

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

12FE4M5

BILL SHUSTER FOR CONGRESS

ADDRESS (number and street)

PO BOX 27

Check if different than previously reported. (ACC)

HOLLIDAYSBURGH

PA

16648

2. FEC IDENTIFICATION NUMBER

C C00364935

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

X NEW (N)

OR

AMENDED (A)

PA

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)

Termination Report (TER)

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

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

Election on 11 / 06 / 2012 in the State of PA

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

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

Election on / / in the State of

5. Covering Period

10 / 01 / 2012 through 10 / 17 / 2012

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

Type or Print Name of Treasurer PAUL A KILGORE

Signature of Treasurer PAULA KILGORE

[Electronically Filed]

Date

10 / 25 / 2012

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

Table with 8 columns and 1 row for Office Use Only.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
BILL SHUSTER FOR CONGRESS

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

	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))....	68900.00	1426703.41
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	68900.00	1426703.41
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	36096.33	750781.24
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1318.81
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	36096.33	749462.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	449052.59	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

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-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	37700.00	584698.82
(ii) Unitemized.....	200.00	21659.81
(iii) TOTAL of contributions from individuals ▶	37900.00	606358.63
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	31000.00	820344.78
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	68900.00	1426703.41
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	10542.56
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	1318.81
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	68900.00	1438564.78

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	36096.33	750781.24
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	150000.00	404914.50
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	186096.33	1155695.74

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	566248.92
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	68900.00
25. SUBTOTAL (add Line 23 and Line 24).....	635148.92
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	186096.33
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	449052.59

**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 5 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
ILENE BERGER

Mailing Address 206 CARRIAGE LN.

City State Zip Code
NEWTOWN SQUARE PA 19073

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2012

Transaction ID : SA11Al.101897

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MARC J BERNSTEIN

Mailing Address 1500 BARDSEY DR.

City State Zip Code
AMBLER PA 19002

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

Name of Employer Occupation
CREATIVE FINANCIAL GROUP FINANCIAL MANAGER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2012

Transaction ID : SA11Al.101894

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JAMES G BOONE

Mailing Address 169 BOONE LANE

City State Zip Code
ALTOONA PA 16601

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

Name of Employer Occupation
LYTLES TRANSFER COO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : SA11Al.101909

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

**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 6 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KEN BRAUN

Mailing Address 815 HARRITON RD.

City State Zip Code
BRYN MAWR PA 19010

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 16 / 2012

Transaction ID : SA11AI.101895

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
THOMAS A CARAMANICO

Mailing Address 2001 MARKET ST
TENTH FLOOR

City State Zip Code
PHILADELPHIA PA 19103

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

Name of Employer Occupation
MCCORMICK TAYLOR, INC PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3900.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11AI.101953

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
PAUL A COONEY

Mailing Address PO BOX 246

City State Zip Code
CRESSON PA 16630

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

Name of Employer Occupation
COONEY BROS. COAL CO MANAGING PARTNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1050.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11AI.101912

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NEIL A COOPER

Mailing Address 2129 BASSWOOD DR.

City LAFAYETTE HILL State PA Zip Code 19444

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

Name of Employer COOPER LAW GROUP Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2012

Transaction ID : SA11Al.101893

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ROBERT A CURRY

Mailing Address PO BOX 92829

City LONG BEACH State CA Zip Code 90807

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

Name of Employer CALIFORNIA CARTAGE CO. Occupation PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : SA11Al.101922

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
BRUNO DEGOL JR.

Mailing Address 351 DEGOL DRIVE

City TYRONE State PA Zip Code 16686

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

Name of Employer DEGOL ORGANIZATION Occupation EXECUTIVE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : SA11Al.101910

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

**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 8 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
POLLY DEGOL

Mailing Address 351 DEGOL DRIVE

City TYRONE State PA Zip Code 16686

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : SA11Al.101911

Amount of Each Receipt this Period
 1500.00

1750.00

B. Full Name (Last, First, Middle Initial)
DONALD DEVORRIS

Mailing Address 304 WARD AVE E

City ALTOONA State PA Zip Code 16602

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

Name of Employer BLAIR ELECTRIC SERVICES Occupation PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : SA11Al.101913

Amount of Each Receipt this Period
 1500.00

3000.00

C. Full Name (Last, First, Middle Initial)
BRUCE R ERB

Mailing Address 109 AJAY COURT

City HOLLIDAYSBURG State PA Zip Code 16648

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

Name of Employer FIRST NATIONAL TRUST COMPANY Occupation SENIOR VICE PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : SA11Al.101908

Amount of Each Receipt this Period
 500.00

900.00

SUBTOTAL of Receipts This Page (optional).....

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

3500.00

**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 9 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEVEN H ERLBAUM

Mailing Address 922 MOUNT PLEASANT RD.

City State Zip Code
BRYN MAWR PA 19010

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

Name of Employer Occupation
REGENCY GROUP REAL ESTATE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2012

Transaction ID : SA11A1.101891

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ESTHER ESPINOZA-EK

Mailing Address 924 DODSON AVE.

City State Zip Code
SAN PEDRO CA 90732

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

Name of Employer Occupation
SELF EMPLOYED CONSULTANT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11A1.101921

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
MARC L FELGOISE

Mailing Address 7139 SHEAFF LN.

City State Zip Code
FORT WASHINGTON PA 19034

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

Name of Employer Occupation
TEB ASSOCIATES VICE PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2012

Transaction ID : SA11A1.101898

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DR. ALAN J KIVITZ

Mailing Address 18 WOODLAWN TER

City State Zip Code
HOLLIDAYSBURG PA 16648

FEC ID number of contributing federal political committee.

Name of Employer Occupation
ALTOONA ARTHRITIS & OSTEOPOROSIS CE PHYSICIAN

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11Al.101914

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
DALE N KRAPP

Mailing Address 220 HUNTING HILL LN

City State Zip Code
WEST CHESTER PA 19380

FEC ID number of contributing federal political committee.

Name of Employer Occupation
KRAPP COACHES PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11Al.101944

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
WILLIAM C KREITZ

Mailing Address 1164 WHEATON DR.

City State Zip Code
BETHLEHEM PA 18017

FEC ID number of contributing federal political committee.

Name of Employer Occupation
HAMPSON MOWRER KREITZ AGENCY INSURANCE SALES

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11Al.101952

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

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 11 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DANIEL B MARKIND

Mailing Address 1500 WALNUT ST., STE. 1100

City PHILADELPHIA State PA Zip Code 19102

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

Name of Employer WEIR & PARTNERS, LLP Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2012

Transaction ID : SA11AI.101896

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
BRIAN C. MCNEW

Mailing Address 1658 BLACK GAP ROAD

City FAYETTEVILLE State PA Zip Code 17222

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

Name of Employer EARTHNET ENERGY Occupation OWNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : SA11AI.101864

Amount of Each Receipt this Period
3000.00

AS PREVIOUSLY REPORTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
BRIAN C. MCNEW

Mailing Address 1658 BLACK GAP ROAD

City FAYETTEVILLE State PA Zip Code 17222

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

Name of Employer EARTHNET ENERGY Occupation OWNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2012

Transaction ID : SA11AI.101883

Amount of Each Receipt this Period
-500.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

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

500.00

**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 12 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KIMBERLY MCNEW

Mailing Address 1658 BLACK GAP ROAD

City State Zip Code
FAYETTEVILLE PA 17222

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

Name of Employer Occupation
CHAMBERSBURG PREP SCHOOL TEACHER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2012

Transaction ID : SA11AI.101884

Amount of Each Receipt this Period
500.00

REATTRIBUTED FROM MCNEW, BRIAN

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JOHN H OVER

Mailing Address 511 WALNUT ST

City State Zip Code
ROARING SPRING PA 16673

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

Name of Employer Occupation
THE EADS GROUP CONSULTING ENGINEER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11AI.101904

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
LARRY RASMUSSEN

Mailing Address 21070 CENTRE POINTE PKWY.

City State Zip Code
SANTA CLARITA CA 91350

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11AI.101919

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional).....

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PEGGY J RASMUSSEN

Mailing Address 21070 CENTRE POINTE PKWY.

City State Zip Code
SANTA CLARITA CA 91350

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 17 2012

Transaction ID : SA11AI.101920

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
AMY B SELTZER

Mailing Address 306 WARD AVE E

City State Zip Code
ALTOONA PA 16602

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

Name of Employer Occupation
SELTZER FINANCIAL STRATEGIES FINANCIAL PLANNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 17 2012

Transaction ID : SA11AI.101907

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
PATRICIA SEROTKIN

Mailing Address 1072 CENTER ST N

City State Zip Code
EBENSBURG PA 15931

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

Name of Employer Occupation
ST FRANCIS UNIVERSITY VP - STRATEGIC INITIATIVES

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 17 2012

Transaction ID : SA11AI.101905

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....

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

5000.00

**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 14 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) ANDREW J SHECHTEL		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 33 WITHERSPOON ST., 3RD FLOOR		Transaction ID : SA11Al.101890
City PRINCETON	State NJ	Zip Code 08542
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer SELF EMPLOYED	Occupation INVESTOR	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) ROBERT SHOEMAKER		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 925 ROSCOMMON RD.		Transaction ID : SA11Al.101892
City BRYN MAWR	State PA	Zip Code 19010
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer BRANDYWINE CONSTRUCTION	Occupation VICE PRESIDENT	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) BRADFORD C SHUSMAN		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 1500 LOCUST ST., APT. 2817		Transaction ID : SA11Al.101901
City PHILADELPHIA	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer GOLDMAN SACHS	Occupation INVESTMENT MANAGEMENT	
Receipt For: 2012 <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).....	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: (check only one)	PAGE 15 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KAREN H SMITH

Mailing Address 3513 FORT ROBERDEAU AVE

City State Zip Code
ALTOONA PA 16602

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

Name of Employer Occupation
RELIANCE BANK BANKER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
950.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11Al.101954

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
BARRY F SMITH

Mailing Address 153 SMITH TRANSPORT ROAD

City State Zip Code
ROARING SPRING PA 16673

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

Name of Employer Occupation
SMITH TRANSPORT INC. PRESIDENT & OWNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11Al.101906

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
ANDREA TANENBAUM

Mailing Address 229 GLENMOOR RD.

City State Zip Code
GLADWYNE PA 19035

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 16 / 2012

Transaction ID : SA11Al.101899

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

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

3500.00

**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 16 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEVEN TANENBAUM

Mailing Address 229 GLENMOOR RD.

City: GLADWYNE State: PA Zip Code: 19035

FEC ID number of contributing federal political committee: C

Name of Employer: A WISH COME TRUE Occupation: OWNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 10 / 16 / 2012

Transaction ID : SA11Al.101900

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
JAMES W VAN BUREN

Mailing Address 155 STRATFORD CT

City: HOLLIDAYSBURG State: PA Zip Code: 16648

FEC ID number of contributing federal political committee: C

Name of Employer: NEW ENTERPRISE STONE AND LIME Occupation: CONTRACTOR/COO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 5000.00

Date of Receipt: 10 / 17 / 2012

Transaction ID : SA11Al.101903

Amount of Each Receipt this Period: 1500.00

C. Full Name (Last, First, Middle Initial)
WILLIAM T WARD

Mailing Address 3521 SYLVAN HEIGHTS DR

City: HOLLIDAYSBURG State: PA Zip Code: 16648

FEC ID number of contributing federal political committee: C

Name of Employer: WARD TRANSPORT & LOGISTICS Occupation: PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 3150.00

Date of Receipt: 10 / 17 / 2012

Transaction ID : SA11Al.101902

Amount of Each Receipt this Period: 2500.00

SUBTOTAL of Receipts This Page (optional).....

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

4500.00

**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 17 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BENJAMIN WILLNER

Mailing Address 155 AIRDALE RD.

City BRYN MAWR State PA Zip Code 19010

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

Name of Employer WILLNER REALITY Occupation REAL ESTATE DEVELOPMENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2012

Transaction ID : SA11Al.101885

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
SHERRIE WILLNER

Mailing Address 1301 PROSPECT HILL RD.

City VILLANOVA State PA Zip Code 19085

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2012

Transaction ID : SA11Al.101887

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
PAUL WOERNER

Mailing Address 2001 HAMILTON ST., APT. 317

City PHILADELPHIA State PA Zip Code 19130

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2012

Transaction ID : SA11Al.101889

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

**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 18 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EZRA WOHLGELERTNER

Mailing Address 1845 WALNUT ST., 25TH FLOOR

City PHILADELPHIA State PA Zip Code 19103

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

Name of Employer FELDMAN SHEPHERD ET AL Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2012

Transaction ID : SA11Al.101888

Amount of Each Receipt this Period
500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

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

500.00

37700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 36
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. AIR PRODUCTS POLITICAL ALLIANCE PAC

Full Name (Last, First, Middle Initial)
AIR PRODUCTS POLITICAL ALLIANCE PAC

Mailing Address PO BOX 441

City State Zip Code
TREXLERTOWN PA 18087

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : SA11C.101951

Amount of Each Receipt this Period
2500.00

B. BUILD PAC

Full Name (Last, First, Middle Initial)
BUILD PAC

Mailing Address 1201 15TH ST NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C00000901**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : SA11C.101949

Amount of Each Receipt this Period
4000.00

C. CLEAR CHANNEL COMMUNICATIONS INC. PAC

Full Name (Last, First, Middle Initial)
CLEAR CHANNEL COMMUNICATIONS INC. PAC

Mailing Address 200 E. BASSE ROAD

City State Zip Code
SAN ANTONIO TX 78209

FEC ID number of contributing federal political committee. **C C00279216**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : SA11C.101917

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

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

7500.00

**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 OF 36
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CONSOL ENERGY INC

Mailing Address 1000 CONSOL ENERGY DR

City State Zip Code
CANONSBURG PA 15317

FEC ID number of contributing federal political committee. **C C00279331**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11C.101923

Amount of Each Receipt this Period
2000.00

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

Mailing Address 101 CONSTITUTION AVENUE, NW
SUITE 400 EAST

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00141218**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11C.101926

Amount of Each Receipt this Period
1500.00

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

Mailing Address 345 PARK AVENUE

City State Zip Code
NEW YORK NY 10154

FEC ID number of contributing federal political committee. **C C00451153**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11C.101925

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....

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

8500.00

**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 OF 36
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HARDWOOD FEDERATION PAC

Mailing Address 1111 19TH ST NW
SUITE 800

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00396671**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : SA11C.101950

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JE DUNN CONSTRUCTION GROUP INC PAC

Mailing Address 1010 HOLMES

City KANSAS CITY State MO Zip Code 64106

FEC ID number of contributing federal political committee. **C C00453688**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : SA11C.101947

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MARKWEST ENERGY PARTNERS LP PAC

Mailing Address 1515 ARAPAHOE STREET
TOWER 1 SUITE 1600

City DENVER State CO Zip Code 80202

FEC ID number of contributing federal political committee. **C C00489468**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : SA11C.101918

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....

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

4500.00

**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 OF 36
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NETJETS ASSOCIATION OF SHARED AIRCRAFT PILOTS PAC; NJASAP PAC

Mailing Address 630 MORRISON ROAD
SUITE 110

City State Zip Code
GAHANNA OH 43230

FEC ID number of contributing federal political committee. **C C00488262**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11C.101945

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
PSC H2O

Mailing Address 762 LANCASTER AVE W

City State Zip Code
BRYN MAWR PA 19010

FEC ID number of contributing federal political committee. **C C00340455**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11C.101916

Amount of Each Receipt this Period
1000.00

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

Mailing Address 430 MICHIGAN AVE N

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11C.101948

Amount of Each Receipt this Period
4000.00

SUBTOTAL of Receipts This Page (optional).....

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

6000.00

**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 23 OF 36
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. SEAFARERS POLITICAL ACTIVITY DONATION

Full Name (Last, First, Middle Initial)
Mailing Address 5201 AUTH WAY

City State Zip Code
CAMP SPRINGS MD 20746

FEC ID number of contributing federal political committee. **C C00004325**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11C.101924

Amount of Each Receipt this Period
1000.00

B. SHEETZPAC

Full Name (Last, First, Middle Initial)
Mailing Address 5700 6TH AVE

City State Zip Code
ALTOONA PA 16602

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11C.101915

Amount of Each Receipt this Period
1000.00

C. UNITE HERE TIP CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 275 7TH AVENUE 11TH FLOOR

City State Zip Code
NEW YORK NY 10001

FEC ID number of contributing federal political committee. **C C00004861**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 09 / 2012

Transaction ID : SA11C.101873

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....

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

4500.00

31000.00

**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 24 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012	
Mailing Address PO BOX 1270			Amount of Each Disbursement this Period 17538.65	
City NEWARK	State NJ	Zip Code 07101	Transaction ID : SB17.101775	
Purpose of Disbursement SEE BELOW		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. BEST BUY			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012	
Mailing Address 1721 OSGOOD DRIVE			Amount of Each Disbursement this Period 95.38	
City ALTOONA	State PA	Zip Code 16602	Transaction ID : SB17.101995	
Purpose of Disbursement		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM] OFFICE EQUIPMENT	
State: District:				

Full Name (Last, First, Middle Initial) C. DEL FRISCO GRILLE			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012	
Mailing Address 50 ROCKEFELLER PLAZA			Amount of Each Disbursement this Period 350.00	
City NEW YORK	State NY	Zip Code 10020	Transaction ID : SB17.101996	
Purpose of Disbursement		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM] EVENT CATERING	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	17538.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 36			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US HOUSE OF REPRESENTATIVES		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address HOUSE GIFT SHOP B-217 LONGWORTH BLDG		Amount of Each Disbursement this Period 172.80
City WASHINGTON	State DC	
Zip Code 20515	Purpose of Disbursement	Transaction ID : SB17.101997
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] GIFTS
State: District:		

Full Name (Last, First, Middle Initial) B. BISTRO 71		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 71 NORTH MAIN STREET		Amount of Each Disbursement this Period 131.00
City CHAMBERSBURG	State PA	
Zip Code 17201	Purpose of Disbursement	Transaction ID : SB17.101998
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEETING EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) C. FOUR POINTS HOTEL		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 1123 LINCOLN WAY EAST		Amount of Each Disbursement this Period 107.63
City CHAMBERSBURG	State PA	
Zip Code 17201	Purpose of Disbursement	Transaction ID : SB17.101999
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] LODGING
State: District:		

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 26 OF 36			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DELTA AIR LINES		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 1030 DELTA BOULEVARD		Amount of Each Disbursement this Period 759.80
City ATLANTA State GA Zip Code 30320	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.102000 [MEMO ITEM] AIRFARE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. CHARLEY'S STEAKHOUSE		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 4444 WEST CYPRESS STREET		Amount of Each Disbursement this Period 630.00
City TAMPA State FL Zip Code 33607	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.102001 [MEMO ITEM] EVENT CATERING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. FAIRMONT		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 510 MARKET STREET		Amount of Each Disbursement this Period 42.00
City PITTSBURGH State PA Zip Code 15222	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.102005 [MEMO ITEM] MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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 27 OF 36			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address PO BOX 619612 MD 2400		Amount of Each Disbursement this Period 174.00
City DALLAS	State TX	
Zip Code 75261	Purpose of Disbursement 001	Transaction ID : SB17.102006
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] AIRFARE
State: District:		

Full Name (Last, First, Middle Initial) B. LUXE CITY CENTER HOTEL		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 1020 S. FIGUEROA ST.		Amount of Each Disbursement this Period 411.93
City LOS ANGELES	State CA	
Zip Code 90015	Purpose of Disbursement 001	Transaction ID : SB17.102007
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] LODGING
State: District:		

Full Name (Last, First, Middle Initial) C. NEIL'S PASTA AND SEAFOOD		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 383 WEST 5TH STREET		Amount of Each Disbursement this Period 25.00
City SAN PEDRO	State CA	
Zip Code 90731	Purpose of Disbursement 001	Transaction ID : SB17.102008
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEETING EXPENSE
State: District:		

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 28 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HILTON - FORT LAUDERDALE			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012	
Mailing Address 1870 GRIFFIN ROAD			Amount of Each Disbursement this Period 86.24	
City DANIA	State FL	Zip Code 33004	Transaction ID : SB17.102009	
Purpose of Disbursement		Category/Type 001		
Candidate Name		[MEMO ITEM] LODGING		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. US AIRWAYS			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012	
Mailing Address 5620 UNIVERSITY PKWY			Amount of Each Disbursement this Period 1354.20	
City WINSTON SALEM	State NC	Zip Code 27105	Transaction ID : SB17.102010	
Purpose of Disbursement		Category/Type 001		
Candidate Name		[MEMO ITEM] AIRFARE		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. MARE CULINARY LOUNGE			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012	
Mailing Address 696 S. COAST HWY			Amount of Each Disbursement this Period 140.10	
City LAGUNA BEACH	State CA	Zip Code 92651	Transaction ID : SB17.102011	
Purpose of Disbursement		Category/Type 001		
Candidate Name		[MEMO ITEM] MEETING EXPENSE		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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 29 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HOLIDAY INN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 1097 WAYNE AVENUE		Amount of Each Disbursement this Period 749.54
City CHAMBERSBURG	State PA	
Zip Code 17201	Purpose of Disbursement 001	Transaction ID : SB17.102012
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] LODGING
State: District:		

Full Name (Last, First, Middle Initial) B. SOUTHWEST AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 2702 LOVE FIELD DR.		Amount of Each Disbursement this Period 355.80
City DALLAS	State TX	
Zip Code 75235	Purpose of Disbursement 001	Transaction ID : SB17.102013
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] AIRFARE
State: District:		

Full Name (Last, First, Middle Initial) C. SHEETZ INC		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 5700 SIXTH AVENUE		Amount of Each Disbursement this Period 25.00
City ALTOONA	State PA	
Zip Code 16602	Purpose of Disbursement 001	Transaction ID : SB17.102014
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] FUEL
State: District:		

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 30 OF 36			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 800 MARKET STREET 7TH FLOOR		Amount of Each Disbursement this Period 1464.00
City SAN FRANCISCO	State CA	
Zip Code 94115	Purpose of Disbursement 001	Transaction ID : SB17.102016
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] TRAVEL EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) B. AJB TAXI MANAGEMENT INC		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 662 TENTH AVENUE		Amount of Each Disbursement this Period 298.91
City NEW YORK	State NY	
Zip Code 10036	Purpose of Disbursement 001	Transaction ID : SB17.102017
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] CAB FARES
State: District:		

Full Name (Last, First, Middle Initial) C. BERN'S STEAKHOUSE		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 1208 SOUTH HOWARD AVE.		Amount of Each Disbursement this Period 290.27
City TAMPA	State FL	
Zip Code 33606	Purpose of Disbursement 001	Transaction ID : SB17.102018
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] EVENT CATERING
State: District:		

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 31 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SALT ROCK GRILL		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 19325 GULF BLVD		Amount of Each Disbursement this Period 310.02
City INDIAN SHORES State FL Zip Code 33785	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.102019 [MEMO ITEM] EVENT CATERING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. POSTCARD INN ON THE BEACH		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 6300 GULF BLVD.		Amount of Each Disbursement this Period 20.07
City ST. PETE BEACH State FL Zip Code 33706	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.102021 [MEMO ITEM] MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. BUDGET.COM CORPORATE OFFICE		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 300 CENTRE POINTE DRIVE		Amount of Each Disbursement this Period 242.74
City VIRGINIA BEACH State VA Zip Code 23462	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.102023 [MEMO ITEM] CAR RENTAL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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 32 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DOUBLETREE HOTEL		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 11915 EL CAMINO REAL		Amount of Each Disbursement this Period 5331.02
City SAN DIEGO	State CA	
Zip Code 92130	Purpose of Disbursement 001	Transaction ID : SB17.102024
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] LODGING
State: District:		

Full Name (Last, First, Middle Initial) B. CENPENN REALTY LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 513 ALLEGHENY STREET		Amount of Each Disbursement this Period 500.00
City HOLLIDAYSBURG	State PA	
Zip Code 16648	Purpose of Disbursement RENT EXPENSE 001	Transaction ID : SB17.101773
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ELIZABETH CONATSER		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 1525 KEARNEY STREET NE		Amount of Each Disbursement this Period 4000.00
City WASHINGTON	State DC	
Zip Code 20017	Purpose of Disbursement FUNDRAISING CONSULTING 001	Transaction ID : SB17.101768
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4500.00
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 33 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELECTEKUSA		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 2287.68 Transaction ID : SB17.101776
City CHAGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement SOFTWARE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. KELLEY HALLIWELL		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 700 S. COURTHOUSE ROAD #508		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.102025
City ARLINGTON	State VA	
Zip Code 22204	Purpose of Disbursement SALARY	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MR. SEAN JOYCE		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 1002 F STREET NE		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.101772
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement SALARY	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3137.68
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 36		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. SEAN JOYCE		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 1002 F STREET NE		Amount of Each Disbursement this Period 7500.00 Transaction ID : SB17.101774
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement SALARY Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. JOYCE MURTHA BREAST CARE CENTER		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address C/O WINDBER MEDICAL CENTER 600 SOMERSET AVENUE		Amount of Each Disbursement this Period 160.00 Transaction ID : SB17.101778
City WINDBER State PA Zip Code 15963	Purpose of Disbursement EVENT TICKETS Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MCGUIREWOODS LLP		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 2001 K STREET NW STE. 400		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.101771
City WASHINGTON State DC Zip Code 20006	Purpose of Disbursement LEGAL FEES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8660.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MS. JENNIFER MEARKLE		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 3022 BROAD AVE		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.101769
City ALTOONA State PA Zip Code 16601	Purpose of Disbursement SALARY Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. REBEKAH SUNGALA		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 545 OLD NATIONAL PIKE		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.101770
City BROWNSVILLE State PA Zip Code 15417	Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

SUBTOTAL of Disbursements This Page (optional).....	2200.00
TOTAL This Period (last page this line number only).....	36036.33

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 36	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NRCC		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2012
Mailing Address 320 1ST ST SE		Amount of Each Disbursement this Period 50000.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement POLITICAL CONTRIBUTION	011	Transaction ID : SB21.101870
Candidate Name NRCC	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. REPUBLICAN STATE COMMITTEE OF PA		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 301 MARKET STREET - SUITE 900		Amount of Each Disbursement this Period 100000.00
City HARRISBURG	State PA	Zip Code 17101
Purpose of Disbursement POLITICAL CONTRIBUTION	011	Transaction ID : SB21.101872
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

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

SUBTOTAL of Disbursements This Page (optional).....	150000.00
TOTAL This Period (last page this line number only).....	150000.00