

A. Form/Schedule : **F3N**

Transaction ID :

The accompanying Report of Receipts and Disbursements from October 14 2010 to November 22 2010 for the 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 for the Bill Shuster for Congress Committee.

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

3 / 86

Write or Type Committee Name

Bill Shuster for Congress

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	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)).....	83855.00	840142.70
(b) Total Contribution Refunds (from Line 20(d)).....	100.00	2300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	83755.00	837842.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	160450.89	639352.39
(b) Total Offsets to Operating Expenditures (from Line 14).....	125.00	5715.67
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	160325.89	633636.72
8. Cash on Hand at Close of Reporting Period (from Line 27).....	133043.32	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	1837.54	

For further information contact:

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

POST-ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 07/05)

Report of Receipts and Disbursements

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Bill Shuster for Congress

Report Covering the Period: From: To:

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> <input type="text" value="02"/> <input type="text" value="2010"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> <input type="text" value="03"/> <input type="text" value="2010"/> (date after general election) through <input type="text" value="11"/> <input type="text" value="22"/> <input type="text" value="2010"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than Political Committees (i) Itemized (Use Schedule A)		
<input type="text" value="40580.00"/>	<input type="text" value="326118.22"/>	<input type="text" value="1000.00"/>
(ii) Unitemized		
<input type="text" value="2825.00"/>	<input type="text" value="16599.75"/>	<input type="text"/>
(iii) Total of contributions from individuals		
<input type="text" value="43405.00"/>	<input type="text" value="342717.97"/>	<input type="text" value="1000.00"/>
(b) Political Party Committees		
<input type="text"/>	<input type="text"/>	<input type="text"/>
(c) Other Political Committees		
<input type="text" value="40450.00"/>	<input type="text" value="497424.73"/>	<input type="text"/>

POST-ELECTION DETAILED SUMMARY PAGE Report of Receipts and Disbursements

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general Election) (* See page 5 for date)	COLUMN C Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
83855.00	840142.70	1000.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
(b). All Other Loans		
(c). TOTAL LOANS (add Lines 13(a) and (b))		
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
125.00	5715.67	
15. OTHER RECEIPTS (Dividends, Interest, etc)		
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
83980.00	845858.37	1000.00

POST ELECTION DETAILED SUMMARY PAGE

Write or Type Committe Name

Bill Shuster for Congress

Report the covering period

From:

10

14

2010

To:

11

22

2010

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
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17. OPERATING EXPENDITURES

160450.89

639352.39

33840.23

18. TRANSFER TO OTHER AUTHORIZED COMMITTEES

19. LOAN PAYMENTS

(a) Of Loans Made or Guaranteed by the Candidate

(b) Of All Other Loans

(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other Than Political Committees

100.00

2300.00

(b) Political Party Committees

**POST ELECTION DETAILED
SUMMARY PAGE**

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
(c) Other political committees (such as PACs)		
[]	[]	[]
(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))		
100.00	2300.00	[]
21. OTHER DISBURSEMENTS		
51175.00	131323.12	300.00
22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)		
211725.89	772975.51	34140.23

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

83755.00	837842.70	1000.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

160325.89	633636.72	33840.23
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	260789.21
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	83980.00
25. SUBTOTAL(add Line 23 and Line 24)	344769.21
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	211725.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	133043.32

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

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

FOR LINE NUMBER: PAGE 8 / 86
(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)
Dallas Safari Club PAC

Mailing Address 6390 LBJ Fwy - Suite 108

City State Zip Code
Dallas TX 75240

FEC ID number of contributing federal political committee. **C** C00356477

Name of Employer Occupation
None None

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: SA11C-CN7512

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Franklin Co Reagan Coalition

Mailing Address PO Box 240

City State Zip Code
Marion PA 17235

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

Name of Employer Occupation
None None

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11C-CN7381

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ABX Air Inc Pac

Mailing Address 145 Hunter Drive

City State Zip Code
Wilmington OH 45177

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

Name of Employer Occupation
None None

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: SA11C-CN7513

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 86
(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)
Air Products Political Alliance PAC
Mailing Address PO Box 441

City State Zip Code
Trexlerstown PA 18087

FEC ID number of contributing federal political committee. **C** C00127258

Name of Employer Occupation
None None

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: SA11C-CN7426

Amount of Each Receipt this Period
2000.00

3000.00

B. Full Name (Last, First, Middle Initial)
Allied Pilots Association
Mailing Address 14600 Trinity Blvd-Suite 500

City State Zip Code
Fort Worth TX 76155

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

Name of Employer Occupation
None None

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: SA11C-CN7519

Amount of Each Receipt this Period
2000.00

3000.00

C. Full Name (Last, First, Middle Initial)
Alpha Natural Resources PAC
Mailing Address 999 Corporate Blvd Suite 300

City State Zip Code
Linthicum Heights MD 21090

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

Name of Employer Occupation
None None

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: SA11C-CN7417

Amount of Each Receipt this Period
1000.00

1000.00

SUBTOTAL of Receipts This Page (optional) ► **5000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 86
(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)
Amazon Corporate LLC Pac

Mailing Address 126 C Street NW - #3

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00360354

Name of Employer None Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11C-CN7383
 Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
American Medical Association PAC

Mailing Address 25 Massachusetts Ave NW Suite 600

City Washington State DC Zip Code 20001

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

Name of Employer None Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11C-CN7461
 Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Anheuser-Busch Companies PAC

Mailing Address 1401 I St NW Suite 200

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00034488

Name of Employer None Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11C-CN7511
 Amount of Each Receipt this Period: 1500.00

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 86
(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)
Austin Industries Companies PAC

Mailing Address PO Box 1590

City State Zip Code
Dallas TX 75221

FEC ID number of contributing federal political committee. **C** C00093179

Name of Employer Occupation
None None

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11C-CN7479

Amount of Each Receipt this Period
1000.00

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

Mailing Address 101 Constitution Ave NW
Suite 500 East

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation
None None

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: SA11C-CN7518

Amount of Each Receipt this Period
1000.00

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

Mailing Address One Comcast Center
1701 JFK Boulevard

City State Zip Code
Philadelphia PA 19103

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

Name of Employer Occupation
None None

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: SA11C-CN7514

Amount of Each Receipt this Period
2000.00

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 12 / 86
(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)
Eagle Forum PAC

Mailing Address PO Box 618

City Alton State IL Zip Code 62002

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

Name of Employer None Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11C-CN7423
 Amount of Each Receipt this Period: 5000.00

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

Mailing Address 1800 Center St

City Camp Hill State PA Zip Code 17089

FEC ID number of contributing federal political committee. **C** C00302844

Name of Employer None Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11C-CN7384
 Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
International Assoc Of Firefighters

Mailing Address 1750 New York Ave NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer None Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5500.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11C-CN7425
 Amount of Each Receipt this Period: 1500.00

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 86
(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)
IPAA Wildcatters Fund

Mailing Address 1201 15th St NW
Suite 300

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00246306

Name of Employer None Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11C-CN7382
 Amount of Each Receipt this Period: 1000.00

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

Mailing Address 1099 New York Avenue NW
Suite 510

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00063164

Name of Employer None Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11C-CN7427
 Amount of Each Receipt this Period: 2500.00

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

Mailing Address 501 South Fifth Street

City Richmond State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00065987

Name of Employer None Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11C-CN7385
 Amount of Each Receipt this Period: 2000.00

SUBTOTAL of Receipts This Page (optional) ► 5500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 86
(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)
Mid-Atlantic Laborers Political League

Mailing Address 12355 Sunrise Valley Drive
Suite 550

City Reston State VA Zip Code 20191

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

Name of Employer None Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11C-CN7517
 Amount of Each Receipt this Period: 2500.00

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

Mailing Address 606 North Washington Street

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00091561

Name of Employer None Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11C-CN7424
 Amount of Each Receipt this Period: 2000.00

C. Full Name (Last, First, Middle Initial)
National Pro-Life Alliance PAC

Mailing Address 4521 Windsor Arms Court

City Annandale State VA Zip Code 22003

FEC ID number of contributing federal political committee. **C** C00358051

Name of Employer None Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11C-CN7508
 Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 5000.00

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 15 / 86
(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)
Rio Tinto America Inc PAC
Mailing Address 4700 Daybreak Parkway
City South Jordan State UT Zip Code 84095
FEC ID number of contributing federal political committee. **C** C00243675
Name of Employer None Occupation None
Receipt For: 2010 Primary General Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 11 / 02 / 2010
Transaction ID: SA11C-CN7529
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Texas Good Roads Trans PAC
Mailing Address 1122 Colorado - Suite 305
City Austin State TX Zip Code 78701
FEC ID number of contributing federal political committee. **C** C00332478
Name of Employer None Occupation None
Receipt For: 2010 Primary General Other (specify) ▼ Election Cycle-to-Date ▼ 1200.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11C-CN7468
Amount of Each Receipt this Period 1200.00

C. Full Name (Last, First, Middle Initial)
The Kroger PAC
Mailing Address 1014 Vine Street 6th Floor
City Cincinnati State OH Zip Code 45202
FEC ID number of contributing federal political committee. **C** C00059238
Name of Employer None Occupation None
Receipt For: 2010 Primary General Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11C-CN7458
Amount of Each Receipt this Period 250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 86
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.	Full Name (Last, First, Middle Initial) USAA Employee PAC		Date of Receipt
	Mailing Address 601 Pennsylvania Avenue NW Suite 225 North Tower		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20004
	FEC ID number of contributing federal political committee.		Transaction ID: SA11C-CN7509
	C C00164145		Amount of Each Receipt this Period
Name of Employer None		Occupation None	<input type="text" value="5000.00"/>
Receipt For: 2010		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="5000.00"/>	

B.	Full Name (Last, First, Middle Initial) Valero PAC		Date of Receipt
	Mailing Address 601 Pennsylvania Avenue NW Suite 900 North Building		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20004
	FEC ID number of contributing federal political committee.		Transaction ID: SA11C-CN7462
	C C00109546		Amount of Each Receipt this Period
Name of Employer None		Occupation None	<input type="text" value="1000.00"/>
Receipt For: 2010		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="40450.00"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 86
(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)
Mr. Jonathan F Abrams

Mailing Address 111 Congress Avenue - Suite 2400

City Austin State TX Zip Code 78701

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

Name of Employer J.D. Abrams LP Occupation General Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11Ai-CN7483
 Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Jack Albert

Mailing Address 5557 Scenic Bluff Tr.

City Christoval State TX Zip Code 76935

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

Name of Employer Reece Albert Inc Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11Ai-CN7472
 Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Roger Albert

Mailing Address 17409 March Road

City San Angelo State TX Zip Code 76901

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

Name of Employer Reece Albert Inc Occupation Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11Ai-CN7478
 Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 86
(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)
Mr. Joe Charles Ballenger

Mailing Address 30 Laguna Madre Drive

City Laguna Vista State TX Zip Code 78578

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

Name of Employer Ballenger Construction Company Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11Ai-CN7480
 Amount of Each Receipt this Period: 2500.00

B. Full Name (Last, First, Middle Initial)
Mr. Mike Batterson

Mailing Address 1501 Cortlandt

City Houston State TX Zip Code 77018

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

Name of Employer Batterson LLP Occupation Managing Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11Ai-CN7501
 Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Harry K Benjamin

Mailing Address 210 East Plank Road

City Altoona State PA Zip Code 16602

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

Name of Employer Edgemate Inc Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2250.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11Ai-CN7414
 Amount of Each Receipt this Period: 1000.00

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 19 / 86
(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)
Mr. James E Bradley

Mailing Address PO Box 1301

City Austin State TX Zip Code 78767

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

Name of Employer Capital Excavation Company Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11Ai-CN7473
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Waylan J Brannan, Jr

Mailing Address 111 Elk

City Victoria State TX Zip Code 77904

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

Name of Employer Brannan Paving Company LTD Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11Ai-CN7484
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Mr. John J Brennan, III

Mailing Address 5103 Cass Street

City Omaha State NE Zip Code 68132

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

Name of Employer Union Pacific Railroad Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11Ai-CN7464
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 86
	<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) Mr. Stacey Bryant		Date of Receipt	
	Mailing Address 2403 Humble Avenue		M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11Ai-CN7485
	Midland	TX	79705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Jones Brothers Dirt & Paving		Occupation Executive		
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼		
		500.00		

B.	Full Name (Last, First, Middle Initial) Mr. Zack Burkett, III		Date of Receipt	
	Mailing Address PO Box 118		M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11Ai-CN7486
	Graham	TX	76450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Zack Burkett Company		Occupation President		
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼		
		500.00		

C.	Full Name (Last, First, Middle Initial) Mr. Albert J Clark, Jr		Date of Receipt	
	Mailing Address 5140 Gibbs Sprawl Road		M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11Ai-CN7471
	San Antonio	TX	78219	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer Clark Construction Of Texas Inc		Occupation President		
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼		
		1000.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 86
	<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) Mr. Michael Clark	Date of Receipt MM / DD / YYYY 11 / 09 / 2010
	Mailing Address 1300 Pennsylvania Avenue NW Suite 700	Transaction ID: SA11Ai-CN7530
	City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Surmont LLC Occupation President Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 1000.00	

B.	Full Name (Last, First, Middle Initial) Mr. Scott R Derr	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address PO Box 1848	Transaction ID: SA11Ai-CN7488
	City Friendswood State TX Zip Code 77549	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Scott Derr Painting Company Occupation Owner Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. Robert England	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 10303 Dogwood Trail	Transaction ID: SA11Ai-CN7489
	City College Station State TX Zip Code 77845	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer N-Line Traffic Maintenance Occupation Partner Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 300.00	

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: (check only one)	PAGE 22 / 86
	<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) Mr. William E Gibson		Date of Receipt
	Mailing Address 5860 Oram Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	City	State	Zip Code
	Dallas	TX	75206
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11Ai-CN7476
Name of Employer Gibson & Associates		Occupation Contractor	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00

B.	Full Name (Last, First, Middle Initial) Maxine L Gindlesperger		Date of Receipt
	Mailing Address 165 Highfield Ln N		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	Chambersburg	PA	17201
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11Ai-CN7419
Name of Employer e-LYNXX Corporation		Occupation Print Procurement Service Provider	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2755.99

C.	Full Name (Last, First, Middle Initial) David K Goodman, Jr.		Date of Receipt
	Mailing Address 2015 Ellis Ave		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	Huntingdon	PA	16652
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11Ai-CN7457
Name of Employer DC Goodman and Sons Inc		Occupation President/Owner	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2500.00
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 23 / 86
(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)
Mr. Robert Hall

Mailing Address 15627 FM 410 N

City State Zip Code
Detroit TX 75436

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

Name of Employer Occupation
R. K. Hall Construction LTD Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11Ai-CN7477

Amount of Each Receipt this Period
1000.00

1000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Steve P Hellmuth

Mailing Address 13481 Peninsula Road

City State Zip Code
Whitehouse TX 75791

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

Name of Employer Occupation
Striping Technology LP Senior Vice President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11Ai-CN7481

Amount of Each Receipt this Period
400.00

400.00

C.

Full Name (Last, First, Middle Initial)
Ms. Tracy Helmcamp-Schieffer

Mailing Address PO Box 70

City State Zip Code
Kurten TX 77862

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

Name of Employer Occupation
A.L. Helmcamp Inc. CFO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11Ai-CN7465

Amount of Each Receipt this Period
1000.00

1000.00

SUBTOTAL of Receipts This Page (optional) ► **2400.00**

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 / 86
(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)
Mr. Dennis C Hirschfeld, P.E.
 Mailing Address 5502 Bentwood Drive
 City San Angelo State TX Zip Code 76904
 Date of Receipt 10 / 25 / 2010
 Transaction ID: SA11Ai-CN7475
 Amount of Each Receipt this Period 1000.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Hirschfeld Industries Occupation CEO
 Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00

B. Full Name (Last, First, Middle Initial)
Thomas M Hite
 Mailing Address 1601 Fordham Cir
 City Altoona State PA Zip Code 16602
 Date of Receipt 10 / 18 / 2010
 Transaction ID: SA11Ai-CN7415
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer CTC Occupation Engineer/Program Manager
 Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1100.00

C. Full Name (Last, First, Middle Initial)
James D Hughes
 Mailing Address 211 Shatto Dr
 City Carlisle State PA Zip Code 17013
 Date of Receipt 11 / 02 / 2010
 Transaction ID: SA11Ai-CN7526
 Amount of Each Receipt this Period 1500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Salzmann Hughes & Fishman Occupation Attorney
 Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 86
(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)
Mr. Lawrence G Hurley

Mailing Address 20649 Southwood Oaks

City State Zip Code
Porter TX 77365

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Webber LLC President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11Ai-CN7474

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Steven A Jarvis, P.E.

Mailing Address 14510 Bramblewood Drive

City State Zip Code
Houston TX 77079

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Beyer Construction VP & General Manager

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11Ai-CN7492

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Karen A Johnson

Mailing Address 1122 Colorado Street - Suite 300

City State Zip Code
Austin TX 78701

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Infrastructure Solutions Inc President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11Ai-CN7470

Amount of Each Receipt this Period
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 26 / 86
(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)
Mr. Larry Johnson

Mailing Address PO Box 9035

City State Zip Code
Longview TX 75608

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

Name of Employer Occupation
Longview Bridge & Road Contractor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11Ai-CN7469

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Mrs. Rita J Keefer

Mailing Address 5897 Gabrielle Lane

City State Zip Code
Chambersburg PA 17202

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

Name of Employer Occupation
None Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: SA11Ai-CN7421

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Keith Keller

Mailing Address PO Box 393

City State Zip Code
Fredericksburg TX 78624

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

Name of Employer Occupation
Allen Keller Company Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11Ai-CN7493

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **3250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 86
(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)
H Duane Kinzer

Mailing Address 463 Baltimore St E

City Greencastle State PA Zip Code 17225

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

Name of Employer Century Leasing Company Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11Ai-CN7418
 Amount of Each Receipt this Period: 1000.00

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

Mailing Address PO Box 1958

City Corona State CA Zip Code 92878

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

Name of Employer J&R Oil Company Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11Ai-CN7459
 Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert C Lanham, Jr

Mailing Address 2210 Britton Ridge Drive

City Katy State TX Zip Code 77494

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

Name of Employer Williams Brothers Construction Occupation Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11Ai-CN7466
 Amount of Each Receipt this Period: 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 28 / 86
(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 A Martin
Mailing Address 7366 Horst Rd
City Chambersburg State PA Zip Code 17202
FEC ID number of contributing federal political committee. **C**
Name of Employer Martins Famous Pastry Shoppe Inc Occupation President
Receipt For: 2010 Primary General Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11Ai-CN7420
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Ms. Joann McGehee
Mailing Address PO Box 38231
City Houston State TX Zip Code 77238
FEC ID number of contributing federal political committee. **C**
Name of Employer Highway Pavement Specialties Inc. Occupation Owner
Receipt For: 2010 Primary General Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11Ai-CN7467
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Greg Parker
Mailing Address 120 E. Gaston Street
City Savannah State GA Zip Code 31401
FEC ID number of contributing federal political committee. **C**
Name of Employer The Parker Companies Occupation President
Receipt For: 2010 Primary General Other (specify) ▼ Election Cycle-to-Date ▼ 500.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11Ai-CN7505
Amount of Each Receipt this Period 500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 86
(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)
S.R. Wojdak & Associates LP

Mailing Address 30 North Third Street
Suite 950

City Harrisburg State PA Zip Code 17101

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

Name of Employer None Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11Ai-CN7515
 Amount of Each Receipt this Period: 2400.00

B. Full Name (Last, First, Middle Initial)
Mr. Stephen R Wojdak

Mailing Address 30 North Third Street
Suite 950

City Harrisburg State PA Zip Code 17101

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

Name of Employer S.R. Wojdak & Associates LP Occupation Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11Ai-CN7516
 Amount of Each Receipt this Period: 2400.00
 Partnership-S.R. Wojdak & Associates
[MEMO ITEM]
 \$2400.00 MEMO Partnership Attributed

C. Full Name (Last, First, Middle Initial)
Mr. Eric E Patterson

Mailing Address PO Box 225

City Waynesboro State PA Zip Code 17268

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

Name of Employer Power Company Entertainment Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 330.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11Ai-CN7455
 Amount of Each Receipt this Period: 330.00

SUBTOTAL of Receipts This Page (optional) ► 2730.00

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 / 86
(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)
Mr. Howard T Pebley, Jr
Mailing Address 4700 W. Lark Avenue

City State Zip Code
McAllen TX 78504

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

Name of Employer Occupation
McAllen Construction Inc President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11Ai-CN7494

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. William C Polacek
Mailing Address 187 Wyndmere Drive

City State Zip Code
Johnstown PA 15904

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

Name of Employer Occupation
JWF Industries Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: SA11Ai-CN7416

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mrs. Becky Pruitt
Mailing Address PO Box 790

City State Zip Code
Henderson TX 75653

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

Name of Employer Occupation
Lone Star Equipment Company Inc Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11Ai-CN7495

Amount of Each Receipt this Period
300.00

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 31 / 86
(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)
Mr. David C Rajtik

Mailing Address 3293 Muirfield Drive

City Chambersburg State PA Zip Code 17202

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

Name of Employer Antrim Insurance Agency Inc. Occupation Insurance/Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 18 / 2010

Transaction ID: SA11Ai-CN7428

Amount of Each Receipt this Period: 250.00

Election Cycle-to-Date: 250.00

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

Mailing Address 10970 McFarland Rd

City Mercersburg State PA Zip Code 17236

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

Name of Employer Universal Projects Inc. Occupation Businessman

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 18 / 2010

Transaction ID: SA11Ai-CN7422

Amount of Each Receipt this Period: 2000.00

Election Cycle-to-Date: 3000.00

C. Full Name (Last, First, Middle Initial)
Susan E Salzmman

Mailing Address 4 Sebastian Way

City Carlisle State PA Zip Code 17013

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

Name of Employer None Occupation Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 02 / 2010

Transaction ID: SA11Ai-CN7525

Amount of Each Receipt this Period: 1500.00

Election Cycle-to-Date: 3000.00

SUBTOTAL of Receipts This Page (optional) ► **3750.00**

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 / 86
(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)
Mr. John R Schnake

Mailing Address 650 Shartle Cir

City State Zip Code
Houston TX 77024

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

Name of Employer Occupation
John Reed & Company LTD Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11Ai-CN7496

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
A E Shull

Mailing Address 1310 Roseland Blvd

City State Zip Code
Tyler TX 75701

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

Name of Employer Occupation
A. E. Shull & Comany Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11Ai-CN7500

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Gene E Smith

Mailing Address 1515 Memorial Lane

City State Zip Code
Conroe TX 77304

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

Name of Employer Occupation
Smith & Company Highway Contractor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11Ai-CN7497

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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

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

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

FOR LINE NUMBER: PAGE 33 / 86
(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)
Mr. Mike C Smith

Mailing Address 13488 Laramie Trl

City State Zip Code
Montgomery TX 77316

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

Name of Employer Smith & Company Occupation Highway Contractor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11Ai-CN7498

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Terry M Toohig

Mailing Address 61 Tyler Drive

City State Zip Code
Chambersburg PA 17201

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

Name of Employer Volvo Construction Equipm-ent Occupation Engineering Program Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: SA11Ai-CN7520

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Tommy Willis

Mailing Address PO Box 7109

City State Zip Code
Abilene TX 79608

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

Name of Employer Willis Electric Company LP Occupation General Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11Ai-CN7499

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

TOTAL This Period (last page this line number only) ▶ **40580.00**

**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 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) William Shuster Mailing Address 455 Overlook Drive City Hollidaysburg State PA Zip Code 16648 Purpose of Disbursement Parking fees Candidate Name William Shuster Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 09 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7252 Date of Disbursement 10 / 27 / 2010 Amount of Each Disbursement this Period 40.00 Parking fees
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 Labels Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7312 Date of Disbursement 11 / 11 / 2010 Amount of Each Disbursement this Period 7.84 Labels
C.	Full Name (Last, First, Middle Initial) The Orchards Mailing Address 1580 Orchard Drive City Chambersburg State PA Zip Code 17201 Purpose of Disbursement Fundraiser catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7323 Date of Disbursement 11 / 17 / 2010 Amount of Each Disbursement this Period 4274.94 Fundraiser catering

SUBTOTAL of Disbursements This Page (optional) ▶

4322.78

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address PO Box 15026</p> <p>City Albany State NY Zip Code 12212</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7218</p> <p>Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 207.62</p> <p>Telephone</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) State Farm Insurance</p> <p>Mailing Address 715 Lexington Avenue</p> <p>City Altoona State PA Zip Code 16601</p> <p>Purpose of Disbursement Campaign Vehicle Insurance Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7287</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 241.58</p> <p>Campaign Vehicle Insurance</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Press Box Printing</p> <p>Mailing Address 2109 Ninth Avenue</p> <p>City Altoona State PA Zip Code 16602</p> <p>Purpose of Disbursement Handout cards Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7310</p> <p>Date of Disbursement 11 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 397.50</p> <p>Handout cards</p>

SUBTOTAL of Disbursements This Page (optional) ▶

846.70

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) PA UC Fund <hr/> Mailing Address PO Box 68568 <hr/> City Harrisburg State PA Zip Code 17106 <hr/> Purpose of Disbursement 3rd Quarter 2010 UC tax Candidate Name	Transaction ID: SB17-EX7212 Date of Disbursement 10 / 18 / 2010 <hr/> Amount of Each Disbursement this Period 12.50 <hr/> 3rd Quarter 2010 UC tax		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For: 2010	
B. Full Name (Last, First, Middle Initial) UPS <hr/> Mailing Address PO Box 7247-0244 <hr/> City Philadelphia State PA Zip Code 19170 <hr/> Purpose of Disbursement Postage Candidate Name	Transaction ID: SB17-EX7251 Date of Disbursement 10 / 27 / 2010 <hr/> Amount of Each Disbursement this Period 17.06 <hr/> Postage		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For: 2010	
C. Full Name (Last, First, Middle Initial) IS2 Technologies Inc. <hr/> Mailing Address 3018 Pleasant Valley Blvd <hr/> City Altoona State PA Zip Code 16602 <hr/> Purpose of Disbursement Computer repairs Candidate Name	Transaction ID: SB17-EX7324 Date of Disbursement 11 / 17 / 2010 <hr/> Amount of Each Disbursement this Period 225.00 <hr/> Computer repairs		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For: 2010	

SUBTOTAL of Disbursements This Page (optional) ▶

254.56

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 37 / 86

<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) Roger Osbaugh</p> <p>Mailing Address 1153 Leisure Drive</p> <p>City Chambersburg State PA Zip Code 17202</p> <p>Purpose of Disbursement Mileage/Tickets reimbursement</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7233</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="222.70"/></p> <p>Mileage/Tickets reimbursement</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Roger Osbaugh</p> <p>Mailing Address 1153 Leisure Drive</p> <p>City Chambersburg State PA Zip Code 17202</p> <p>Purpose of Disbursement Mileage reimbursement</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7289</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="66.50"/></p> <p>Mileage reimbursement</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Roger Osbaugh</p> <p>Mailing Address 1153 Leisure Drive</p> <p>City Chambersburg State PA Zip Code 17202</p> <p>Purpose of Disbursement Mileage reimbursement</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7368</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="182.50"/></p> <p>Mileage reimbursement</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="471.70"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE 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) Verizon Wireless</p> <p>Mailing Address PO Box 25505</p> <p>City Lehigh Valley State PA Zip Code 18002</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7235</p> <p>Date of Disbursement 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 514.08</p> <p>Telephone</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 25505</p> <p>City Lehigh Valley State PA Zip Code 18002</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7367</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 526.04</p> <p>Telephone</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) ATLANTIC broadband</p> <p>Mailing Address Box 371801</p> <p>City Pittsburgh State PA Zip Code 15250</p> <p>Purpose of Disbursement Internet Service Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7219</p> <p>Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 63.05</p> <p>Internet Service</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1103.17

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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 Blairmont Club

Mailing Address 145 Larch Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement

Ticket

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7296
Date of Disbursement

11 / 09 / 2010

Amount of Each Disbursement this Period

200.00

Ticket

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

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7292
Date of Disbursement

10 / 29 / 2010

Amount of Each Disbursement this Period

7.00

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

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7285
Date of Disbursement

11 / 01 / 2010

Amount of Each Disbursement this Period

30.00

Bank Service Charge

SUBTOTAL of Disbursements This Page (optional)

237.00

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)
e2c consulting Inc.

Mailing Address PO Box 29576

City Washington State DC Zip Code 20017

Purpose of Disbursement
Fundraising Consulting Fee - Nov 10

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General Other (specify) ▼

State: District:

Transaction ID: SB17-EX7236
Date of Disbursement

10 / 27 / 2010

Amount of Each Disbursement this Period

4000.00

Fundraising Consulting Fee - Nov 10

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
Bonus for fundraising

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General Other (specify) ▼

State: District:

Transaction ID: SB17-EX7321
Date of Disbursement

11 / 17 / 2010

Amount of Each Disbursement this Period

4500.00

Bonus for fundraising

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 - Dec 10

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General Other (specify) ▼

State: District:

Transaction ID: SB17-EX7370
Date of Disbursement

11 / 22 / 2010

Amount of Each Disbursement this Period

4000.00

Fundraising Consulting Fee - Dec 10

SUBTOTAL of Disbursements This Page (optional) ▶

12500.00

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)
Brent Gates

Transaction ID: SB17-EX7288
Date of Disbursement

Mailing Address 310 Penn Street
Suite 200

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

City Hollidaysburg State PA Zip Code 16648

Amount of Each Disbursement this Period

31.00

Purpose of Disbursement
Mileage reimbursement

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Mileage reimbursement

State: District:

B.

Full Name (Last, First, Middle Initial)
Jennifer Mearkle

Transaction ID: SB17-EX7217
Date of Disbursement

Mailing Address 3022 Broad Avenue

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

City Altoona State PA Zip Code 16601

Amount of Each Disbursement this Period

34.00

Purpose of Disbursement
Mileage reimbursement

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Mileage reimbursement

State: District:

C.

Full Name (Last, First, Middle Initial)
Jennifer Mearkle

Transaction ID: SB17-EX7280
Date of Disbursement

Mailing Address 3022 Broad Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	1	0

City Altoona State PA Zip Code 16601

Amount of Each Disbursement this Period

150.00

Purpose of Disbursement
Payroll 10/01/2010 to 10/31/2010

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Payroll 10/01/2010 to 10/31/2010

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

215.00

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) CCH Incorporated <hr/> Mailing Address PO Box 4307 <hr/> City Carol Stream State IL Zip Code 60197 <hr/> Purpose of Disbursement Campaign Financing Guide Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7234 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0
	Amount of Each Disbursement this Period 1065.30
	Campaign Financing Guide
	Category/Type 001

B. Full Name (Last, First, Middle Initial) Edonation 1 Account <hr/> Mailing Address 117 North Saint Asaph Street <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Bank Service Charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7231 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 82.00
	Bank Service Charge
	Category/Type 001

C. Full Name (Last, First, Middle Initial) Edonation 1 Account <hr/> Mailing Address 117 North Saint Asaph Street <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Bank Service Charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7297 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 2.00
	Bank Service Charge
	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	1149.30
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)
Steve Martinko

Mailing Address 614 Maryland Avenue NE #2

City Washington State DC Zip Code 20002

Purpose of Disbursement
Mileage and meals reimbursement
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX7318
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	1	/	2	0	1	0

Amount of Each Disbursement this Period

322.50

Mileage and meals reimbursement

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
3rd quarter 2010 withholding tax
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX7230
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Amount of Each Disbursement this Period

16.59

3rd quarter 2010 withholding tax

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 - October 2010
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX7282
Date of Disbursement

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

Amount of Each Disbursement this Period

2074.82

EFTPS - October 2010

SUBTOTAL of Disbursements This Page (optional)

2413.91

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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-EX7283 Date of Disbursement
	Mailing Address 1100 Logan Blvd	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Altoona State PA Zip Code 16602	Amount of Each Disbursement this Period
	Purpose of Disbursement VA Withholding - Oct 2010	<input type="text" value="303.42"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		VA Withholding - Oct 2010

B.	Full Name (Last, First, Middle Initial) S&T Bank - Payroll	Transaction ID: SB17-EX7298 Date of Disbursement
	Mailing Address 1100 Logan Blvd	<input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
	City Altoona State PA Zip Code 16602	Amount of Each Disbursement this Period
	Purpose of Disbursement EFTPS - November 2010	<input type="text" value="1039.53"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EFTPS - November 2010

C.	Full Name (Last, First, Middle Initial) S&T Bank - Payroll	Transaction ID: SB17-EX7326 Date of Disbursement
	Mailing Address 1100 Logan Blvd	<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City Altoona State PA Zip Code 16602	Amount of Each Disbursement this Period
	Purpose of Disbursement EFTPS - November 2010	<input type="text" value="1617.73"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EFTPS - November 2010

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2960.68"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 46 / 86

<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) AT&T Mobility Mailing Address PO Box 6463 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7286 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 133.68 Telephone

B. Full Name (Last, First, Middle Initial) Jeremy Shoemaker Mailing Address 4663 E Zana Ct City Waynesboro State PA Zip Code 17268 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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7322 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 534.50 Mileage reimbursement

C. Full Name (Last, First, Middle Initial) Jamie Boone Mailing Address 1200 N. Veitch Street Apartment #1041 City Arlington State VA Zip Code 22201 Purpose of Disbursement Mileage and Meals reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7315 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 1 / 2 0 1 0
	Amount of Each Disbursement this Period 975.36 Mileage and Meals reimbursement

SUBTOTAL of Disbursements This Page (optional) ▶	1643.54
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)
Kelley Halliwell

Mailing Address 2504 Valley Drive

City Alexandria State VA Zip Code 22302

Purpose of Disbursement
Mileage and Meals reimbursement
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX7313
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	1		2	0	1	0

Amount of Each Disbursement this Period

441.25

Mileage and Meals reimbursement

B.

Full Name (Last, First, Middle Initial)
WTRN Radio

Mailing Address PO Box 247
ATTN: Peg Baney

City Tyrone State PA Zip Code 16686

Purpose of Disbursement
Veterans Day radio ad
Candidate Name

004
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX7224
Date of Disbursement

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

Amount of Each Disbursement this Period

30.00

Veterans Day radio ad

C.

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

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement
Credit Card Paid by American Express
Candidate Name

003
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX7277
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	1	0

Amount of Each Disbursement this Period

8824.63

Credit Card Paid by American Express

SUBTOTAL of Disbursements This Page (optional)

9295.88

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. Full Name (Last, First, Middle Initial) Embassy Suites - Huntsville</p> <p>Mailing Address 800 Monroe Street SW</p> <p>City Huntsville State AL Zip Code 35801</p> <p>Purpose of Disbursement Lodging</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7239</p> <p>Date of Disbursement 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 2.50</p> <p>[MEMO ITEM] Lodging fee</p>
<p>B. Full Name (Last, First, Middle Initial) Lena's Cafe</p> <p>Mailing Address 2000 Eighth Avenue</p> <p>City Altoona State PA Zip Code 16602</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</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7262</p> <p>Date of Disbursement 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 30.00</p> <p>[MEMO ITEM] Meals</p>
<p>C. Full Name (Last, First, Middle Initial) Sheetz Inc</p> <p>Mailing Address 5700 Sixth Avenue</p> <p>City Altoona State PA Zip Code 16602</p> <p>Purpose of Disbursement Vehicle Expenses</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7238</p> <p>Date of Disbursement 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 18.92</p> <p>[MEMO ITEM] Gasoline</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7240
Date of Disbursement

09 / 15 / 2010

Amount of Each Disbursement this Period

70.00

[MEMO ITEM]
Meals

B.

Full Name (Last, First, Middle Initial)
Pasta Lorenzo

Mailing Address 112 East Main Street

City Uniontown State PA Zip Code 15401

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7276
Date of Disbursement

09 / 17 / 2010

Amount of Each Disbursement this Period

68.97

[MEMO ITEM]
Meals

C.

Full Name (Last, First, Middle Initial)
CVS Pharmacy

Mailing Address 3200 Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Office Expenses

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7264
Date of Disbursement

09 / 21 / 2010

Amount of Each Disbursement this Period

14.83

[MEMO ITEM]
Cameras

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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
Vehicle Expenses

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7242
Date of Disbursement

09 / 21 / 2010

Amount of Each Disbursement this Period

27.00

[MEMO ITEM]
Gasoline

B.

Full Name (Last, First, Middle Initial)
The Blairmont Club

Mailing Address 145 Larch Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7241
Date of Disbursement

09 / 21 / 2010

Amount of Each Disbursement this Period

42.21

[MEMO ITEM]
Meals

C.

Full Name (Last, First, Middle Initial)
Fiore Mitsubishi Isuzu

Mailing Address Rte 36 Logan Blvd
PO Box 1033

City Altoona State PA Zip Code 16603

Purpose of Disbursement
Vehicle Expenses

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7265
Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

58.13

[MEMO ITEM]
Campaign Vehicle Inspecti-
on

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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) Sheetz Inc</p> <p>Mailing Address 5700 Sixth Avenue</p> <p>City Altoona State PA Zip Code 16602</p> <p>Purpose of Disbursement Vehicle Expenses</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7266</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 24.90</p> <p>[MEMO ITEM] Gasoline</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ramparts Tavern & Grill</p> <p>Mailing Address 1700 Fern Street</p> <p>City Alexandria State VA Zip Code 22302</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</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7270</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 76.82</p> <p>[MEMO ITEM] Meals</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) MK Catering</p> <p>Mailing Address 5724 Lafayette Pl</p> <p>City Hyattsville State MD Zip Code 20781</p> <p>Purpose of Disbursement Fundraising</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7271</p> <p>Date of Disbursement 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 2221.42</p> <p>[MEMO ITEM] Catering for Fundraiser</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

<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)
Union Hotel & Restaurant

Mailing Address 128 East Main Street

City Everett State PA Zip Code 15537

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7243
Date of Disbursement

09 / 26 / 2010

Amount of Each Disbursement this Period

38.50

[MEMO ITEM]
Meals

B.

Full Name (Last, First, Middle Initial)
Union Hotel & Restaurant

Mailing Address 128 East Main Street

City Everett State PA Zip Code 15537

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7244
Date of Disbursement

09 / 26 / 2010

Amount of Each Disbursement this Period

206.25

[MEMO ITEM]
Meals

C.

Full Name (Last, First, Middle Initial)
Bobby Van's Steakhouse

Mailing Address 809 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7245
Date of Disbursement

09 / 28 / 2010

Amount of Each Disbursement this Period

192.00

[MEMO ITEM]
Meals

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

<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) Chicken Out</p> <p>Mailing Address 3644 King Street</p> <p>City Alexandria State VA Zip Code 22302</p> <p>Purpose of Disbursement Meals Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7246 Date of Disbursement 09 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 25.06</p> <p>[MEMO ITEM] Catering</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Chicken Out</p> <p>Mailing Address 3644 King Street</p> <p>City Alexandria State VA Zip Code 22302</p> <p>Purpose of Disbursement Meals Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7247 Date of Disbursement 09 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>[MEMO ITEM] Catering</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Chicken Out</p> <p>Mailing Address 3644 King Street</p> <p>City Alexandria State VA Zip Code 22302</p> <p>Purpose of Disbursement Meals Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7248 Date of Disbursement 09 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 44.38</p> <p>[MEMO ITEM] Catering</p>

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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) Chicken Out</p> <p>Mailing Address 3644 King Street</p> <p>City Alexandria State VA Zip Code 22302</p> <p>Purpose of Disbursement Meals Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7249</p> <p>Date of Disbursement 09 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 11.69</p> <p>[MEMO ITEM] Catering</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Chicken Out</p> <p>Mailing Address 3644 King Street</p> <p>City Alexandria State VA Zip Code 22302</p> <p>Purpose of Disbursement Meals Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7250</p> <p>Date of Disbursement 09 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>[MEMO ITEM] Catering</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Giant Foods</p> <p>Mailing Address 3680 King Street</p> <p>City Alexandria State VA Zip Code 22302</p> <p>Purpose of Disbursement Fundraising Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7254</p> <p>Date of Disbursement 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 34.03</p> <p>[MEMO ITEM] Fundraising supplies</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
VA ABC

Mailing Address 3678 King Street

City Alexandria State VA Zip Code 22302

Purpose of Disbursement
Fundraising

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7257
Date of Disbursement

09 / 29 / 2010

Amount of Each Disbursement this Period

93.24

[MEMO ITEM]
Fundraising supplies

B.

Full Name (Last, First, Middle Initial)
Unwined

Mailing Address 3690 J King Street

City Alexandria State VA Zip Code 22303

Purpose of Disbursement
Fundraising

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7259
Date of Disbursement

09 / 29 / 2010

Amount of Each Disbursement this Period

305.94

[MEMO ITEM]
Fundraising supplies

C.

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

Mailing Address 17 Campus Blvd
Suite 100

City Newtown Square State PA Zip Code 19073

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7256
Date of Disbursement

09 / 29 / 2010

Amount of Each Disbursement this Period

68.05

[MEMO ITEM]
Meals

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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) Party Depot</p> <p>Mailing Address 3513 S. Jefferson Street</p> <p>City Falls Church State VA Zip Code 22041</p> <p>Purpose of Disbursement Fundraising</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7255</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="11.10"/></p> <p>[MEMO ITEM] Fundraising supplies</p>
<p>B. Full Name (Last, First, Middle Initial) Congressional Liquors</p> <p>Mailing Address 404 First Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Fundraising</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7258</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="23.49"/></p> <p>[MEMO ITEM] Fundraising supplies</p>
<p>C. Full Name (Last, First, Middle Initial) Hilton Harrisburg and Towers</p> <p>Mailing Address One North Second Street</p> <p>City Harrisburg State PA Zip Code 17101</p> <p>Purpose of Disbursement Lodging</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7253</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="187.39"/></p> <p>[MEMO ITEM] Lodging</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></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

<p>A. Full Name (Last, First, Middle Initial) Omni William Penn Hotel</p> <p>Mailing Address 530 William Penn Place</p> <p>City Pittsburgh State PA Zip Code 15219</p> <p>Purpose of Disbursement Lodging</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7260</p> <p>Date of Disbursement 10 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 141.36</p> <p>[MEMO ITEM] Lodging</p>
<p>B. 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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7267</p> <p>Date of Disbursement 10 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 88.00</p> <p>[MEMO ITEM] Postage</p>
<p>C. Full Name (Last, First, Middle Initial) Hesel Hardware</p> <p>Mailing Address 225 West Plank Road</p> <p>City Altoona State PA Zip Code 16602</p> <p>Purpose of Disbursement Office Expenses</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7272</p> <p>Date of Disbursement 10 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 4.94</p> <p>[MEMO ITEM] Office Supplies</p>

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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) Best Buy Mailing Address 1721 Osgood Drive City Altoona State PA Zip Code 16602 Purpose of Disbursement Office Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7273 Date of Disbursement 10 / 08 / 2010 Amount of Each Disbursement this Period 37.09 [MEMO ITEM] Wireless Router
B.	Full Name (Last, First, Middle Initial) Get Go Mailing Address 200 Sophia Drive City Altoona State PA Zip Code 16602 Purpose of Disbursement Vehicle Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7274 Date of Disbursement 10 / 09 / 2010 Amount of Each Disbursement this Period 48.53 [MEMO ITEM] Gasoline
C.	Full Name (Last, First, Middle Initial) Get Go Mailing Address 200 Sophia Drive City Altoona State PA Zip Code 16602 Purpose of Disbursement Vehicle Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7261 Date of Disbursement 10 / 10 / 2010 Amount of Each Disbursement this Period 30.00 [MEMO ITEM] Gasoline

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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 Blairmont Club Mailing Address 145 Larch Street City Hollidaysburg State PA Zip Code 16648 Purpose of Disbursement Fundraising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7269 Date of Disbursement 10 / 11 / 2010 Amount of Each Disbursement this Period 3700.08 [MEMO ITEM] Fundraiser catering
B.	Full Name (Last, First, Middle Initial) Bistro 71 Mailing Address 71 North Main Street City Chambersburg State PA Zip Code 17201 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7268 Date of Disbursement 10 / 12 / 2010 Amount of Each Disbursement this Period 277.81 [MEMO ITEM] Meeting
C.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 1270 City Newark State NJ Zip Code 07101 Purpose of Disbursement Credit Card Paid by American Express Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7369 Date of Disbursement 11 / 22 / 2010 Amount of Each Disbursement this Period 5598.73 Credit Card Paid by American Express

SUBTOTAL of Disbursements This Page (optional) ▶

5598.73

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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) Sheetz Inc</p> <p>Mailing Address 5700 Sixth Avenue</p> <p>City Altoona State PA Zip Code 16602</p> <p>Purpose of Disbursement Vehicle Expenses</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7328</p> <p>Date of Disbursement 10 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 28.70</p> <p>[MEMO ITEM] Gasoline</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Continental Elec Ticketing</p> <p>Mailing Address 600 Jefferson Street</p> <p>City Houston State TX Zip Code 77002</p> <p>Purpose of Disbursement Airplane</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7329</p> <p>Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 611.90</p> <p>[MEMO ITEM] Airline Tickets</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Stop 35</p> <p>Mailing Address 415 Norway Street</p> <p>City York State PA Zip Code 17405</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</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7347</p> <p>Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 33.03</p> <p>[MEMO ITEM] Meals</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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 <hr/> Mailing Address 5700 Sixth Avenue <hr/> City Altoona State PA Zip Code 16602 <hr/> Purpose of Disbursement Meals Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7352 Date of Disbursement 10 / 18 / 2010 <hr/> Amount of Each Disbursement this Period 5.07 <hr/> [MEMO ITEM] Meals
B.	Full Name (Last, First, Middle Initial) United Airlines <hr/> Mailing Address 1200 E Algonquin Road <hr/> City Elk Grove Village State IL Zip Code 60007 <hr/> Purpose of Disbursement Airplane Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7330 Date of Disbursement 10 / 19 / 2010 <hr/> Amount of Each Disbursement this Period 771.70 <hr/> [MEMO ITEM] Airline Tickets
C.	Full Name (Last, First, Middle Initial) United Airlines <hr/> Mailing Address 1200 E Algonquin Road <hr/> City Elk Grove Village State IL Zip Code 60007 <hr/> Purpose of Disbursement Airplane Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7331 Date of Disbursement 10 / 19 / 2010 <hr/> Amount of Each Disbursement this Period 521.70 <hr/> [MEMO ITEM] Airline Tickets

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 62 / 86

<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) Hilton Hotel - Austin</p> <p>Mailing Address 500 E Fourth Street</p> <p>City Austin State TX Zip Code 78701</p> <p>Purpose of Disbursement Lodging</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7332</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 326.60</p> <p>[MEMO ITEM] Lodging</p>
<p>B. Full Name (Last, First, Middle Initial) W French Quarter - New Orleans</p> <p>Mailing Address 316 Charles Street</p> <p>City New Orleans State LA Zip Code 70130</p> <p>Purpose of Disbursement Lodging</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7333</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 225.87</p> <p>[MEMO ITEM] Lodging</p>
<p>C. Full Name (Last, First, Middle Initial) Log Cabin Inn</p> <p>Mailing Address 7536 Milestone Road</p> <p>City Hancock State MD Zip Code 21750</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</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7334</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 56.00</p> <p>[MEMO ITEM] Campaign Meals</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

<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) Sheetz Inc</p> <p>Mailing Address 5700 Sixth Avenue</p> <p>City Altoona State PA Zip Code 16602</p> <p>Purpose of Disbursement Vehicle Expenses</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7353</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="49.21"/></p> <p>[MEMO ITEM] Gasoline</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) W French Quarter - New Orleans</p> <p>Mailing Address 316 Charles Street</p> <p>City New Orleans State LA Zip Code 70130</p> <p>Purpose of Disbursement Lodging</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7335</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="39.52"/></p> <p>[MEMO ITEM] Lodging</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Black Dog Coffee & Catering</p> <p>Mailing Address 519 Allegheny Street</p> <p>City Hollidaysburg State PA Zip Code 16648</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</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7356</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1.59"/></p> <p>[MEMO ITEM] Meals</p>

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A.

Full Name (Last, First, Middle Initial)
Black Dog Coffee & Catering

Mailing Address 519 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7357
Date of Disbursement

10 / 27 / 2010

Amount of Each Disbursement this Period

2.96

[MEMO ITEM]
Meals

B.

Full Name (Last, First, Middle Initial)
Kings Family Restaurant

Mailing Address 1180 North Center Avenue

City Somerset State PA Zip Code 15501

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7348
Date of Disbursement

10 / 27 / 2010

Amount of Each Disbursement this Period

57.83

[MEMO ITEM]
Meals

C.

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: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7336
Date of Disbursement

10 / 27 / 2010

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
Lodging

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
Black Dog Coffee & Catering

Mailing Address 519 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7358
Date of Disbursement

10 / 28 / 2010

Amount of Each Disbursement this Period

3.55

[MEMO ITEM]
Meals

B.

Full Name (Last, First, Middle Initial)
Black Dog Coffee & Catering

Mailing Address 519 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7359
Date of Disbursement

10 / 28 / 2010

Amount of Each Disbursement this Period

1.59

[MEMO ITEM]
Meals

C.

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

Mailing Address 5700 Sixth Avenue

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7354
Date of Disbursement

10 / 29 / 2010

Amount of Each Disbursement this Period

4.34

[MEMO ITEM]
Meals

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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) Sheetz Inc</p> <p>Mailing Address 5700 Sixth Avenue</p> <p>City Altoona State PA Zip Code 16602</p> <p>Purpose of Disbursement Vehicle Expenses</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7337</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="49.40"/></p> <p>[MEMO ITEM] Gasoline</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Sheetz Inc</p> <p>Mailing Address 5700 Sixth Avenue</p> <p>City Altoona State PA Zip Code 16602</p> <p>Purpose of Disbursement Vehicle Expenses</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7338</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="34.70"/></p> <p>[MEMO ITEM] Gasoline</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Sheetz Inc</p> <p>Mailing Address 5700 Sixth Avenue</p> <p>City Altoona State PA Zip Code 16602</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</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7355</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3.18"/></p> <p>[MEMO ITEM] Meals</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></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)
Black Dog Coffee & Catering

Mailing Address 519 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7360
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	0

Amount of Each Disbursement this Period

2.59

[MEMO ITEM]
Meals

B.

Full Name (Last, First, Middle Initial)
Wal Mart Supercenter

Mailing Address WalMart Plaza

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Office Expenses

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7363
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	0

Amount of Each Disbursement this Period

79.74

[MEMO ITEM]
Campaign Supplies

C.

Full Name (Last, First, Middle Initial)
Papa John's Pizza

Mailing Address 3014 Pleasant Valley Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7365
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	0

Amount of Each Disbursement this Period

27.18

[MEMO ITEM]
Meals

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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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) Sunoco</p> <p>Mailing Address 1700 Seventh Avenue</p> <p>City Altoona State PA Zip Code 16602</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</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7366</p> <p>Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 4.24</p> <p>[MEMO ITEM] Meals</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Wal Mart Supercenter</p> <p>Mailing Address WalMart Plaza</p> <p>City Altoona State PA Zip Code 16602</p> <p>Purpose of Disbursement Office Expenses</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7364</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 25.06</p> <p>[MEMO ITEM] Campaign Supplies</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Black Dog Coffee & Catering</p> <p>Mailing Address 519 Allegheny Street</p> <p>City Hollidaysburg State PA Zip Code 16648</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</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7361</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 10.60</p> <p>[MEMO ITEM] Meals</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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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) Black Dog Coffee & Catering	Transaction ID: SB17-EX7362 Date of Disbursement 11 / 02 / 2010
	Mailing Address 519 Allegheny Street	Amount of Each Disbursement this Period 76.62
	City Hollidaysburg State PA Zip Code 16648	
	Purpose of Disbursement Meals Candidate Name	002 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Meals

B.	Full Name (Last, First, Middle Initial) Fiore True Value Hardware	Transaction ID: SB17-EX7349 Date of Disbursement 11 / 02 / 2010
	Mailing Address 5514 Sixth Avenue	Amount of Each Disbursement this Period 18.12
	City Altoona State PA Zip Code 16602	
	Purpose of Disbursement Election Night Event Candidate Name	007 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Election night supplies

C.	Full Name (Last, First, Middle Initial) The Knickerbocker Tavern	Transaction ID: SB17-EX7350 Date of Disbursement 11 / 03 / 2010
	Mailing Address 3957 Sixth Avenue	Amount of Each Disbursement this Period 40.00
	City Altoona State PA Zip Code 16602	
	Purpose of Disbursement Meals Candidate Name	002 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Meals

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
Courtyard By Marriott

Mailing Address 2 Convention Center Blvd

City Altoona State PA Zip Code 16602

Purpose of Disbursement
Lodging

Candidate Name

002
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX7339
Date of Disbursement

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

Amount of Each Disbursement this Period

1445.60

[MEMO ITEM]

Lodging Election night

B.

Full Name (Last, First, Middle Initial)
Tom and Joes Restaurant

Mailing Address 1201 13th Avenue

City Altoona State PA Zip Code 16601

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX7340
Date of Disbursement

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

Amount of Each Disbursement this Period

122.40

[MEMO ITEM]

Campaign Staff Meal

C.

Full Name (Last, First, Middle Initial)
We The Pizza

Mailing Address 305 Pennsylvania Avenue 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: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX7341
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	1	0

Amount of Each Disbursement this Period

57.72

[MEMO ITEM]

Meals

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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) Red Lobster</p> <p>Mailing Address 3330 Pleasant Valley Blvd</p> <p>City Altoona State PA Zip Code 16602</p> <p>Purpose of Disbursement Meals Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7342 Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 158.00</p> <p>[MEMO ITEM] Meals</p>
<p>B. Full Name (Last, First, Middle Initial) Extra Virgin - Modern Italian Cuisine</p> <p>Mailing Address 4053 South 28th Street</p> <p>City Arlington State VA Zip Code 22206</p> <p>Purpose of Disbursement Meals Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7343 Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 42.00</p> <p>[MEMO ITEM] Meals</p>
<p>C. Full Name (Last, First, Middle Initial) Pour House</p> <p>Mailing Address 319 Pennsylvania Avenue SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Meals Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7344 Date of Disbursement 11 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 35.72</p> <p>[MEMO ITEM] Meals</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

<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)
Carlyle Grand Cafe

Mailing Address 4000 Campbell Avenue

City Arlington State VA Zip Code 22206

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7345
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	1	0

Amount of Each Disbursement this Period

162.00

[MEMO ITEM]
Meals

B.

Full Name (Last, First, Middle Initial)
Charlie Chiang's Restaurant

Mailing Address 4060 Campbell Avenue

City Arlington State VA Zip Code 22206

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7346
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	1		2	0	1	0

Amount of Each Disbursement this Period

225.00

[MEMO ITEM]
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: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX7351
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	1		2	0	1	0

Amount of Each Disbursement this Period

137.70

[MEMO ITEM]
Meals

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
US Postal Service

Mailing Address 525 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General Other (specify) ▼

State: District:

Transaction ID: SB17-EX7305
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	1	0

Amount of Each Disbursement this Period

88.00

[MEMO ITEM]
Stamps

B.

Full Name (Last, First, Middle Initial)
The Georgian Inn Of Somerset

Mailing Address 800 Georgian Place Drive

City Somerset State PA Zip Code 15501

Purpose of Disbursement
Meals

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General Other (specify) ▼

State: District:

Transaction ID: SB17-EX7306
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	0

Amount of Each Disbursement this Period

800.00

[MEMO ITEM]
Campaign dinner

C.

Full Name (Last, First, Middle Initial)
Steve Clark Advertising-Marketing

Mailing Address Public Relations
3809 Kettle Road

City Altoona State PA Zip Code 16601

Purpose of Disbursement
Radio spots

Candidate Name

004
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General Other (specify) ▼

State: District:

Transaction ID: SB17-EX7227
Date of Disbursement

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

Amount of Each Disbursement this Period

10142.60

Radio spots

SUBTOTAL of Disbursements This Page (optional)

10142.60

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) State Street Strategies	Transaction ID: SB17-EX7229 Date of Disbursement
	Mailing Address 401 N. Second Street	<input type="text" value="10"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Harrisburg State PA Zip Code 17101	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Mailers	<input type="text" value="30366.04"/>
	Candidate Name	006 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Campaign Mailers

B.	Full Name (Last, First, Middle Initial) State Street Strategies	Transaction ID: SB17-EX7278 Date of Disbursement
	Mailing Address 401 N. Second Street	<input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Harrisburg State PA Zip Code 17101	Amount of Each Disbursement this Period
	Purpose of Disbursement Shuster Stop Mailers	<input type="text" value="30246.79"/>
	Candidate Name	006 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Shuster Stop Mailers

C.	Full Name (Last, First, Middle Initial) State Street Strategies	Transaction ID: SB17-EX7279 Date of Disbursement
	Mailing Address 401 N. Second Street	<input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Harrisburg State PA Zip Code 17101	Amount of Each Disbursement this Period
	Purpose of Disbursement Television Ads	<input type="text" value="29745.00"/>
	Candidate Name	004 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Television Ads

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="90357.83"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 77 / 86

<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) Sean Joyce</p> <p>Mailing Address 3103 N. Pershing Drive Rear Cottage</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Mileage reimbursement</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7220</p> <p>Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 96.50</p> <p>001 Category/ Type</p> <p>Mileage reimbursement</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Sean Joyce</p> <p>Mailing Address 3103 N. Pershing Drive Rear Cottage</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Payroll 10/01/2010 to 10/31/2010</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7281</p> <p>Date of Disbursement 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p>001 Category/ Type</p> <p>Payroll 10/01/2010 to 10/31/2010</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Sean Joyce</p> <p>Mailing Address 3103 N. Pershing Drive Rear Cottage</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Payroll 11/01/2010 to 11/15/2010</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7294</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>001 Category/ Type</p> <p>Payroll 11/01/2010 to 11/15/2010</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6096.50

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

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

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

FOR LINE NUMBER: (check only one)

<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) Sean Joyce</p> <p>Mailing Address 3103 N. Pershing Drive Rear Cottage</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Campaign 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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7295 Date of Disbursement: 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 908.95</p> <p>001 Category/Type</p> <p>Campaign Mileage reimbursement</p>
<p>B. Full Name (Last, First, Middle Initial) Sean Joyce</p> <p>Mailing Address 3103 N. Pershing Drive Rear Cottage</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Bonus payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7327 Date of Disbursement: 11 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 2275.28</p> <p>001 Category/Type</p> <p>Bonus payroll</p>
<p>C. Full Name (Last, First, Middle Initial) Vandor Strategies LLC</p> <p>Mailing Address 1325 Pennsylvania Avenue NW Suite 700</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Monthly retainer for political consulting Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17-EX7290 Date of Disbursement: 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>003 Category/Type</p> <p>Monthly retainer for political consulting</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6184.23

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

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

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

FOR LINE NUMBER: (check only one)

<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)
Melissa Cox Bosse

Mailing Address 576 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Mileage and Meals reimbursement
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX7317
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	1		2	0	1	0

Amount of Each Disbursement this Period

921.52

Mileage and Meals reimburse-
ment

B.

Full Name (Last, First, Middle Initial)
Maribeth Collins Maldovan

Mailing Address 2525 10th Street N. #501

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Mileage and Meals Reimbursement
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17-EX7314
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	1		2	0	1	0

Amount of Each Disbursement this Period

672.37

Mileage and Meals Reimbur-
sement

SUBTOTAL of Disbursements This Page (optional) ►

1593.89

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

160042.70

**SCHEDULE 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) Blair Co Republican Committee Mailing Address c/o Beth Britz 1009 Newry Lane City Duncansville State PA Zip Code 16635 Purpose of Disbursement Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21-EX7284 Date of Disbursement 11 / 01 / 2010 Amount of Each Disbursement this Period 500.00 Donation	012 Category/ Type
B.	Full Name (Last, First, Middle Initial) NRCC Mailing Address 320 First Street SE ATTN: JEFF LOVENG City Washington State DC Zip Code 20003 Purpose of Disbursement Party Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21-EX7223 Date of Disbursement 10 / 19 / 2010 Amount of Each Disbursement this Period 50000.00 Party Donation	012 Category/ Type
C.	Full Name (Last, First, Middle Initial) Huntingdon Co. Republican Comm Mailing Address c/o Anne Layng 2015 Ellis Avenue City Huntingdon State PA Zip Code 16652 Purpose of Disbursement Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21-EX7319 Date of Disbursement 11 / 11 / 2010 Amount of Each Disbursement this Period 250.00 Donation	012 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

50750.00

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 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

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) Blair Co Chamber Of Commerce Mailing Address 3900 Industrial Park Drive Suite 12 City Altoona State PA Zip Code 16602 Purpose of Disbursement Recognition Dinner ticket Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-EX7311 Date of Disbursement 11 / 11 / 2010 Amount of Each Disbursement this Period 25.00 Recognition Dinner ticket
B.	Full Name (Last, First, Middle Initial) Fulton County Republican Committee Mailing Address Sam Metz 103 West Patterson Street City Mc Connellsburg State PA Zip Code 17233 Purpose of Disbursement Dinner Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-EX7216 Date of Disbursement 10 / 18 / 2010 Amount of Each Disbursement this Period 200.00 Dinner Donation
C.	Full Name (Last, First, Middle Initial) Friends of the Courthouse Mailing Address PO Box 1155 City Carlisle State PA Zip Code 17013 Purpose of Disbursement Golf sponsorship Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-EX7222 Date of Disbursement 10 / 18 / 2010 Amount of Each Disbursement this Period 125.00 Golf sponsorship

SUBTOTAL of Disbursements This Page (optional) ▶

350.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 82 / 86

<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) Blair Co Chamber Of Commerce Mailing Address 3900 Industrial Park Drive Suite 12 City Altoona State PA Zip Code 16602 Purpose of Disbursement Donations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX7304 Date of Disbursement 10 / 18 / 2010 Amount of Each Disbursement this Period 75.00 [MEMO ITEM] 3 Hall of Fame Dinner tickets
B.	Full Name (Last, First, Middle Initial) Franklin County Historical Society Mailing Address ATTN: Heather Hershey 175 East King Street City Chambersburg State PA Zip Code 17201 Purpose of Disbursement Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-EX7225 Date of Disbursement 10 / 19 / 2010 Amount of Each Disbursement this Period 50.00 Donation
C.	Full Name (Last, First, Middle Initial) Rock After-School Program Mailing Address 2nd Avenue United Methodist Churc 130 Second Avenue City Altoona State PA Zip Code 16602 Purpose of Disbursement Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-EX7320 Date of Disbursement 11 / 11 / 2010 Amount of Each Disbursement this Period 25.00 Donation

SUBTOTAL of Disbursements This Page (optional) ▶	75.00
TOTAL This Period (last page this line number only) ▶	51175.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 83 / 86

<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)
Mr. Joe Charles Ballenger

Transaction ID: SB20a-CR29
Date of Disbursement

Mailing Address 30 Laguna Madre Drive

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

City Laguna Vista State TX Zip Code 78578

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
Contribution Ref to Individual

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Refund excess contribution

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

100.00

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

100.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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 Verizon			Nature of Debt (Purpose): Invoice: Telephone Administrative/Salary
Mailing Address PO Box 15026			
City Albany	State NY	ZIP Code 12212	

Outstanding Balance Beginning This Period <input type="text" value="207.62"/>		Transaction ID: SD10-INV7060	
Amount Incurred This Period <input type="text" value=".00"/>	Payment This Period <input type="text" value="207.62"/>	Outstanding Balance at Close of This Period <input type="text" value=".00"/>	

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 Pittsburgh	State PA	ZIP Code 15250	

Outstanding Balance Beginning This Period <input type="text" value="63.05"/>		Transaction ID: SD10-INV7061	
Amount Incurred This Period <input type="text" value=".00"/>	Payment This Period <input type="text" value="63.05"/>	Outstanding Balance at Close of This Period <input type="text" value=".00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon			Nature of Debt (Purpose): Invoice: Telephone Administrative/Salary
Mailing Address PO Box 15026			
City Albany	State NY	ZIP Code 12212	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>		Transaction ID: SD10-INV7215	
Amount Incurred This Period <input type="text" value="216.16"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="216.16"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="216.16"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 85 / 86
	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 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 <input type="text" value=".00"/>	Transaction ID: SD10-INV7214	
Amount Incurred This Period <input type="text" value="59.80"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="59.80"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor McIntyre's Candies	Nature of Debt (Purpose): Invoice: Gift Baskets Administrative/Sal	
Mailing Address 1419 Eleventh Avenue		
City State ZIP Code Altoona PA 16601		

Outstanding Balance Beginning This Period <input type="text" value=".00"/>	Transaction ID: SD10-INV7220	
Amount Incurred This Period <input type="text" value="135.00"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="135.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor StelTek Graphics Inc	Nature of Debt (Purpose): Invoice: Print Ads - Calendar Advertisin	
Mailing Address One Corporate Drive Suite 105		
City State ZIP Code Bedford PA 15522		

Outstanding Balance Beginning This Period <input type="text" value=".00"/>	Transaction ID: SD10-INV7218	
Amount Incurred This Period <input type="text" value="846.33"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="846.33"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1041.13"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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 O.K. Stuckey And Son			Nature of Debt (Purpose): Invoice: Letterhead/Envelopes Administra
Mailing Address 1800 Eighth Avenue			
City Altoona	State PA	ZIP Code 16602	

Outstanding Balance Beginning This Period <input type="text" value="00"/>		Transaction ID: SD10-INV7217	
Amount Incurred This Period <input type="text" value="444.27"/>	Payment This Period <input type="text" value="00"/>	Outstanding Balance at Close of This Period <input type="text" value="444.27"/>	

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			
City Carol Stream	State IL	ZIP Code 60197	

Outstanding Balance Beginning This Period <input type="text" value="00"/>		Transaction ID: SD10-INV7212	
Amount Incurred This Period <input type="text" value="135.98"/>	Payment This Period <input type="text" value="00"/>	Outstanding Balance at Close of This Period <input type="text" value="135.98"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="580.25"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="1837.54"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="1837.54"/>