Ref to Individual

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB20a-CR25
Date of Disbursement

^M 0	^M 4	/	^D 0	^D 1	/	^Y 2	^Y 0	^Y 0	^Y 8
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

Amount of Each Disbursement this Period

250.00

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

Refund of 06/07/07 Contri-
bution

SUBTOTAL of Disbursements This Page (optional) ►

250.00

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

250.00

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one) 13a 13b

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Transaction ID: SC10-LN20

LOAN SOURCE Full Name (Last, First, Middle Initial)

S&T Bank

Election:

- Primary
- General
- Other (specify) ▼

Mailing Address Commercial Lending
208 West Plank Road

City Altoona State PA ZIP Code 16602

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	15000.00	15000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 1

D D
1 9

Y Y Y Y
2 0 0 7

20080530

8.2500 % (apr)

Yes 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: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	15000.00
TOTALS This Period (last page in this line only)	15000.00

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) PAGE 110 / 113
 FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Paint Doctor	Nature of Debt (Purpose): Invoice: Campaign Vehicle repairs Admini						
Mailing Address 2620 Fifth Avenue							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Altoona</td> <td>PA</td> <td>16602</td> </tr> </table>	City	State	ZIP Code	Altoona	PA	16602	
City	State	ZIP Code					
Altoona	PA	16602					

Outstanding Balance Beginning This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">150.00</div>	Transaction ID: SD9-INV5064						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div></td> <td><div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">150.00</div></td> <td><div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div>	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">150.00</div>	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div>	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">150.00</div>	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div>					

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T Mobility	Nature of Debt (Purpose): Invoice: Telephone Administrative/Salary						
Mailing Address PO Box 6463							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Carol Stream</td> <td>IL</td> <td>60197</td> </tr> </table>	City	State	ZIP Code	Carol Stream	IL	60197	
City	State	ZIP Code					
Carol Stream	IL	60197					

Outstanding Balance Beginning This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">136.81</div>	Transaction ID: SD9-INV5071						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div></td> <td><div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">136.81</div></td> <td><div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div>	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">136.81</div>	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div>	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">136.81</div>	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div>					

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ramada Inn Altoona	Nature of Debt (Purpose): Invoice: Catering Expense-Military Part						
Mailing Address One Sheraton Drive							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Altoona</td> <td>PA</td> <td>16601</td> </tr> </table>	City	State	ZIP Code	Altoona	PA	16601	
City	State	ZIP Code					
Altoona	PA	16601					

Outstanding Balance Beginning This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">246.76</div>	Transaction ID: SD9-INV5065						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div></td> <td><div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">246.76</div></td> <td><div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div>	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">246.76</div>	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div>	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">246.76</div>	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">.00</div>					

1) SUBTOTALS This Period This Page (optional).....	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">0.00</div>
2) TOTALS This Period (last page this line number only).....	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 111 / 113	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 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: Telephone Administrative/Salary
Mailing Address PO Box 660748			
City Dallas	State TX	ZIP Code 75266	

Outstanding Balance Beginning This Period		Transaction ID: SD9-INV5086	
180.74			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
.00	180.74	.00	

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 112 / 113
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 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: Telephone Administrative/Salary	
Mailing Address PO Box 660748		
City State ZIP Code Dallas TX 75266		

Outstanding Balance Beginning This Period [.00]	Transaction ID: SD10-INV5236	
Amount Incurred This Period [170.79]	Payment This Period [.00]	Outstanding Balance at Close of This Period [170.79]

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ATLANTIC broadband	Nature of Debt (Purpose): Invoice: Internet service Administrative	
Mailing Address Box 371801		
City State ZIP Code Pittsburgh PA 15250		

Outstanding Balance Beginning This Period [.00]	Transaction ID: SD10-INV5235	
Amount Incurred This Period [109.15]	Payment This Period [.00]	Outstanding Balance at Close of This Period [109.15]

1) SUBTOTALS This Period This Page (optional).....	[279.94]
2) TOTALS This Period (last page this line number only).....	[279.94]
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	[15000.00]
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	[15279.94]

Image# 28931079768

Form/Schedule: **F3N**

Transaction ID:

The accompanying Report of Receipts and Disbursements from January 1 2008 through April 2 2008 for th Bill Shuster for Congress Committee included in the prescribed form have been prepared by Frederick A. Ciocca CPA. I have prepared such financial statements in my capacity as treasurer of the Bill Shuster for Congress Committee.
