

**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)

HOLLIDAYSBURG

PA

16648

2. FEC IDENTIFICATION NUMBER ▼

C C00364935

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

PA

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

04

01

2015

through

M M / D D / Y Y Y Y

06

30

2015

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

PAUL A KILGORE

[Electronically Filed]

Date

M M / D D / Y Y Y Y

07

15

2015

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

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 227

Write or Type Committee Name

BILL SHUSTER FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

	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))....	591700.00	1087710.00
(b) Total Contribution Refunds (from Line 20(d)) .....	1000.00	2000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	590700.00	1085710.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	190844.83	411879.53
(b) Total Offsets to Operating Expenditures (from Line 14).....	2262.81	2727.81
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	188582.02	409151.72
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1122624.39	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

PAGE 3 / 227

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**BILL SHUSTER FOR CONGRESS**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
04		01		2015

To:

M M	/	D D	/	Y Y Y Y
06		30		2015

**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).....**

246400.00

439550.00

**(ii) Unitemized.....**

600.00

1460.00

**(iii) TOTAL of contributions from individuals ▶**

247000.00

441010.00

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

344700.00

646700.00

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

591700.00

1087710.00

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

7083.33

**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.) .....**

2262.81

2727.81

**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)..... ▶**

593962.81

1097521.14

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 227

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	190844.83	411879.53
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 .....	1000.00	1000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000.00	2000.00
21. OTHER DISBURSEMENTS .....	3000.00	28864.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	194844.83	442743.53

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	723506.41
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	593962.81
25. SUBTOTAL (add Line 23 and Line 24).....	1317469.22
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	194844.83
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1122624.39

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @'CF' +H9A-N5HCB

Form/Schedule: F3N

Transaction ID :

As previously reported, Bill Shuster for Congress made a payment to American Express on 1/13/2015 in the amount of \$7,581.76. It has since come to our attention that a combined total of \$1,683 of that payment were not campaign expenses. As reflected on this report, the Chowder and Marching Club reimbursed Bill Shuster for Congress for that amount on 6/16/2015. This payment reimburses the campaign for the below expenses that were reported as transaction memo items for the 1/13/2015 American Express payment. HP Office Gifts \$390.00 Paypal \$578.61 FedEx \$496.39 Costco \$145.33 Staples: \$26.49 Michaels: \$20.11 Amazon: \$26.07

Form/Schedule: F3N

Transaction ID:

As previously reported, Bill Shuster for Congress made a payment to American Express on 1/13/2015 in the amount of \$7,581.76. It has since come to our attention that a combined total of \$1,683 of that payment were not campaign expenses. As reflected on this report, the Chowder and Marching Club reimbursed Bill Shuster for Congress for that amount on 6/16/2015. This payment reimburses the campaign for the below expenses that were reported as transaction memo items for the 1/13/2015 American Express payment. HP Office Gifts \$390.00 Paypal \$578.61 FedEx \$496.39 Costco \$145.33 Staples: \$26.49 Michaels: \$20.11 Amazon: \$26.07

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RICHARD AGUILAR****A.**

Mailing Address 5401 UPPER VALLEY

City

EL PASO

State

TX

Zip Code

79932

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MAJESTIC REALTORSOccupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110428

Amount of Each Receipt this Period

1000.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC****B.**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110429

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**LORETTA ALONZO****C.**

Mailing Address 746 PENTWATER RD

City

ROMEDEVILLE

State

IL

Zip Code

60446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CENTURY 21

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110382

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**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:

PAGE 7 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110383

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**PAUL G. ARCHIBALD**

Mailing Address 397 WALKER RD

City

WAYNE

State

PA

Zip Code

19087

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCCORMICK TAYLOR

Occupation

ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109904

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**DIONNE CHOUEST AUSTIN**

Mailing Address 16201 E MAIN ST

City

CUT OFF

State

LA

Zip Code

70345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EDISON CHOUEST

Occupation

GENERAL COUNSEL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		13		2015

Transaction ID : SA11AI.110075

Amount of Each Receipt this Period

2700.00

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

3700.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DIONNE CHOUEST AUSTIN****A.**

Mailing Address 16201 E MAIN ST

City

CUT OFF

State

LA

Zip Code

70345

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EDISON CHOUESTOccupation  
GENERAL COUNSEL

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		13		2015

Transaction ID : SA11Al.110076

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**BRUCE AZEVEDO****B.**

Mailing Address 216 BRUSH CREEK RD

City

COLBERT

State

GA

Zip Code

30628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RE/MAXOccupation  
REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		10		2015

Transaction ID : SA11Al.110292

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC****C.**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		10		2015

Transaction ID : SA11Al.110293

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3200.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SHARON BARRON**

Mailing Address 10333 WOODBRIDGE ST

City

TOLUCA LAKE

State

CA

Zip Code

91602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WHITE HOUSE PROPERTIES

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11Al.110250

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C

C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11Al.110253

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**ANTHONY S. BARTOLOMEO P.E.**

Mailing Address 7 MANSOR COURT

City

SEWELL

State

NJ

Zip Code

08080

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PENNONI ASSOCIATES INC

Occupation

PRESIDENT &amp; CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11Al.109914

Amount of Each Receipt this Period

1000.00

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

1500.00

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

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

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

FOR LINE NUMBER:

PAGE 10 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ANTHONY S. BARTOLOMEO P.E.**

Mailing Address 7 MANSOR COURT

City

SEWELL

State

NJ

Zip Code

08080

FEC ID number of contributing federal political committee.

C

Name of Employer

PENNONI ASSOCIATES INC

Occupation

PRESIDENT &amp; CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2015

Transaction ID : SA11AI.110091

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**JEFFREY A BARTOS**

Mailing Address 239 WINDING WAY

City

MERION STATION

State

PA

Zip Code

19066

FEC ID number of contributing federal political committee.

C

Name of Employer

MARK GROUP

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 14 / 2015

Transaction ID : SA11AI.109879

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**SHAWN R. BENDER**

Mailing Address 355 KLINKS LANE

City

ACCIDENT

State

MD

Zip Code

21520

FEC ID number of contributing federal political committee.

C

Name of Employer

BEITZEL CORP.

Occupation

MANAGER OF EXCAVATION

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 04 / 2015

Transaction ID : SA11AI.110183

Amount of Each Receipt this Period

500.00

**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:

PAGE 11 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MARC J BERNSTEIN**

Mailing Address 1500 BARDSEY DR.

City

AMBLER

State

PA

Zip Code

19002

FEC ID number of contributing federal political committee.

C

Name of Employer

CREATIVE FINANCIAL GROUP

Occupation

FINANCIAL MANAGER

Receipt For: 2016

☒ 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
04		14		2015

Transaction ID : SA11Al.109878

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**CARLOS BERUFF**

Mailing Address 1651 WHITFIELD AVE

City

SARASOTA

State

FL

Zip Code

34243

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

BUILDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2015

Transaction ID : SA11Al.110126

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**LAURENCE E. BLOW**

Mailing Address 2554 N. GREENBRIER ST.

City

ARLINGTON

State

VA

Zip Code

22207

FEC ID number of contributing federal political committee.

C

Name of Employer

MAGLER TRANSPORT

Occupation

PRESIDENT

Receipt For: 2016

☒ 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
04		29		2015

Transaction ID : SA11Al.109996

Amount of Each Receipt this Period

500.00

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:

PAGE 12 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CHARLES E BOGOSTA****A.**

Mailing Address 126 PINEHURST LANE

City

GIBSONIA

State

PA

Zip Code

15044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UPMC

Occupation

PRESIDENT

Receipt For: 2016

☒ 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
06		04		2015

Transaction ID : SA11AI.110184

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**BENJAMIN G BORDELON****B.**

Mailing Address 3513 HIGHWAY 308

City

RACELAND

State

LA

Zip Code

70394

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BOLLINGER SHIPYARDS

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2015

Transaction ID : SA11AI.110092

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**CHRISTOPHER L. BORTON****C.**

Mailing Address 54 VIRGINIA TERR

City

FORTY FORT

State

PA

Zip Code

18704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BORTON LAWSON

Occupation

CEO

Receipt For: 2016

☒ 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
04		14		2015

Transaction ID : SA11AI.109911

Amount of Each Receipt this Period

500.00

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

3700.00

**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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**TIMOTHY A. BRADLEY**

A.

Mailing Address 4236 JONES BRIDGE CIR

City

NORCROSS

State

GA

Zip Code

30092

FEC ID number of contributing federal political committee.

C

Name of Employer

CUSTOM PRODUCTS CORP.

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 04 / 2015

Transaction ID : SA11AI.110015

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**SARAH K. BRANDT**

B.

Mailing Address 12440 GATELY RD. S.

City

JACKSONVILLE

State

FL

Zip Code

32225

FEC ID number of contributing federal political committee.

C

Name of Employer

CSX TECHNOLOGY

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 20 / 2015

Transaction ID : SA11AI.110127

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**CHANCE BROWN**

C.

Mailing Address 15214 FOXWOOD ARBOR LANE

City

CYPRESS

State

TX

Zip Code

77429

FEC ID number of contributing federal political committee.

C

Name of Employer

REALTY ONE GROUP

Occupation

REALTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SA11AI.110280

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

**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:

PAGE 14 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing federal political committee.

**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2015

Transaction ID : SA11Al.110281

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**CHANCE BROWN**

Mailing Address 15214 FOXWOOD ARBOR LANE

City

CYPRESS

State

TX

Zip Code

77429

FEC ID number of contributing federal political committee.

**C**

Name of Employer

REALTY ONE GROUP

Occupation

REALTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 29 / 2015

Transaction ID : SA11Al.110469

Amount of Each Receipt this Period

500.00

EARMARKED

Full Name (Last, First, Middle Initial)

**BRETT BROWN**

Mailing Address 9739 SUSSEX ST

City

NAPLES

State

FL

Zip Code

34109

FEC ID number of contributing federal political committee.

**C**

Name of Employer

FIDDLERS CREEK REALTY

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 23 / 2015

Transaction ID : SA11Al.110416

Amount of Each Receipt this Period

500.00

EARMARKED

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

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

1000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 227

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**THOMAS BROWN**

Mailing Address PO BOX 557

City

BIGFORK

State

MT

Zip Code

59911

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GLACIER SOTHEBYSOccupation  
REAL ESTATE

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11Al.110419

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11Al.110420

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**MRS DIANE BROWN**

Mailing Address 774 MAYS BLVD #10-225

City

INCLINE VILLAGE

State

NV

Zip Code

89451

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SIERRA SOTHERBY'S INTERNATIONAL REALOccupation  
REAL ESTATE BROKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Transaction ID : SA11Al.110465

Amount of Each Receipt this Period

1000.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		29		2015

Transaction ID : SA11AI.110466

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**THOMAS D BROWN**

Mailing Address 13721 LAKESHORE DRIVE

City

DES MOINES

State

IA

Zip Code

50325

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

Name of Employer

BROWN NATION LEASE

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2015

Transaction ID : SA11AI.110547

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**MELINDA J. BUCCI**

Mailing Address 2500 COUNTRY CLUB DR.

City

PITTSBURGH

State

PA

Zip Code

15205

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

Name of Employer

GOLDEN TRIANGLE CONSTRUCTION

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2015

Transaction ID : SA11AI.110194

Amount of Each Receipt this Period

2700.00

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

3200.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**KATHLEEN BUCK-HOLST****A.**

Mailing Address 1525 WOODCREST CT.

City

AURORA

State

IL

Zip Code

60504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RCMS

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		04		2015

**Transaction ID : SA11Al.110018**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**WILLIAM BURTON****B.**

Mailing Address PO BOX 1139

City

MORGANTOWN

State

WV

Zip Code

26507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WH BURTON &amp; ASSOC.

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

**Transaction ID : SA11Al.110284**

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC****C.**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

**Transaction ID : SA11Al.110285**

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ALEXANDER BYNUM**

Mailing Address 8719 HIGHWAY 22

City

DRESDEN

State

TN

Zip Code

38225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WENDELL ALEXANDEROccupation  
REAL ESTATE

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110436

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110437

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**SARA CALO**

Mailing Address 6801 EASTGATE DR

City

MAYFIELD

State

OH

Zip Code

44143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOWARD HANNA

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110402

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110403

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**WILLIAM CATON**

Mailing Address 24727 FRASER RD

City

PLAINFIELD

State

IL

Zip Code

60586

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

Name of Employer

CATON COMMERCIAL REAL ESTATE

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110406

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110407

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional).....

500.00

**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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JAMES D. CHIAFULLO****A.**Mailing Address C/O COHEN AND GRIGSBY  
625 LIBERTY AVE

City	State	Zip Code
PITTSBURGH	PA	15222

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
COHEN AND GRIGSBYOccupation  
DIRECTOR

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2015

Transaction ID : SA11Al.110179

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CHIMICLES & TIKELLIS, LLP****B.**

Mailing Address 361 W LANCASTER AVE

City	State	Zip Code
HAVERFORD	PA	19041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11Al.109935

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**KIM DONALDSON SMITH****C.**

Mailing Address 361 W LANCASTER AVE

City	State	Zip Code
HAVERFORD	PA	19041

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CHIMICLES & TIKELLIS, LLPOccupation  
PARTNER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11Al.109936

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**

PARTNERSHIP CHIMICLES &amp; TIKELLIS, LLP

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CAROLYN CHOUEST****A.**

Mailing Address PO BOX 310

City

GALLIANO

State

LA

Zip Code

70354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		13		2015

Transaction ID : SA11AI.110071

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**CAROLYN CHOUEST****B.**

Mailing Address PO BOX 310

City

GALLIANO

State

LA

Zip Code

70354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2016

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		13		2015

Transaction ID : SA11AI.110072

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**GARY CHOUEST****C.**

Mailing Address PO BOX 310

City

GALLIANO

State

LA

Zip Code

70354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EDISON CHOUEST

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		13		2015

Transaction ID : SA11AI.110073

Amount of Each Receipt this Period

2700.00

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

8100.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**GARY CHOUEST**

Mailing Address PO BOX 310

City

GALLIANO

State

LA

Zip Code

70354

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EDISON CHOUESTOccupation  
PRESIDENT

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2015

Transaction ID : SA11Al.110074

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**ROSS M CHOUEST**

Mailing Address 16201 E MAIN ST

City

CUT OFF

State

LA

Zip Code

70345

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EDISON CHOUESTOccupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2015

Transaction ID : SA11Al.110077

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**ROSS M CHOUEST**

Mailing Address 16201 E MAIN ST

City

CUT OFF

State

LA

Zip Code

70345

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EDISON CHOUESTOccupation  
EXECUTIVE

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2015

Transaction ID : SA11Al.110078

Amount of Each Receipt this Period

2700.00

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

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

8100.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CASEY J. CHOUEST****A.**

Mailing Address 16055 E MAIN ST

City

CUT OFF

State

LA

Zip Code

70345

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EDISON CHOUESTOccupation  
EXECUTIVE

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2015

Transaction ID : SA11AI.110079

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**CASEY J. CHOUEST****B.**

Mailing Address 16055 E MAIN ST

City

CUT OFF

State

LA

Zip Code

70345

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EDISON CHOUESTOccupation  
EXECUTIVE

Receipt For: 2016

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2015

Transaction ID : SA11AI.110080

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**DINO CHOUEST****C.**

Mailing Address PO BOX 310

City

GALLIANO

State

LA

Zip Code

70354

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EDISON CHOUESTOccupation  
VP OPERATIONS

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2015

Transaction ID : SA11AI.110085

Amount of Each Receipt this Period

2700.00

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

8100.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DINO CHOUEST**

A.

Mailing Address PO BOX 310

City

GALLIANO

State

LA

Zip Code

70354

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EDISON CHOUEST

Occupation

VP OPERATIONS

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2015

Transaction ID : SA11AI.110086

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**DAMON C. CHOUEST**

B.

Mailing Address PO BOX 310

City

GALLIANO

State

LA

Zip Code

70354

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EDISON CHOUEST

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2015

Transaction ID : SA11AI.110087

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**DAMON C. CHOUEST**

C.

Mailing Address PO BOX 310

City

GALLIANO

State

LA

Zip Code

70354

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EDISON CHOUEST

Occupation

EXECUTIVE

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2015

Transaction ID : SA11AI.110088

Amount of Each Receipt this Period

2700.00

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

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

8100.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CAROL A. CHQUEST****A.**

Mailing Address PO BOX 310

City

GALLIANO

State

LA

Zip Code

70354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		13		2015

Transaction ID : SA11AI.110089

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**STEPHEN B CLARK****B.**

Mailing Address 9273 LERWICK DR.

City

DUBLIN

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CLARK LYTTLE GEDULDIG CRANFORD

Occupation

SENIOR MANAGING PARTNER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Transaction ID : SA11AI.110344

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**STEPHEN B CLARK****C.**

Mailing Address 9273 LERWICK DR.

City

DUBLIN

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CLARK LYTTLE GEDULDIG CRANFORD

Occupation

SENIOR MANAGING PARTNER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

0.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Transaction ID : SA11AI.110568

Amount of Each Receipt this Period

-250.00

RETURNED CHECK

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

2700.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ERNIE CLARK****A.**

Mailing Address 1012 S CHURCH ST

City

BROOKHAVEN

State

MS

Zip Code

39601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ERNIE CLARK REAL ESTATE

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ 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
06		10		2015

Transaction ID : SA11AI.110290

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC****B.**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110291

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**DOUGLAS CLARK****C.**

Mailing Address 7869 COCOBAY DR

City

NAPLES

State

FL

Zip Code

34108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ 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
06		22		2015

Transaction ID : SA11AI.110341

Amount of Each Receipt this Period

500.00

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

1000.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JAY W CLEVELAND JR.**

Mailing Address 4565 WILLIAM PENN HWY

City

MURRYSVILLE

State

PA

Zip Code

15668

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CLEVELAND BROTHERS EQUIPMENT CO.

Occupation

PRESIDENT &amp; CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2015

Transaction ID : SA11Al.110196

Amount of Each Receipt this Period

1700.00

Full Name (Last, First, Middle Initial)

**MARY S. CLEVELAND**

Mailing Address 4565 WILLIAM PENN HWY.

City

MURRYSVILLE

State

PA

Zip Code

15668

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2015

Transaction ID : SA11Al.110197

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AARON COHEN**

Mailing Address 769 S 17TH ST.

City

PHILADELPHIA

State

PA

Zip Code

19146

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARENA STRATEGIES

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11Al.109919

Amount of Each Receipt this Period

1000.00

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

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

3700.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**KAREN A. COLE****A.**

Mailing Address 10077 POPLAR HALL CT

City

MECHANICSVILLE

State

VA

Zip Code

23116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2015

**Transaction ID : SA11AI.110148**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**PATRICK X COLLINGS****B.**

Mailing Address 28 EMLYN LN.

City

MECHANICSBURG

State

PA

Zip Code

17055

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LANE ENTERPRISES, INC.

Occupation

PRESIDENT &amp; GENERAL MANAGER

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2015

**Transaction ID : SA11AI.110295**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**NEIL A COOPER****C.**

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: 2016



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
04		14		2015

**Transaction ID : SA11AI.109880**

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**KEVIN COUGHLIN****A.**

Mailing Address 1082 E LUCAS STREET

City

LA CENTER

State

WA

Zip Code

98629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DAIMLER TRUCKSOccupation  
MANAGER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

**Transaction ID : SA11Al.110546**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**RONALD CROUSHORE****B.**

Mailing Address 9401 MCKNIGHT RD FL 2

City

PITTSBURGH

State

PA

Zip Code

15237

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BERKSHIRE HATHAWAYOccupation  
REAL ESTATE

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

**Transaction ID : SA11Al.110432**

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC****C.**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

**Transaction ID : SA11Al.110433**

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

800.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 30 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PATRICK CUNNANE****A.**

Mailing Address 795 GLEN ROAD

City

JENKINTOWN

State

PA

Zip Code

19046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ADVANCED SPORTS INC.Occupation  
SALES

Receipt For: 2016

☒ 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
04		09		2015

**Transaction ID : SA11AI.109875**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**PASQUALE T DEON SR****B.**

Mailing Address 1655 CARLENE CT

City

LANGHORNE

State

PA

Zip Code

19047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PA TURNPIKE COMMISSION/SEPTAOccupation  
COMMISSIONER/CHAIRMAN

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

**Transaction ID : SA11AI.109923**

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**PETER DEPAUL****C.**

Mailing Address 1750 WALTON RD

City

BLUE BELL

State

PA

Zip Code

19422

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DEPAUL GROUPOccupation  
CEO

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2015

**Transaction ID : SA11AI.110118**

Amount of Each Receipt this Period

1000.00

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

4100.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOHN A. DEVIerno**

Mailing Address 9417 BYEFORDE RD

City

KENSINGTON

State

MD

Zip Code

20895

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CADOTAG

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2015

Transaction ID : SA11AI.110149

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ROBERT N. DINGESS**

Mailing Address 16 PADDOCK LANE

City

FREDERICKSBURG

State

VA

Zip Code

22406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MERCER STRATEGIC

Occupation

PRESIDENT &amp; CEO

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2015

Transaction ID : SA11AI.110014

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**JAMES C DOBROWOLSKI**

Mailing Address 122 PADDOCK DR

City

COLUMBUS

State

NJ

Zip Code

08022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PRWT SERVICES

Occupation

CEO

Receipt For: 2016

☒ 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
04		14		2015

Transaction ID : SA11AI.109915

Amount of Each Receipt this Period

500.00

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:

PAGE 32 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DOUGLAS D. DOLINAR****A.**

Mailing Address 3075 KNIGHTS WAY

City

DOYLESTOWN

State

PA

Zip Code

18902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GUIDEMARKOccupation  
CONTRACTOR

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		04		2015

**Transaction ID : SA11AI.110013**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CANDIS DORSCH****B.**

Mailing Address 1745 S 19TH AVE

City

BOZEMAN

State

MT

Zip Code

59718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOZEMAN BROKER GROUPOccupation  
REAL ESTATE BROKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

**Transaction ID : SA11AI.110277**

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC****C.**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

**Transaction ID : SA11AI.110571**

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED**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:

PAGE 33 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JUDY DOYLE**

A.

Mailing Address 602 WATCH HILL RD

City

COLLINSVILLE

State

IL

Zip Code

62234

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RE/MAX

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 23 / 2015

Transaction ID : SA11AI.110378

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

B.

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 23 / 2015

Transaction ID : SA11AI.110379

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**TERENCE M DUBOWICK**

C.

Mailing Address 8418 MONTICELLO RIDGE DR

City

RURAL HALL

State

NC

Zip Code

27045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MACK VOLVO LEASING

Occupation

MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.110545

Amount of Each Receipt this Period

250.00

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

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

750.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 34 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ECKERT SEAMANS CHERIN & MELLOTT, LLC**

Mailing Address 600 GRANT STREET, 44TH FLOOR

City

PITTSBURGH

State

PA

Zip Code

15219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11AI.110510

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

**THOMAS SWEENEY**

Mailing Address 600 GRANT ST

City

PITTSBURGH

State

PA

Zip Code

15219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

ECKERT SEAMANS CHERIN &amp; MELLOTT, LLC

PARTNER

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11AI.110595

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**PARTNERSHIP ECKERT SEAMANS CHERIN &  
MELLOTT, LLC**C.**

Full Name (Last, First, Middle Initial)

**KATHLEEN GALLAGHER**

Mailing Address 600 GRANT ST

City

PITTSBURGH

State

PA

Zip Code

15219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

ECKERT SEAMANS CHERIN &amp; MELLOTT, LLC

PARTNER

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11AI.110596

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**PARTNERSHIP ECKERT SEAMANS CHERIN &  
MELLOTT, LLC**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 35 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DAVID E EDMAN**

A.

Mailing Address 578 CRICKET LANE

City

RADNOR

State

PA

Zip Code

19087

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RISK MANAGEMENT PARTNERS

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 14 / 2015

Transaction ID : SA11AI.109882

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**FREDRIK J. ELIASSON**

B.

Mailing Address 208 CLEARLAKE DR.

City

PONTE VEDRA

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSX

Occupation

CFO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.110548

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**HOWARD R ELLIOTT JR.**

C.

Mailing Address 141 SAWMLL LAKES BLVD.

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSX

Occupation

VICE PRESIDENT OF PUBLIC SAFETY &amp; HE,

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 26 / 2015

Transaction ID : SA11AI.110146

Amount of Each Receipt this Period

500.00

**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:

PAGE 36 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**KIRWAN B. ELLIOTT**

A.

Mailing Address 1110 ROSEWOOD DR

City

BLUE BELL

State

PA

Zip Code

19422

FEC ID number of contributing federal political committee.

C

Name of Employer

JANEY MONTGOMERY SCOTT

Occupation

DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109903

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**TODD ENGLAND**

B.

Mailing Address 16200 WYNSTONE LN.

City

AUSTIN

State

TX

Zip Code

78717

FEC ID number of contributing federal political committee.

C

Name of Employer

N-LINE TRAFFIC MAINTENANCE

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2015

Transaction ID : SA11AI.110017

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**GARY E. ERLBAUM**

C.

Mailing Address 44 W LANCASTER AVE STE 110

City

ARDMORE

State

PA

Zip Code

19003

FEC ID number of contributing federal political committee.

C

Name of Employer

GREEN TREE PROPERTIES

Occupation

REAL ESTATE DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109898

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. TONY ESSALIH****A.**

Mailing Address 1750 SKY LARK LANE APT. 918

City

HOUSTON

State

TX

Zip Code

77056

FEC ID number of contributing federal political committee.

C

Name of Employer

CORNERSTONE GOVERNMENT AFFAIRS

Occupation

PRINCIPAL

Receipt For: 2016

☒ 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
04		09		2015

Transaction ID : SA11AI.109876

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**FRED FEHSENFELD SR****B.**

Mailing Address 149 WILLOWGATE LN

City

INDIANAPOLIS

State

IN

Zip Code

46260

FEC ID number of contributing federal political committee.

C

Name of Employer

THE HERITAGE GROUP

Occupation

CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2015

Transaction ID : SA11AI.110123

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**MARC L FELGOISE****C.**

Mailing Address 7139 SHEAFF LN.

City

FORT WASHINGTON

State

PA

Zip Code

19034

FEC ID number of contributing federal political committee.

C

Name of Employer

INTERSECT ADVISORS

Occupation

CONSULTANT

Receipt For: 2016

☒ 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
04		14		2015

Transaction ID : SA11AI.109884

Amount of Each Receipt this Period

500.00

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

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

3700.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DANIEL J. FIERMAN****A.**

Mailing Address 155 BUTLER ST

City

KINGSTON

State

PA

Zip Code

18704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FIERMAN MEDICAL HOLDINGS

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11Al.109899

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**ELLEN M FITZSIMMONS****B.**

Mailing Address 26221 MARSH LANDING PKWY

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Transaction ID : SA11Al.110549

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**BETH FOLEY****C.**

Mailing Address 1714 WAUKAZOO DR

City

HOLLAND

State

MI

Zip Code

49424

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SUMMIT PROPERTIES

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11Al.110261

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**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:

PAGE 39 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing federal political committee.

**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2015

Transaction ID : SA11AI.110262

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**BRYAN FORCE**

Mailing Address 83 KIMMEL RD.

City

HOME

State

PA

Zip Code

15747

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

FORCE, INC.

PRESIDENT/OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 04 / 2015

Transaction ID : SA11AI.110195

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**IRMA FRALIC**

Mailing Address 8700 MONTGOMERY AVE

City

WYNDMOOR

State

PA

Zip Code

19038

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

FRALIC INTERIORS

OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2015

Transaction ID : SA11AI.109886

Amount of Each Receipt this Period

500.00

**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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PAMELA FRESTEDT**

Mailing Address 6613 E VIRGINIA ST

City

MESA

State

AZ

Zip Code

85215

FEC ID number of contributing federal political committee.

C

Name of Employer

REALTY EXCELLENCE GROUP

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 23 / 2015

Transaction ID : SA11AI.110400

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 23 / 2015

Transaction ID : SA11AI.110401

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**MRS. CLARENCE FRICHE**

Mailing Address 10424 W AVE B

City

CUT OFF

State

LA

Zip Code

70345

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2015

Transaction ID : SA11AI.110081

Amount of Each Receipt this Period

2700.00

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

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

3200.00



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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MRS. CLARENCE FRICHE

A.

Mailing Address 10424 W AVE B

City

CUT OFF

State

LA

Zip Code

70345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2016

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2015

Transaction ID : SA11AI.110082

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

CLARENCE R FRICHE

B.

Mailing Address 10424 W AVE B

City

CUT OFF

State

LA

Zip Code

70345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EDISON CHOUEST

Occupation

MANAGER

Receipt For: 2016

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2015

Transaction ID : SA11AI.110083

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

CLARENCE R FRICHE

C.

Mailing Address 10424 W AVE B

City

CUT OFF

State

LA

Zip Code

70345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EDISON CHOUEST

Occupation

MANAGER

Receipt For: 2016

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2015

Transaction ID : SA11AI.110084

Amount of Each Receipt this Period

2700.00

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

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

8100.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**STEVEN L. FRIEDMAN****A.**

Mailing Address 30 S 17TH ST

City

PHILADELPHIA

State

PA

Zip Code

19103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DUANE MORRIS

Occupation

ATTORNEY

Receipt For: 2016

☒ 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
04		14		2015

Transaction ID : SA11AI.109885

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**ROBERT J FRULLA JR****B.**

Mailing Address 11331 KINGSLEY MANOR WAY

City

JACKSONVILLE

State

FL

Zip Code

32225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSX

Occupation

VICE PRESIDENT

Receipt For: 2016

☒ 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
06		30		2015

Transaction ID : SA11AI.110550

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**MARK F FULENA****C.**

Mailing Address 343 OLD PULASKI RD.

City

NEW CASTLE

State

PA

Zip Code

16105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FULENA PAVERS, INC.

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2015

Transaction ID : SA11AI.110191

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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**EDMUND GARDNER**

Mailing Address 149 WESTERN PROMENADE

City

PORTLAND

State

ME

Zip Code

04102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OCEAN GATE REALTYOccupation  
REALTOR

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110251

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C

C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110254

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**CHRISTOPHER GARRETT**

Mailing Address 4416 THOROUGHbred LANE

City

MURFREESBORO

State

TN

Zip Code

37127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNITED REALTY OF BREVARDOccupation  
REALTOR

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110252

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**SUBTOTAL** of Receipts This Page (optional).....

1000.00

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11Al.110255

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**ANDREW L. GLASSMAN**

Mailing Address 8251 ASHWORTH CT.

City

JACKSONVILLE

State

FL

Zip Code

32256

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSX

Occupation

VP FINANCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Transaction ID : SA11Al.110551

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**NATHAN D GOLDMAN**

Mailing Address 1275 CREIGHTON BLUFF LN.

City

JACKSONVILLE

State

FL

Zip Code

32223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSX

Occupation

GENERAL COUNSEL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Transaction ID : SA11Al.110552

Amount of Each Receipt this Period

500.00

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

1000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DANIEL GOODWIN****A.**

Mailing Address 2901 BUTTERFIELD RD

City

OAK BROOK

State

IL

Zip Code

60523

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INLAND REAL ESTATEOccupation  
REAL ESTATE

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110238

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC****B.**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110239

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**SEAN W. GORMLEY****C.**

Mailing Address 2 S PEMBROKE AVE

City

MARGATE CITY

State

NJ

Zip Code

08402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INNOVATIVE RISK SOLUTIONSOccupation  
INSURANCE BROKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109916

Amount of Each Receipt this Period

1000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FRANCOIS GREGOIRE**

Mailing Address 6285 25TH AVE N

City

ST. PETERSBURG

State

FL

Zip Code

33710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 23 / 2015D D / Y Y Y Y Y Y  
23 / 2015Y Y Y Y Y Y Y Y  
2015

Transaction ID : SA11AI.110394

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**B.**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C

C00484535

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 23 / 2015D D / Y Y Y Y Y Y  
23 / 2015Y Y Y Y Y Y Y Y  
2015

Transaction ID : SA11AI.110395

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED**C.**

Full Name (Last, First, Middle Initial)

**JAMIE GREGORY**

Mailing Address 402 FAIR HILL CT

City

ANNAPOLIS

State

MD

Zip Code

21403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NATIONAL ASSOC. OF REALTORS

Occupation

LOBBYIST

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 23 / 2015D D / Y Y Y Y Y Y  
23 / 2015Y Y Y Y Y Y Y Y  
2015

Transaction ID : SA11AI.110380

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**SUBTOTAL** of Receipts This Page (optional).....

1000.00

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 47 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110381

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**ERNEST R HANNA**

Mailing Address 2401 PENNSYLVANIA AVE. APT. 17C51

City

PHILADELPHIA

State

PA

Zip Code

19130

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

Name of Employer

GZA GEOENVIRONMENTAL INC.

Occupation

PRINCIPAL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109913

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**JOHN T HART**

Mailing Address 512 E SURF SPRAY LANE

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082

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

Name of Employer

CSX

Occupation

ASSOCIATE VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Transaction ID : SA11AI.110566

Amount of Each Receipt this Period

500.00

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

1500.00

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 48 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**GAIL HARTNETT****A.**

Mailing Address 3688 S CROSSPOINT

City

BOISE

State

ID

Zip Code

83706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KELLER WILLIAMS

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110288

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC****B.**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110289

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**GEORGE HARVEY****C.**

Mailing Address PO BOX 1213

City

TELLURIDE

State

CO

Zip Code

81435

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE HARVEY TEAM

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110248

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110249

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**NOBU HATA**

Mailing Address 3537 N RETA AVE #3

City

CHICAGO

State

IL

Zip Code

60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NATIONAL ASSOC. OF REALTORS

Occupation

STAFF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110408

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110409

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**EDWARD J HAZZOURI****A.**

Mailing Address 46 WARWICK RD.

City

HADDONFIELD

State

NJ

Zip Code

08033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HAZZOURI &amp; ASSOCIATES

Occupation

CHAIRMAN

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109917

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**TOM L. HEINZ****B.**

Mailing Address 353 W SAWGRASS TRAIL

City

DAKOTA DUNES

State

SD

Zip Code

57049

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HEINZ

Occupation

PRESIDENT

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110217

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JAMES HELSEL****C.**

Mailing Address 35 INDIANA CIR.

City

LEMOYNE

State

PA

Zip Code

17043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HELSEL, INC.

Occupation

REAL ESTATE

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110396

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC****A.**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11Al.110397

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**DAVID HEMENWAY****B.**

Mailing Address 77614 HWY 99

City

COTTAGE GROVE

State

OR

Zip Code

97424

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

Name of Employer

RE/MAX

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11Al.110388

Amount of Each Receipt this Period

1000.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC****C.**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11Al.110389

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. JAMES D HENSLER**

Mailing Address 2521 C SOUTH WALTER REED DR

City

ARLINGTON

State

VA

Zip Code

22206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ 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
06		22		2015

Transaction ID : SA11AI.110351

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**RACHEL J. HENSLER**

Mailing Address 1422 N JEFFERSON ST

City

ARLINGTON

State

VA

Zip Code

22205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ 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
06		22		2015

Transaction ID : SA11AI.110355

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**THOMAS J HOLT JR.**

Mailing Address 10730 MEADOW LN.

City

PHILA

State

PA

Zip Code

19154

FEC ID number of contributing  
federal political committee.

C

Name of Employer

K&amp;L GATES

Occupation

PARTNER/ATTORNEY

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109918

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 227

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DANIEL G HOLTER****A.**

Mailing Address 4005 MARION RD SE

City

ROCHESTER

State

MN

Zip Code

55904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ROCHESTER CITY LINES

Occupation

MANAGER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2015

**Transaction ID : SA11Al.110188**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**RICHARD M HOOD****B.**

Mailing Address 2233 STAGGERBUSH DRIVE

City

JACKSONVILLE

State

FL

Zip Code

32223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSX

Occupation

VICE PRESIDENT

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

**Transaction ID : SA11Al.110567**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**MR AL INGRAHAM****C.**

Mailing Address 1901 RIDGE ROAD

City

REISTERSTOWN

State

MD

Zip Code

21136

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GREATER BALTIMORE BOARD OF REALTOR

Occupation

STAFF

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

**Transaction ID : SA11Al.110470**

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**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:

PAGE 54 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Transaction ID : SA11AI.110572

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**EDWARD D JENKINS**

Mailing Address 7648 WEXFORD CLUB DR. W

City

JACKSONVILLE

State

FL

Zip Code

32256

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

Name of Employer

Occupation

CSX TRANSPORTATION

MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Transaction ID : SA11AI.110565

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**CHRISTOPHER P. JENKINS**

Mailing Address 7430 FOUNDERS WAY

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082

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

Name of Employer

Occupation

CSX

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		26		2015

Transaction ID : SA11AI.110145

Amount of Each Receipt this Period

500.00

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

1000.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FRANCIS JOANLANNE**

A.

Mailing Address 7 WINDING WAY

City

DALLAS

State

PA

Zip Code

18612

FEC ID number of contributing federal political committee.

C

Name of Employer  
BORTON LAWSONOccupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 14 / 2015

Transaction ID : SA11AI.109924

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**KEVIN L JOHNSON**

B.

Mailing Address 1759 HAMILTON DR

City

PHOENIXVILLE

State

PA

Zip Code

19460

FEC ID number of contributing federal political committee.

C

Name of Employer  
TRAFFIC PLANNING & DESIGN INC.Occupation  
TRANSPORTATION ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 20 / 2015

Transaction ID : SA11AI.110119

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**QUINTIN C. KENDALL**

C.

Mailing Address 3256 RIVERSIDE AVE.

City

JACKSONVILLE

State

FL

Zip Code

32205

FEC ID number of contributing federal political committee.

C

Name of Employer  
CSXOccupation  
VP STATE GOVERNMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.110564

Amount of Each Receipt this Period

500.00

**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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**KEVIN P KINROSS**

A.

Mailing Address 143 SHARBOT DR.

City

PITTSBURGH

State

PA

Zip Code

15237

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE CANEY GROUP, LLC

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 04 / 2015

Transaction ID : SA11AI.110185

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**BRADLEY L. KRATZ**

B.

Mailing Address 343 MILLER RD

City

MAHAFFEY

State

PA

Zip Code

15757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KMI HOLDINGS

Occupation

GENERAL MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 04 / 2015

Transaction ID : SA11AI.110181

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**ANDREW LANG**

C.

Mailing Address 1235 BRIERCLIFF ROAD

City

BRIDGEPORT

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUE DOT ENERGY SERVICES

Occupation

VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.110513

Amount of Each Receipt this Period

1000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BILL SHUSTER FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>THOMAS LAWING</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2015	
Mailing Address 2609 VALENCIA TERRACE		<b>Transaction ID : SA11AI.110430</b>	
City CHARLOTTE	State NC	Zip Code 28226	Amount of Each Receipt this Period 500.00 EARMARKED CONTRIBUTION THROUGH C00484535 VOTESANE PAC
FEC ID number of contributing federal political committee. C			
Name of Employer TR LAWING REAL ESTATE	Occupation REAL ESTATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>VOTESANE PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2015	
Mailing Address PO BOX 2713		<b>Transaction ID : SA11AI.110431</b>	
City ALEXANDRIA	State VA	Zip Code 22301	Amount of Each Receipt this Period 500.00 <b>[MEMO ITEM]</b> EARMARKED(NON-DIRECTED): CONDUIT LIMIT NOT AFFECTED
FEC ID number of contributing federal political committee. C C00484535			
Name of Employer	Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 31500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>RICHARD LEVENSON</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2015	
Mailing Address 12246 NORTSHORE DR		<b>Transaction ID : SA11AI.110438</b>	
City KNOXVILLE	State TN	Zip Code 37922	Amount of Each Receipt this Period 500.00 EARMARKED CONTRIBUTION THROUGH C00484535 VOTESANE PAC
FEC ID number of contributing federal political committee. C			
Name of Employer RE/MAX	Occupation REAL ESTATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		1000.00	
<b>TOTAL</b> 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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110439

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**WILLIAM K. LIEBERMAN**

Mailing Address 201 GLADSTONE RD.

City

PITTSBURGH

State

PA

Zip Code

15217

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TH LIEBERMAN COMPANIES

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Transaction ID : SA11AI.110514

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**JAMES LIPTAK**

Mailing Address 4645 JACK CREEK RD

City

TEMPLETON

State

CA

Zip Code

93465

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PATTERSON REALTY

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110246

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110247

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**JONATHAN LIVINGSTON**

Mailing Address 153 SOUTH AVE.

City

SWEDESBORO

State

NJ

Zip Code

08085

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

Name of Employer

JACOBS

Occupation

MANAGER OF BUSINESS DEVELOPMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109922

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**EVA LOKEN**

Mailing Address 101 WOLF DR

City

EAGLE RIVER

State

AR

Zip Code

99577

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

Name of Employer

JACK WHITE EAGLE RIVER

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110282

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

800.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing federal political committee.

**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SA11Al.110283

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**FRANK A. LONEGRO**

Mailing Address 3820 BIGGIN CHURCH RD. W.

City

JACKSONVILLE

State

FL

Zip Code

32224

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

CSX

VP SERVICE DESIGN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 26 / 2015

Transaction ID : SA11Al.110147

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**MR. JEFFREY LOVENG**

Mailing Address 228 W. WINDSOR AVENUE

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

VANDOR STRATEGIES LLC

GOVERNMENT AFFAIRS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 23 / 2015

Transaction ID : SA11Al.110442

Amount of Each Receipt this Period

1000.00

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

1500.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WILLIAM LUBLIN**

Mailing Address 1708 WELSH RD

City

PHILADELPHIA

State

PA

Zip Code

19115

FEC ID number of contributing federal political committee.

C

Name of Employer

CENTURY 21

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2015

Transaction ID : SA11Al.110273

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2015

Transaction ID : SA11Al.110274

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**LXTCH, LLC**

Mailing Address PO BOX 22538

City

PHILADELPHIA

State

PA

Zip Code

19110

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2015

Transaction ID : SA11Al.109933

Amount of Each Receipt this Period

1000.00

**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:

PAGE 62 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DEAN PICCIOTTI****A.**

Mailing Address PO BOX 22538

City

PHILADELPHIA

State

PA

Zip Code

19110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LXTCH, LLC

Occupation

PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109934

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**

PARTNERSHIP LXTCH, LLC

Full Name (Last, First, Middle Initial)

**MICHAEL A. MAHOLICK****B.**

Mailing Address 105 STAYMAN DR.

City

NORTH WALES

State

PA

Zip Code

19454

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCCORMICK TAYLOR

Occupation

ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109912

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**MICHAEL A. MAHOLICK****C.**

Mailing Address 105 STAYMAN DR.

City

NORTH WALES

State

PA

Zip Code

19454

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCCORMICK TAYLOR

Occupation

ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		26		2015

Transaction ID : SA11AI.110150

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LISA MANCINI****A.**

Mailing Address 1036 PONTE CEDRA BLVD.

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSX TRANSPORTATION

Occupation

SVP &amp; CAO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2015

**Transaction ID : SA11AI.110563**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**MICHAEL MANGINE****B.**

Mailing Address 4412 NEW CASTLE RD

City

LOWELLVILLE

State

OH

Zip Code

44436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2015

**Transaction ID : SA11AI.110192**

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**MICHAEL MARCUS****C.**

Mailing Address 3332 S TULARE CIR

City

DENVER

State

CO

Zip Code

80231

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COLDWELL BANKER RESIDENTIAL BROKER

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		10		2015

**Transaction ID : SA11AI.110244**

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4200.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing federal political committee.

**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SA11Al.110245

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**SUZANNE L. MARKS**

Mailing Address 10197 VINEYARD LAKE RD. E.

City

JACKSONVILLE

State

FL

Zip Code

32256

FEC ID number of contributing federal political committee.

**C**

Name of Employer

CSX

Occupation

VP SAFETY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11Al.110562

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JARED MARTIN**

Mailing Address 7346 N TEILMAN AVE

City

FRESNO

State

CA

Zip Code

93711

FEC ID number of contributing federal political committee.

**C**

Name of Employer

KELLER WILLIAMS

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 23 / 2015

Transaction ID : SA11Al.110424

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

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

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

1000.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110425

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**MR CARL MARTINCHICH**

Mailing Address 3125 N BROOKHOLLOW RD

City

OKLAHOMA CITY

State

UT

Zip Code

73120

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

Name of Employer

Occupation

INFORMATION REQUESTED

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Transaction ID : SA11AI.110451

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**JANE MASLOWSKI**

Mailing Address 2288 WARNER RD

City

LANSDALE

State

PA

Zip Code

19446

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

Name of Employer

Occupation

KELLER WILLIAMS

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110384

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**SUBTOTAL** of Receipts This Page (optional).....

850.00

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110385

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**DAVID G. MATESIC**

Mailing Address 3447 E. CARSON ST.

City

PITTSBURGH

State

PA

Zip Code

15203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MATCON DIAMOND

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2015

Transaction ID : SA11AI.110193

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**DARRYL J. MAY**

Mailing Address 1332 MEDFORD RD

City

WYNNEWOOD

State

PA

Zip Code

19096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BALLARD SPARN

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109897

Amount of Each Receipt this Period

500.00

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

3200.00

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

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

FOR LINE NUMBER:

PAGE 67 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. FRANK MCCARTHY**

Mailing Address 2332 NORTH EARLY ST

City

ALEXANDRIA

State

VA

Zip Code

22302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE KEELEN GROUPOccupation  
GOVERNMENT AFFAIRS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2015

Transaction ID : SA11AI.110443

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**MARK W MCCLYMONDS**

Mailing Address PO BOX 296

City

PORTERSVILLE

State

PA

Zip Code

16051

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MCCLYMONDS SUPPLYOccupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2015

Transaction ID : SA11AI.110120

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**JOSEPH G MCCORMICK**

Mailing Address 328 ECHO VALLEY LANE

City

NEWTOWN SQUARE

State

PA

Zip Code

19073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PUBLIC FINANCE MANAGEMENTOccupation  
MANAGING DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109921

Amount of Each Receipt this Period

1000.00

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

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

4700.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CHRISTOPHER MCELROY**

Mailing Address 5707 SANDBAR CT

City

FORT COLLINS

State

CO

Zip Code

80528

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE HARMONY GROUP

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110240

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110241

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**GEORGE MCELWEE**

Mailing Address 2547 S KENMORE CT

City

ARLINGTON

State

VA

Zip Code

22206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMMONWEALTH STRATEGIC PARTNERS

Occupation

GOVERNMENT AFFAIRS

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		01		2015

Transaction ID : SA11AI.110175

Amount of Each Receipt this Period

500.00

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

1000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MICHAEL J MCGOUGH****A.**

Mailing Address 601 N PIEDMONT ST.

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NCSPA

Occupation

ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2015

**Transaction ID : SA11AI.110176**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**SHEILA MCNELIS****B.**

Mailing Address 5306 N PENNSYLVANIA ST

City

INDIANAPOLIS

State

IN

Zip Code

46220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARIAN UNIVERSITY

Occupation

ASSISTANT PROFESSOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		04		2015

**Transaction ID : SA11AI.110012**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**TIMOTHY P MCNULTY****C.**

Mailing Address 106 LINDEN AVE.

City

PITTSBURGH

State

PA

Zip Code

15208

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARNEGIE MELLON UNIVERSITY

Occupation

EDUCATION ADMINISTRATION

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2015

**Transaction ID : SA11AI.110509**

Amount of Each Receipt this Period

500.00

2000.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BILL SHUSTER FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>BETTE MCTAMNEY</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2015	
Mailing Address 3113 EISENHOWER DR		<b>Transaction ID : SA11Al.110410</b>	
City EAST NORRITON	State PA	Zip Code 19403	Amount of Each Receipt this Period 500.00 EARMARKED CONTRIBUTION THROUGH C00484535 VOTESANE PAC
FEC ID number of contributing federal political committee. C			
Name of Employer RE/MAX	Occupation REAL ESTATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>VOTESANE PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2015	
Mailing Address PO BOX 2713		<b>Transaction ID : SA11Al.110411</b>	
City ALEXANDRIA	State VA	Zip Code 22301	Amount of Each Receipt this Period 500.00 <b>[MEMO ITEM]</b> EARMARKED(NON-DIRECTED): CONDUIT LIMIT NOT AFFECTED
FEC ID number of contributing federal political committee. C C00484535			
Name of Employer	Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 31500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>RICHARD MENDENHALL</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2015	
Mailing Address 2212 SHEPARD BLVD		<b>Transaction ID : SA11Al.110392</b>	
City COLUMBIA	State MO	Zip Code 65201	Amount of Each Receipt this Period 500.00 EARMARKED CONTRIBUTION THROUGH C00484535 VOTESANE PAC
FEC ID number of contributing federal political committee. C			
Name of Employer RE/MAX	Occupation REAL ESTATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		1000.00	
<b>TOTAL</b> 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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110393

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**ALBERT MEZZAROA**

Mailing Address 351 WINDING WAY

City

MERION STATION

State

PA

Zip Code

19066

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

Name of Employer

GENOVA BURNS GIANTOMASI

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109910

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**IAN MICHEL**

Mailing Address 210 S FAIRFIELD

City

DEVON

State

PA

Zip Code

19333

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

Name of Employer

INTERSECT ADVISORS

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109881

Amount of Each Receipt this Period

500.00

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

3200.00

**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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ALEX MISTRI**

Mailing Address 440 12TH STREET, NE #107

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE GLOVER PARK GROUP

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11AI.110508

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**ROBERT MULLIN**

Mailing Address 204 S LEXINGTON AVE

City

PITTSBURGH

State

PA

Zip Code

15208

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CLEOPATRA RESOURCES

Occupation

RETAIL AND COMMERCIAL FUELS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2015

Transaction ID : SA11AI.110338

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**OSCAR MUNOZ**

Mailing Address 7230 OAKMONT CT.

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSX CORPORATION

Occupation

COO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11AI.110561

Amount of Each Receipt this Period

2700.00

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

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

6400.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOHN P MURPHY****A.**

Mailing Address 1406 CRESTWOOD DR

City

ALEXANDRIA

State

VA

Zip Code

22302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FEDERAL HILL GROUP, LLC

Occupation

GOVERNMENT RELATIONS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		09		2015

Transaction ID : SA11Al.110296

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**THOMAS MURPHY****B.**

Mailing Address 2608 E SLATEN PARK CIR

City

SIOUX FALLS

State

SD

Zip Code

57103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KELLER WILLIAMS

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11Al.110398

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC****C.**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11Al.110399

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**KEVIN MYERS**

Mailing Address 16635 CENTERFIELD DR

City

EAGLE RIVER

State

AR

Zip Code

99577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JACK WHITE

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110434

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110435

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**PATRICK K. NEAL**

Mailing Address 5800 LAKEWOOD RANCH BLVD

City

SARASOTA

State

FL

Zip Code

34240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEAL COMMUNITIES

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		29		2015

Transaction ID : SA11AI.109997

Amount of Each Receipt this Period

2500.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR RANDALL NEUHAUS**

Mailing Address 6612 ARBOR GRANDE WAY

City

RALEIGH

State

NC

Zip Code

27615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

S &amp; ME

Occupation

PRESIDENT AND CEO

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Transaction ID : SA11AI.110452

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**STANLEY J. NIEMCZAK**

Mailing Address 30 PENN CIRCLE

City

HOLLAND

State

PA

Zip Code

18966

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JACOBS ENGINEERING

Occupation

OPERATIONS MANAGER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109908

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**DEANNA NORMAN**

Mailing Address 243 PELICAN DR

City

DOWNSVILLE

State

PA

Zip Code

71234

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DB REAL ESTATE

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110404

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1250.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

A.

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing federal political committee.

**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 23 / 2015

Transaction ID : SA11AI.110405

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**EDWARD O'MALLEY**

B.

Mailing Address 12893 BAY PLANTATION DRIVE

City

JACKSONVILLE

State

FL

Zip Code

32223

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

CSX

VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.110560

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**MICHAEL M PADGETT**

C.

Mailing Address 11343 KINGSLEY MANOR WAY

City

JACKSONVILLE

State

FL

Zip Code

32225

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

INFORMATION REQUESTED

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.110559

Amount of Each Receipt this Period

1000.00

**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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ERIK G PALM****A.**

Mailing Address 8168 SEVEN MILE DR.

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CSX CORPORATIONOccupation  
ASSISTANT VICE PRESIDENT OF FINANCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Transaction ID : SA11Al.110558

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**MICHAEL PAPPAS****B.**

Mailing Address 911 BROKEN SHAFT

City

KNOXVILLE

State

TN

Zip Code

37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
COLDWELL BANKEROccupation  
REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11Al.110257

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC****C.**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11Al.110258

Amount of Each Receipt this Period

500.00

[MEMO ITEM]  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

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

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

1000.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

EMANUEL ALEX PARIS III

A.

Mailing Address 142 PARIS RD

City

AVELLA

State

PA

Zip Code

15312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ALEX E PARIS CONTRACTING CO

Occupation

CONSTRUCTION EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Transaction ID : SA11Al.110512

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

KEITH J. PEMRICK

B.

Mailing Address 1758 U ST NW #1

City

WASHINGTON

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMMONWEALTH STRATEGIC PARTNERS

Occupation

PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2015

Transaction ID : SA11Al.110180

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

TRAVIS PENDERGRASS

C.

Mailing Address 344 NEW TOWN CHURCH ROAD

City

CARLTON

State

GA

Zip Code

30627

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSX

Occupation

VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Transaction ID : SA11Al.110556

Amount of Each Receipt this Period

500.00

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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DAVID PHILLIPS**

Mailing Address 6422 FARMCREST LANE

City

HARRISBURG

State

PA

Zip Code

17111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PENNSYLVANIA ASSOC. OF REALTORS

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110423

Amount of Each Receipt this Period

1000.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C

C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110573

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**DANIEL PRIES**

Mailing Address 1026 ROCK CREEK RD

City

BRYN MAWR

State

PA

Zip Code

19010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE DEAL RACK

Occupation

OWNER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109891

Amount of Each Receipt this Period

500.00

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

1500.00

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**EDWARD PRODEHL****A.**

Mailing Address 104 AMBIANCE

City

BURR RIDGE

State

IL

Zip Code

60527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
COLDWELL BANKEROccupation  
REAL ESTATE BROKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11Al.110267

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC****B.**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11Al.110268

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**JEANNE RADSICK****C.**

Mailing Address 3613 PANORAMA DR

City

BAKERSFIELD

State

CA

Zip Code

93306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SCOTT TOBIAS REAL ESTATEOccupation  
REAL ESTATE BROKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11Al.110271

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110272

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**RAFFAELE & PUPPIO, LLP**

Mailing Address 19 W 3RD ST.

City

MEDIA

State

PA

Zip Code

19063

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109931

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**MICHAEL PUPPIO**

Mailing Address 19 W 3RD. ST.

City

MEDIA

State

PA

Zip Code

19062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RAFFAELE &amp; PUPPIO LLP

Occupation

PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109932

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**

PARTNERSHIP RAFFAELE &amp; PUPPIO, LLP

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

1000.00
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**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**COURTNEY BRANT RAMSAY****A.**

Mailing Address 11 FLOSSMORE DR

City

LAFAYETTE

State

LA

Zip Code

70508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARIES MARIHE

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		13		2015

Transaction ID : SA11AI.110090

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**GEOFFREY RAMSEY****B.**

Mailing Address 9621 PECAN SPRINGS CIRCLE

City

CHATTANOOGA

State

TN

Zip Code

37421

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RE/MAX

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110412

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC****C.**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110413

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PATRICIA RAWLINGS**

Mailing Address 1185 CACTUS DR

City

POCATELLO

State

ID

Zip Code

83204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CLARK REAL ESTATEOccupation  
REAL ESTATE

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110390

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110391

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**CHARLEY RAY**

Mailing Address 1216 LAKELAND DR

City

CONWAY

State

SC

Zip Code

29526

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RAY REALTY

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110286

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110287

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**THOMAS RAYL**

Mailing Address 7116 ROSE ANN PKWY

City

FT. WAYNE

State

IN

Zip Code

46804

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

Name of Employer

Occupation

FIRST NATIONAL

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110263

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110264

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

500.00
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# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MRS BEVERLY READ**

Mailing Address 17711 BALLINGER WAY NE

City

SEATTLE

State

WA

Zip Code

98155

FEC ID number of contributing federal political committee.

**C**

Name of Employer

WINDERMERE-LAKE FOREST PARK

Occupation

REALTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 29 / 2015

Transaction ID : SA11AI.110467

Amount of Each Receipt this Period

1000.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing federal political committee.

**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 29 / 2015

Transaction ID : SA11AI.110468

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**RICK REARDON**

Mailing Address 310 N WEST AVE

City

JACKSON

State

MI

Zip Code

49202

FEC ID number of contributing federal political committee.

**C**

Name of Employer

ERA REARDON

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 23 / 2015

Transaction ID : SA11AI.110414

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110415

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**SEAN M REILLY**

Mailing Address 826 KERPER ST

City

PHILADELPHIA

State

PA

Zip Code

19111

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

Name of Employer

ROSSCOMMON INTERNATIONAL

Occupation

PRESIDENT &amp; CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109920

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ANNE C REINKE**

Mailing Address 2803 RIDGE DR.

City

ALEXANDRIA

State

VA

Zip Code

22302

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

Name of Employer

CSX CORPORATION

Occupation

VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2015

Transaction ID : SA11AI.110557

Amount of Each Receipt this Period

500.00

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

1500.00

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ELLEN RENISH**

Mailing Address 4015 BITTERSWEET CIR

City

COLLEGEVILLE

State

PA

Zip Code

19426

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ERA CONTINENTAL REALTY

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110259

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110260

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**BONNIE ROBERTS-BURKE**

Mailing Address 1756 LANIER PL NW

City

WASHINGTON

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EVERS &amp; CO

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110421

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00
---------

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110422

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**JAMES C RODDEY**

Mailing Address 1413 OAK ST

City

OAKMONT

State

PA

Zip Code

15139

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

Name of Employer

BAKER TILLY

Occupation

PRINCIPAL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2015

Transaction ID : SA11AI.110203

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**JOSEPH F ROTH III**

Mailing Address 10 MAUREEN RD

City

HOLLAND

State

PA

Zip Code

18966

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

Name of Employer

JACOBS ENGINEERING

Occupation

SENIOR PROGRAM MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109905

Amount of Each Receipt this Period

250.00

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

1250.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 89 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CLIFFORD R ROWE**

Mailing Address 707 AMBERSON AVE.

City

PITTSBURGH

State

PA

Zip Code

15232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

P.J. DICK, INC

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2015

Transaction ID : SA11AI.110200

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**LOUIS D RUSCITTO**

Mailing Address 555 SUGAR CAMP RD

City

VENETIA

State

PA

Zip Code

15367

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ALCM

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2015

Transaction ID : SA11AI.110187

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**WILLIAM E RUSSELL**

Mailing Address 304 SAWMILL LN.

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSX CORPORATION

Occupation

VICE PRESIDENT, INTERNAL AUDIT

Receipt For: 2016

☒ 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
06		30		2015

Transaction ID : SA11AI.110555

Amount of Each Receipt this Period

500.00

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

5900.00

**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 90 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CYNTHIA M SANBORN****A.**

Mailing Address 2358 RIVERSIDE AVE.

VILLA #803

City

JACKSONVILLE

State

FL

Zip Code

32204

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSX TRANSPORTATION, INC.

Occupation

VICE PRESIDENT &amp; CHIEF TRANSPORTATION

Receipt For: 2016

☒ 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
06		03		2015

Transaction ID : SA11AI.110156

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

**SAUL EWING LLP**

Mailing Address 1500 MARKET ST

38TH FLOOR

City

PHILADELPHIA

State

PA

Zip Code

19102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109929

Amount of Each Receipt this Period

1000.00

NO ITEMIZATION NECESSARY

**C.**

Full Name (Last, First, Middle Initial)

**SCF CONSULTING, LLC**

Mailing Address 348 FRANKLIN CT

City

AMBLER

State

PA

Zip Code

19002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109926

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 91 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SCOTT FRED A**

Mailing Address 348 FRANKLIN CT

City

AMBLER

State

PA

Zip Code

19002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SCF CONSULTINGOccupation  
PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109927

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**

PARTNERSHIP SCF CONSULTING, LLC

Full Name (Last, First, Middle Initial)

**DOUGLAS H SCHWARTZ**

Mailing Address 1348 CONSTITUTION AVE NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		22		2015

Transaction ID : SA11AI.110359

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**SHAKOPEE MDEWAKANTON SIOUX COMMUNITY**

Mailing Address 2330 SIOUX TRAIL NW

City

PRIOR LAKE

State

MN

Zip Code

55372

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		29		2015

Transaction ID : SA11AI.110457

Amount of Each Receipt this Period

2700.00

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

2950.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**TYLER SHANK****A.**

Mailing Address 479 HERITAGE RUN

City

INDIANA

State

PA

Zip Code

15701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PENN MECHANICAL GROUP

Occupation

VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Transaction ID : SA11AI.110511

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**ANTHONY SHERR****B.**

Mailing Address 1188 REICHENBACH RD

City

COLLEGEVILLE

State

PA

Zip Code

19426

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAYERS MENNIES AND SHERR

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109888

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**WILLIAM J SHORB****C.**

Mailing Address 840 GLENWOOD DR.

City

YORK

State

PA

Zip Code

17403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LS LEE, INC.

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		13		2015

Transaction ID : SA11AI.110093

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PETER J. SHUDTZ****A.**

Mailing Address 3 FOXMERE DR.

City

RICHMOND

State

VA

Zip Code

23238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CSX CORPORATIONOccupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Transaction ID : SA11AI.110554

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JACQUELINE T SHULMAN****B.**

Mailing Address 1126 PENMORE PL

City

RYDAL

State

PA

Zip Code

19046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OBERMAYER MAXWELLOccupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109892

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**BRADFORD C SHUSMAN****C.**

Mailing Address 1500 LOCUST ST., APT. 2817

City

PHILADELPHIA

State

PA

Zip Code

19102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GOLDMAN SACHSOccupation  
INVESTMENT MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109889

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MICHAEL SIBILIA**

A.

Mailing Address 1949 COASTLAND AVE

City

SAN JOSE

State

CA

Zip Code

95125

FEC ID number of contributing federal political committee.

C

Name of Employer

KELLER WILLIAMS

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2015

Transaction ID : SA11AI.110265

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

B.

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2015

Transaction ID : SA11AI.110266

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**JOSEPH R SINGER**

C.

Mailing Address 22 BLANCOYD RD

City

MERION STATION

State

PA

Zip Code

19066

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2015

Transaction ID : SA11AI.109893

Amount of Each Receipt this Period

500.00

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

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

1000.00

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

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

FOR LINE NUMBER:

PAGE 95 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CAROLYN T. SIZEMORE**

A.

Mailing Address 332 N. LOMBARDY LOOP

City

SAINT JOHNS

State

FL

Zip Code

32259

FEC ID number of contributing federal political committee.

C

Name of Employer

CSX

Occupation

VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 03 / 2015

Transaction ID : SA11Al.110155

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**MR THOMAS SKIFFINGTON**

B.

Mailing Address 942 BLOOMING GLEN ROAD

City

PERKASIE

State

PA

Zip Code

18944

FEC ID number of contributing federal political committee.

C

Name of Employer

RE/MAX 440 PERKASIE

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 29 / 2015

Transaction ID : SA11Al.110471

Amount of Each Receipt this Period

1000.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

C.

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 29 / 2015

Transaction ID : SA11Al.110472

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JANICE SMARTO**

Mailing Address 605 PENNSYLVANIA BLVD

City

JEANNETTE

State

PA

Zip Code

15644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PRUDENTIAL PREFERRED REALTY

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Transaction ID : SA11Al.110473

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Transaction ID : SA11Al.110474

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**SHERRY SMITH**

Mailing Address 593 SNOW RD

City

DENISON

State

TX

Zip Code

75021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11Al.110417

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110418

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**DIANA B. SORFLEET**

Mailing Address 500 WATER ST. J400

City

JACKSONVILLE

State

FL

Zip Code

32202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

CSX

VP CHIEF OF HR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		26		2015

Transaction ID : SA11AI.110144

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**LAWRENCE W. SPENCER**

Mailing Address 328 HOLLYDALE CIR

City

PITTSBURGH

State

PA

Zip Code

15241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

MAX ENVIRONMENTAL

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2015

Transaction ID : SA11AI.110186

Amount of Each Receipt this Period

500.00

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

1000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CLAYTON J. STAHL**

Mailing Address 1321 WOODBRIDGE DR.

City

LATROBE

State

PA

Zip Code

15650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GULISER CONSTRUCTION

Occupation

CIVIL ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2015

Transaction ID : SA11Al.110199

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**MANUEL N. STAMATAKIS**

Mailing Address 1111 W. DEKALB PIKE

City

WAYNE

State

PA

Zip Code

19087

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAPITAL MANAGEMENT ENTERPRISES

Occupation

CHAIRMAN AND CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		08		2015

Transaction ID : SA11Al.109874

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**PETER H STEPHAICH**

Mailing Address 906 AMBERSON AVE

City

PITTSBURGH

State

PA

Zip Code

15232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUE DANUBE

Occupation

CHAIRMAN &amp; CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2015

Transaction ID : SA11Al.110201

Amount of Each Receipt this Period

1000.00

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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SANDRA STEVENS****A.**

Mailing Address PO BOX 61

City

GAINES

State

PA

Zip Code

16921

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110426

Amount of Each Receipt this Period

1000.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC****B.**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C

C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110427

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**SUZANNE SULLIVAN****C.**Mailing Address 1609 COASTAL HIGHWAY  
306 SOUTH

City

DEWEY BEACH

State

DE

Zip Code

19971

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCCANN CAPITOL ADVOCATES

Occupation

PRINCIPAL-GOVERNMENT RELATIONS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Transaction ID : SA11AI.110358

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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MICHAEL SUPINKA****A.**

Mailing Address 85 PINE CREST DR

City

INDIANA

State

PA

Zip Code

15701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SUPINKA &amp; SUPINKA, PC

Occupation

ATTORNEY

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2015

Transaction ID : SA11AI.110198

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**JERMAINE L. SWAFFORD****B.**

Mailing Address 225 TOR CT

City

MILTON

State

GA

Zip Code

30004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		22		2015

Transaction ID : SA11AI.110349

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**ANDREA TANENBAUM****C.**

Mailing Address 229 GLENMOOR RD.

City

GLADWYNE

State

PA

Zip Code

19035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109901

Amount of Each Receipt this Period

500.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**STEVEN TANENBAUM****A.**

Mailing Address 229 GLENMOOR RD.

City

GLADWYNE

State

PA

Zip Code

19035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DANCE PARTNER

Occupation

OWNER

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109900

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JOHN TIMMONS****B.**

Mailing Address 1730 RHODE ISLAND AVE NW

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE CORMAC GROUP

Occupation

LOBBYIST

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110441

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**LINDA TODD****C.**

Mailing Address 685 CRESTRIDGE DR

City

GRAND JUNCTION

State

CO

Zip Code

81506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ASSOCIATED BROKERS AND CONSULTANT;

Occupation

REAL ESTATE BROKER

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110275

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing federal political committee.

**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SA11AI.110276

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**VINCENT P TUTINO**

Mailing Address 3031 WILMINGTON ROAD

City

NEW CASTLE

State

PA

Zip Code

16105

FEC ID number of contributing federal political committee.

**C**

Name of Employer

LINDY PAVING INC.

Occupation

PRESIDENT

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 04 / 2015

Transaction ID : SA11AI.110189

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**VINCENT P TUTINO**

Mailing Address 3031 WILMINGTON ROAD

City

NEW CASTLE

State

PA

Zip Code

16105

FEC ID number of contributing federal political committee.

**C**

Name of Employer

LINDY PAVING INC.

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 04 / 2015

Transaction ID : SA11AI.110190

Amount of Each Receipt this Period

7300.00

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

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

10000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VINCENT P TUTINO****A.**

Mailing Address 3031 WILMINGTON ROAD

City

NEW CASTLE

State

PA

Zip Code

16105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LINDY PAVING INC.Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2015

Transaction ID : SA11Al.110446

Amount of Each Receipt this Period

-4600.00

**[MEMO ITEM]**

REATTRIBUTED TO TUTINO, MALISSA

Full Name (Last, First, Middle Initial)

**MALISSA TUTINO****B.**

Mailing Address 3031 WILMINGTON RD.

City

NEW CASTLE

State

PA

Zip Code

16105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2015

Transaction ID : SA11Al.110447

Amount of Each Receipt this Period

4600.00

**[MEMO ITEM]**

REATTRIBUTED FROM TUTINO, VINCENT

Full Name (Last, First, Middle Initial)

**MALISSA TUTINO****C.**

Mailing Address 3031 WILMINGTON RD.

City

NEW CASTLE

State

PA

Zip Code

16105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2015

Transaction ID : SA11Al.110448

Amount of Each Receipt this Period

-1900.00

**[MEMO ITEM]**

REDESIGNATED TO G-2016

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

0.00
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**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MALISSA TUTINO****A.**

Mailing Address 3031 WILMINGTON RD.

City

NEW CASTLE

State

PA

Zip Code

16105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2015

Transaction ID : SA11Al.110449

Amount of Each Receipt this Period

1900.00

**[MEMO ITEM]**

REDESIGNATED FROM P-2016

Full Name (Last, First, Middle Initial)

**MR CHARLES S VERDERY JR****B.**

Mailing Address 1605 N EDGEWOOD ST

City

ARLINGTON

State

VA

Zip Code

22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MONUMENT POLICY GROUP

Occupation

FOUNDER

Receipt For: 2016

☒ 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
06		29		2015

Transaction ID : SA11Al.110450

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**IRA WALLACE****C.**

Mailing Address 231 TOWER LANE

City

NARBERTH

State

PA

Zip Code

19072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEVYAS EYE ASSOCIATES

Occupation

PHYSICIAN

Receipt For: 2016

☒ 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
04		14		2015

Transaction ID : SA11Al.109883

Amount of Each Receipt this Period

500.00

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

1000.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MICHAEL E. WALSH****A.**

Mailing Address 7042 FORREST TRAILS RD

City

BUTLER

State

PA

Zip Code

16002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WALSH EQUIPMENTOccupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2015

Transaction ID : SA11Al.110178

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**MICHAEL J WARD****B.**

Mailing Address 1908 RIVER RD.

City

JACKSONVILLE

State

FL

Zip Code

32207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CSXOccupation  
CHAIRMAN AND CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2015

Transaction ID : SA11Al.110553

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**KAY WATSON****C.**

Mailing Address 7450 S CURTICE CT

City

LITTLETON

State

CO

Zip Code

80120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MBK WATSON PROPERTIESOccupation  
REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		10		2015

Transaction ID : SA11Al.110278

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**SUBTOTAL** of Receipts This Page (optional).....

4200.00

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110279

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**SUSAN H. WEINSTEIN**

Mailing Address 915 CORTLEIGH DR

City

YORK

State

PA

Zip Code

17402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109890

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**ROGER A WENTZ**

Mailing Address 8812 SOUTHWICK STREET

City

FAIRFAX

State

VA

Zip Code

22031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ATSSA

Occupation

PRESIDENT &amp; CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		04		2015

Transaction ID : SA11AI.110016

Amount of Each Receipt this Period

1000.00

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

1250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOAN WHEELER****A.**

Mailing Address 198 PINNACLE CIRCLE

City

SOMERSET

State

PA

Zip Code

15501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ 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
06		04		2015

Transaction ID : SA11AI.110202

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**BENJAMIN WILLNER****B.**

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 REALTY

Occupation

REAL ESTATE DEVELOPMENT

Receipt For: 2016

☒ 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
04		14		2015

Transaction ID : SA11AI.109895

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**SHERRIE WILLNER****C.**

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: 2016

☒ 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
04		14		2015

Transaction ID : SA11AI.109896

Amount of Each Receipt this Period

500.00

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

1500.00

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

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

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

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 (check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MICHAEL WINTERMUTE****A.**

Mailing Address 10 CEMETERY RD

City

STOCKTON

State

NJ

Zip Code

08559

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GAI CONSULTANTSOccupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		05		2015

Transaction ID : SA11AI.110177

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**PAUL WOERNER****B.**

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  
NONEOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109894

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JON WOLFORD****C.**

Mailing Address 13620 WEINSTEIN CT

City

CENTREVILLE

State

VA

Zip Code

20120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MCENEARNEY ASSOCIATESOccupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110376

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

31500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11AI.110377

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**REBECCA WOOD**

Mailing Address 1680 CANADAVILLE LOOP

City

EADS

State

TN

Zip Code

38028

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

Name of Employer

SUPERIOR TRAFFIC CONTROL

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		13		2015

Transaction ID : SA11AI.110094

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**TODD WOODBURN**

Mailing Address 11436 E KILLARNEY

City

WICHITA

State

KS

Zip Code

67206

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

Name of Employer

COLDWELL BANKER PLAZA

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110242

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC**SUBTOTAL** of Receipts This Page (optional).....

1500.00

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11Al.110243

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**V THOMAS WORRALL IV**

Mailing Address 6118 WOODMONT RD

City

ALEXANDRIA

State

VA

Zip Code

22307

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

Name of Employer

WHITMER &amp; WORRALL

Occupation

PRINCIPAL/GOVERNMENT CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		28		2015

Transaction ID : SA11Al.110154

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**LARRY J. YOUNGBLOOD**

Mailing Address 3451 SR 18

City

WAMPUM

State

PA

Zip Code

16157

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

Name of Employer

YOUNGBLOOD PAVING

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2015

Transaction ID : SA11Al.110182

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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LAWRENCE YUN**

Mailing Address 1000 N RANDOLPH ST

City

ARLINGTON

State

VA

Zip Code

22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NATIONAL ASSOCIATION OF REALTORS

Occupation

STAFF

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110269

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11AI.110270

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**  
EARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**RICHARD I ZAMARIN**

Mailing Address 1423 ROYAL OAK DR

City

BLUE BELL

State

PA

Zip Code

19422

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RSZ ORTHOPEDICS

Occupation

PHYSICIAN

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

Transaction ID : SA11AI.109887

Amount of Each Receipt this Period

500.00

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

1000.00

246400.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ACTION COMMITTEE FOR RURAL ELECTRIFICATION PAC**

Mailing Address 4301 WILSON BLVD

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.**C** C00002972

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

**Transaction ID : SA11C.110522**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. AIRCRAFT OWNERS PILOTS ASSOCIATION PAC**

Mailing Address 421 AVIATION WAY

City

FREDERICK

State

MD

Zip Code

21701

FEC ID number of contributing  
federal political committee.**C** C00131185

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2015

**Transaction ID : SA11C.110098**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. AIRCRAFT OWNERS PILOTS ASSOCIATION PAC**

Mailing Address 421 AVIATION WAY

City

FREDERICK

State

MD

Zip Code

21701

FEC ID number of contributing  
federal political committee.**C** C00131185

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

**Transaction ID : SA11C.110521**

Amount of Each Receipt this Period

2500.00

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

8500.00

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



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

 Use separate schedule(s)  
 for each category of the  
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 (check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AK STEEL CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 9227 CENTRE POINTE DRIVE

City	State	Zip Code
WEST CHESTER	OH	45069

FEC ID number of contributing federal political committee.

C C00290973

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		26		2015

Transaction ID : SA11C.110140

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ALLIED PILOTS ASSOCIATION PAC**

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

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		26		2015

Transaction ID : SA11C.110142

Amount of Each Receipt this Period

2500.00

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

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		10		2015

Transaction ID : SA11C.110218

Amount of Each Receipt this Period

2500.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ALPHA NATURAL RESOURCES PAC**

Mailing Address 999 CORPORATE BLVD

SUITE 300

City

LINTHICUM HEIGHTS

State

MD

Zip Code

21090

FEC ID number of contributing  
federal political committee.

**C** C00348524

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11C.110516

Amount of Each Receipt this Period

1000.00

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

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2015

Transaction ID : SA11C.110232

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**AMERICAN AIRLINES PAC**

Mailing Address 1101 17TH ST NW NO 600

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00107300

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2015

Transaction ID : SA11C.109994

Amount of Each Receipt this Period

2500.00

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

6000.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN CHEMISTRY COUNCIL PAC**

Mailing Address 700 2ND STREET, NE

ATTN: DONALD EVANS

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

**C** C00252338

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : SA11C.110458

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**AMERICAN COUNCIL OF ENGINEERING PAC**

Mailing Address 1015 15TH ST NW SUITE 802

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00010868

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11C.110526

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**AMERICAN COUNCIL OF ENGINEERING PAC**

Mailing Address 1015 15TH ST NW SUITE 802

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00010868

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11C.110527

Amount of Each Receipt this Period

2500.00

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

10000.00

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

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

 Use separate schedule(s)  
 for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN GAS ASSOCIATION PAC**

Mailing Address 400 N CAPITOL ST NW

STE 450

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00007450

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2015

Transaction ID : SA11C.110223

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**AMERICAN INSTITUTE OF STEEL CONSTRUCTION PAC**

Mailing Address ONE EAST WACKER DRIVE SUITE 700

City

CHICAGO

State

IL

Zip Code

60601

FEC ID number of contributing  
federal political committee.

C C00542308

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		29		2015

Transaction ID : SA11C.109975

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AMERICAN IRON AND STEEL INSTITUTE POLITICAL ACTION COMMITTEE (STEEL PAC)**

Mailing Address 1140 CONNECTICUT AVENUE, NW

SUITE 705

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C C00295097

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		04		2015

Transaction ID : SA11C.110011

Amount of Each Receipt this Period

2000.00

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  
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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN MOVING STORAGE ASSOC. PAC**

Mailing Address 1611 DUKE ST

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.**C** C00255257

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 22 / 2015

D D / Y Y Y Y Y

Y Y Y Y Y

Transaction ID : SA11C.110369

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AMERICAN PETROLEUM INSTITUTE PAC**

Mailing Address 1220 L STREET, NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00483677

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 10 / 2015

D D / Y Y Y Y Y

Y Y Y Y Y

Transaction ID : SA11C.110222

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AMERICAN SOCIETY OF TRAVEL AGENTS**

Mailing Address 1101 KING ST

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.**C** C00114108

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 10 / 2015

D D / Y Y Y Y Y

Y Y Y Y Y

Transaction ID : SA11C.110227

Amount of Each Receipt this Period

2500.00

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

4500.00

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

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

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

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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN TRAFFIC SAFETY SERVICES ASSOC. PAC**

Mailing Address 15 RIVERSIDE PARKWAY

SUITE 100

City

FREDERICKSBURG

State

VA

Zip Code

22406

FEC ID number of contributing  
federal political committee.

**C** C00281717

Name of Employer

Occupation

Receipt For: 2016

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 26 / 2015

Transaction ID : SA11C.110129

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ARCELORMITTAL USA LLC GOOD GOVERNMENT COMMITTEE**

Mailing Address 1808 EYE STREET NW

5TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

**C** C00104109

Name of Employer

Occupation

Receipt For: 2016

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2015

Transaction ID : SA11C.109986

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**ARCH COAL INC. PAC**

Mailing Address CITYPLACE ONE

City

ST. LOUIS

State

MO

Zip Code

63141

FEC ID number of contributing  
federal political committee.

**C** C00167668

Name of Employer

Occupation

Receipt For: 2016

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 08 / 2015

Transaction ID : SA11C.110204

Amount of Each Receipt this Period

2500.00

**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)  
for each category of the  
Detailed Summary Page

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(check only one)

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<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**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>ARKEMA PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>30</td> <td></td> <td>2015</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	06		30		2015	
M M M	/	D D D	/	Y Y Y Y Y Y									
06		30		2015									
Mailing Address 2000 MARKET ST		<b>Transaction ID : SA11C.110535</b>											
City PHILADELPHIA	State PA	Zip Code 19103											
FEC ID number of contributing federal political committee. <b>C</b> C00182980		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>1000.00</td> </tr> </table>											1000.00
										1000.00			
Name of Employer	Occupation												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>1000.00</td> </tr> </table>												1000.00
										1000.00			

<b>B.</b> Full Name (Last, First, Middle Initial) <b>ARNOLD AND PORTER LLP PARTNERS POLITICAL ACTION COMMITTEE</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>26</td> <td></td> <td>2015</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	05		26		2015	
M M M	/	D D D	/	Y Y Y Y Y Y									
05		26		2015									
Mailing Address 555 12TH STREET, NW		<b>Transaction ID : SA11C.110132</b>											
City WASHINGTON	State DC	Zip Code 20004											
FEC ID number of contributing federal political committee. <b>C</b> C00216895		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>2500.00</td> </tr> </table>											2500.00
										2500.00			
Name of Employer	Occupation												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>2500.00</td> </tr> </table>												2500.00
										2500.00			

<b>C.</b> Full Name (Last, First, Middle Initial) <b>ARTBA-PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>26</td> <td></td> <td>2015</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	05		26		2015	
M M M	/	D D D	/	Y Y Y Y Y Y									
05		26		2015									
Mailing Address 1219 28TH ST NW		<b>Transaction ID : SA11C.110141</b>											
City WASHINGTON	State DC	Zip Code 20007											
FEC ID number of contributing federal political committee. <b>C</b> C00118208		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>4000.00</td> </tr> </table>											4000.00
										4000.00			
Name of Employer	Occupation												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>5000.00</td> </tr> </table>												5000.00
										5000.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<table border="1"> <tr> <td colspan="10"></td> <td>7500.00</td> </tr> </table>											7500.00
										7500.00		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td colspan="10"></td> </tr> </table>											

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

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ASSOCIATED EQUIPMENT DISTRIBUTORS PAC**

A.

Mailing Address 121 HENRY ST N

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing federal political committee.

**C** C00010124

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SA11C.110225

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**ASSOCIATED GENERAL CONTRACTORS PAC (AGC PAC)**

B.

Mailing Address 2300 WILSON BLVD, SUITE 400

City

ARLINGTON

State

VA

Zip Code

22201

FEC ID number of contributing federal political committee.

**C** C00082917

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 04 / 2015

Transaction ID : SA11C.110169

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**ASSOCIATION OF OIL PIPE LINES PAC**

C.

Mailing Address 1808 EYE STREET NW  
SUITE 300

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing federal political committee.

**C** C00486779

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2015

Transaction ID : SA11C.110099

Amount of Each Receipt this Period

2700.00

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

10200.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BECHTEL PAC**

**A.**

Mailing Address 50 BEAL STREET

City

SAN FRANCISCO

State

CA

Zip Code

94119

FEC ID number of contributing  
federal political committee.

**C** C00103697

Name of Employer

Occupation

Receipt For: 2016

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 03 / 2015

**Transaction ID : SA11C.110163**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**BIKES BELONG COALITION LTD. POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 1928 PEARL STREET

City

BOULDER

State

CO

Zip Code

80302

FEC ID number of contributing  
federal political committee.

**C** C00372862

Name of Employer

Occupation

Receipt For: 2016

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 20 / 2015

**Transaction ID : SA11C.110117**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**BOMBARDIER CORPORATION POLITICAL ACTION COMMITTEE**

**C.**

Mailing Address 2200 PENNSYLVANIA AVE NW, STE 660W

City

WASHINGTON

State

DC

Zip Code

20037

FEC ID number of contributing  
federal political committee.

**C** C00546473

Name of Employer

Occupation

Receipt For: 2016

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 07 / 2015

**Transaction ID : SA11C.110040**

Amount of Each Receipt this Period

1000.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BUCHANAN INGERSOLL & ROONEY PAC**

Mailing Address 1 OXFORD CENTER 20TH FLOOR

301 GRANT STREET

City

PITTSBURGH

State

PA

Zip Code

15219

FEC ID number of contributing federal political committee.

**C** C00195388

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 20 / 2015

Transaction ID : SA11C.110116

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**BUCHANAN INGERSOLL & ROONEY PAC**

Mailing Address 1 OXFORD CENTER 20TH FLOOR

301 GRANT STREET

City

PITTSBURGH

State

PA

Zip Code

15219

FEC ID number of contributing federal political committee.

**C** C00195388

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 04 / 2015

Transaction ID : SA11C.110173

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**CAESARS ENTERTAINMENT POLITICAL ACTION COMMITTEE**

Mailing Address ONE CAESARS PALACE DR

City

LAS VEGAS

State

NV

Zip Code

89109

FEC ID number of contributing federal political committee.

**C** C00239947

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 22 / 2015

Transaction ID : SA11C.110361

Amount of Each Receipt this Period

1000.00

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

4500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 123 OF 227

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CALGON CARBON CORPORATION PAC INC DBA CCC PAC OR CALGON CARBON PAC

**A.**

Mailing Address 400 CALGON CARBON DRIVE

City

PITTSBURGH

State

PA

Zip Code

15205

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

C00543876

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 04 / 2015D D / Y Y Y Y Y  
04 / 2015Y Y Y Y Y  
2015**Transaction ID : SA11C.110167**

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

**CARPENTERS' LEGISLATIVE IMPROVEMENT COMMITTEE PAC**

Mailing Address 101 CONSTITUTION AVE NW

City

WASHINGTON

State

DC

Zip Code

20001

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

C00001016

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2015D D / Y Y Y Y Y  
29 / 2015Y Y Y Y Y  
2015**Transaction ID : SA11C.109987**

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

**CARPENTERS' LEGISLATIVE IMPROVEMENT COMMITTEE PAC**

Mailing Address 101 CONSTITUTION AVE NW

City

WASHINGTON

State

DC

Zip Code

20001

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

C00001016

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2015D D / Y Y Y Y Y  
29 / 2015Y Y Y Y Y  
2015**Transaction ID : SA11C.109988**

Amount of Each Receipt this Period

5000.00

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

11000.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CDM SMITH INC. NATIONAL PAC**

Mailing Address 3021 JERMANTOWN ROAD  
SUITE 400

City	State	Zip Code
FAIRFAX	VA	22030

FEC ID number of contributing  
federal political committee.

**C** C00398222

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2015

Transaction ID : SA11C.110171

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**CELANESE CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 222 WEST LAS COLINAS BLVD.  
SUITE 900N

City	State	Zip Code
DALLAS	TX	75039

FEC ID number of contributing  
federal political committee.

**C** C00084871

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2015

Transaction ID : SA11C.110534

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**CH2M HILL COMPANIES LTD PAC**

Mailing Address 9191 S JAMAICA STREET

City	State	Zip Code
ENGLEWOOD	CO	80112

FEC ID number of contributing  
federal political committee.

**C** C00143305

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		26		2015

Transaction ID : SA11C.110138

Amount of Each Receipt this Period

2500.00

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

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

7000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CHESAPEAKE ENERGY CORPORATION FEDERAL****A.**

Mailing Address PO BOX 18496

City

OKLAHOMA CITY

State

OK

Zip Code

73154

FEC ID number of contributing  
federal political committee.**C** C00389288

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2015

**Transaction ID : SA11C.110135**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**CHESAPEAKE ENERGY CORPORATION FEDERAL****B.**

Mailing Address PO BOX 18496

City

OKLAHOMA CITY

State

OK

Zip Code

73154

FEC ID number of contributing  
federal political committee.**C** C00389288

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2015

**Transaction ID : SA11C.110136**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**CHESAPEAKE ENERGY CORPORATION FEDERAL****C.**

Mailing Address PO BOX 18496

City

OKLAHOMA CITY

State

OK

Zip Code

73154

FEC ID number of contributing  
federal political committee.**C** C00389288

Name of Employer

Occupation

Receipt For: 2016

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2015

**Transaction ID : SA11C.110234**

Amount of Each Receipt this Period

1000.00

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

6000.00

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

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

 Use separate schedule(s)  
 for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CLIFFS NATURAL RESOURCES INC. PAC**

Mailing Address 1100 SUPERIOR AVENUE

ROOM 1500

City

CLEVELAND,

State

OH

Zip Code

44114

FEC ID number of contributing  
federal political committee.**C** C00039016

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2015

Transaction ID : SA11C.109976

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**COALPAC**

Mailing Address 101 CONSTITUTION AVE NW

SUITE 500 EAST

City

WASHINGTON

State

DC

Zip Code

20001

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

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2015

Transaction ID : SA11C.110220

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**COHEN & GRIGSBY, P.C., POLITICAL ACTION COMMITTEE**

Mailing Address 625 LIBERTY AVENUE

City

PITTSBURGH

State

PA

Zip Code

15222

FEC ID number of contributing  
federal political committee.**C** C00195362

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2015

Transaction ID : SA11C.110172

Amount of Each Receipt this Period

5000.00

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

8500.00

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

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

 Use separate schedule(s)  
 for each category of the  
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**COMMITTEE ON PIPE AND TUBE IMPORTS FEDERAL PAC****A.**

Mailing Address 900 SEVENTH STREET NW SUITE 500

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00436485

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		04		2015

**Transaction ID : SA11C.110005**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CON-WAY INC PAC****B.**Mailing Address 2211 OLD EARHART ROAD  
SUITE 100

City

ANN ARBOR

State

MI

Zip Code

48105

FEC ID number of contributing  
federal political committee.

C C00110759

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

**Transaction ID : SA11C.110519**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**CONCRETE REINFORCING STEEL INSTITUTE PAC (REBAR PAC)****C.**

Mailing Address 933 N PLUM GROVE RD

City

SCAUMBURG

State

IL

Zip Code

60173

FEC ID number of contributing  
federal political committee.

C C00565614

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		29		2015

**Transaction ID : SA11C.109977**

Amount of Each Receipt this Period

1000.00

**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)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CONSOL ENERGY INC PAC**

Mailing Address 1000 CONSOL ENERGY DR

City

CANONSBURG

State

PA

Zip Code

15317

FEC ID number of contributing  
federal political committee.

**C** C00279331

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

**06** / **04** / **2015**

**Transaction ID : SA11C.110170**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**CONSUMER ELECTRONICS ASSOCIATION PAC**

Mailing Address 1919 SOUTH EADS STREET

City

ARLINGTON

State

VA

Zip Code

22202

FEC ID number of contributing  
federal political committee.

**C** C00375048

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

**05** / **13** / **2015**

**Transaction ID : SA11C.110097**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**CONSUMER ELECTRONICS ASSOCIATION PAC**

Mailing Address 1919 SOUTH EADS STREET

City

ARLINGTON

State

VA

Zip Code

22202

FEC ID number of contributing  
federal political committee.

**C** C00375048

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

**06** / **03** / **2015**

**Transaction ID : SA11C.110160**

Amount of Each Receipt this Period

2500.00

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

10000.00

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



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

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CORROSION PAC**

Mailing Address 1440 S CREEK DRIVE

City

HOUSTON

State

TX

Zip Code

77084

FEC ID number of contributing  
federal political committee.

C

C00532366

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2015

Transaction ID : SA11C.110134

Amount of Each Receipt this Period

2500.00

A.

Full Name (Last, First, Middle Initial)

**CROWLEY MARITIME CORPORATION FEDERAL PAC**

Mailing Address 9487 REGENCY SQUARE BLVD.

City

JACKSONVILLE

State

FL

Zip Code

32225

FEC ID number of contributing  
federal political committee.

C

C00147231

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11C.110543

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

**DEERE AND COMPANY PAC (AKA JOHN DEERE PAC)**

Mailing Address ONE JOHN DEERE PLACE

City

MOLINE

State

IL

Zip Code

61265

FEC ID number of contributing  
federal political committee.

C

C00204099

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2015

Transaction ID : SA11C.110009

Amount of Each Receipt this Period

5000.00

C.

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

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

10000.00

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

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for each category of the  
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DEERE AND COMPANY PAC (AKA JOHN DEERE PAC)**

**A.**

Mailing Address ONE JOHN DEERE PLACE

City

MOLINE

State

IL

Zip Code

61265

FEC ID number of contributing  
federal political committee.

**C** C00204099

Name of Employer

Occupation

Receipt For: 2016

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 04 / 2015

**Transaction ID : SA11C.110010**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**DELTA AIR LINES PAC**

**B.**

Mailing Address 1212 NEW YORK AVE NW STE. 200

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00104802

Name of Employer

Occupation

Receipt For: 2016

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 04 / 2015

**Transaction ID : SA11C.110006**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**DOMINION PAC**

**C.**

Mailing Address 400 NORTH CAPITOL STREET NW  
SUITE 875

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00108209

Name of Employer

Occupation

Receipt For: 2016

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 29 / 2015

**Transaction ID : SA11C.109991**

Amount of Each Receipt this Period

2000.00

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

12000.00

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

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

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DOMINION PAC**

A.

Mailing Address 400 NORTH CAPITOL STREET NW  
SUITE 875

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing  
federal political committee.

**C** C00108209

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11C.110569

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**DTE ENERGY**

B.

Mailing Address 2000 2ND AVE

City	State	Zip Code
DETROIT	MI	48226

FEC ID number of contributing  
federal political committee.

**C** C00081547

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2015

Transaction ID : SA11C.110124

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**DUANE MORRIS LLP GOVERNMENT COMMITTEE**

C.

Mailing Address 30 17TH ST S

City	State	Zip Code
PHILADELPHIA	PA	19103

FEC ID number of contributing  
federal political committee.

**C** C00364133

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : SA11C.109902

Amount of Each Receipt this Period

1000.00

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

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

6000.00

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

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DUPONT GOOD GOVERNMENT FUND**

Mailing Address 1007 MARKET ST

City

WILMINGTON

State

DE

Zip Code

19898

FEC ID number of contributing  
federal political committee.

**C** C00171926

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

**06** / **29** / **2015**

**Transaction ID : SA11C.110460**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ENTERPRISE HOLDINGS INC. PAC**

Mailing Address 600 CORPORATE PARK DR

City

SAINT LOUIS

State

MO

Zip Code

63105

FEC ID number of contributing  
federal political committee.

**C** C00219642

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

**06** / **30** / **2015**

**Transaction ID : SA11C.110539**

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

**EXELON CORPORATION PAC**

Mailing Address 101 CONSTITUTION AVENUE, NW  
 SUITE 400 EAST

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00141218

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

**06** / **30** / **2015**

**Transaction ID : SA11C.110528**

Amount of Each Receipt this Period

2500.00

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

6500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FAEGREBD PAC**

Mailing Address 300 N. MERIDIAN STREET  
SUITE 2700

City	State	Zip Code
INDIANAPOLIS	IN	46204

FEC ID number of contributing  
federal political committee.

**C** C00386904

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2015

Transaction ID : SA11C.109978

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**FIRST COMMONWEALTH FINANCIAL CORP PAC**

Mailing Address 22 6TH ST N  
PO BOX 400

City	State	Zip Code
INDIANA	PA	15701

FEC ID number of contributing  
federal political committee.

**C** C00348185

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2015

Transaction ID : SA11C.110165

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**FIRSTENERGY PAC**

Mailing Address 76 MAIN ST S

City	State	Zip Code
AKRON	OH	44308

FEC ID number of contributing  
federal political committee.

**C** C00140855

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2015

Transaction ID : SA11C.109985

Amount of Each Receipt this Period

1000.00

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

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

3000.00

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

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FLORIDA EAST COAST INDUSTRIES INC GOOD GOVERNMENT COMMITTEE (FECI PAC)

**A.**

Mailing Address 2855 LE JEUNE ROAD 4TH FLOOR

City

CORAL GABLES

State

FL

Zip Code

33134

FEC ID number of contributing  
federal political committee.

**C** C00544908

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SA11C.110542**

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

**FLUOR CORPORATION PAC**

Mailing Address 403 EAST CAPITOL ST SE

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

**C** C00034132

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 26 / 2015

**Transaction ID : SA11C.110143**

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

**FLUOR CORPORATION PAC**

Mailing Address 403 EAST CAPITOL ST SE

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

**C** C00034132

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 22 / 2015

**Transaction ID : SA11C.110370**

Amount of Each Receipt this Period

2500.00

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

7500.00

**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 PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**GANNETT FLEMING INC. PAC****A.**

Mailing Address PO BOX 67100

City

HARRISBURG

State

PA

Zip Code

17106

FEC ID number of contributing  
federal political committee.**C** C00141382

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 22 / 2015D D / Y Y Y Y  
22 / 2015Y Y Y Y  
2015**Transaction ID : SA11C.110363**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**GENERAL AVIATION MANUFACTURERS ASSOCIATION PAC****B.**

Mailing Address 1400 K STREET NW, SUITE 801

City

WAHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00014878

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 04 / 2015D D / Y Y Y Y  
04 / 2015Y Y Y Y  
2015**Transaction ID : SA11C.110004**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**GENERAL ELECTRIC COMPANY PAC****C.**Mailing Address 1299 PENNSYLVANIA AVE NW  
SUITE 1100

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C** C00024869

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 04 / 2015D D / Y Y Y Y  
04 / 2015Y Y Y Y  
2015**Transaction ID : SA11C.110007**

Amount of Each Receipt this Period

1000.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**GLOBAL BUSINESS TRAVEL ASSOCIATION PAC (BUSINESS TRAVEL PAC)**

**A.**

Mailing Address 123 N. PITT ST

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

**C** C00373910

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 22 / 2015

**Transaction ID : SA11C.110371**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**GOOGLE INC. NETPAC**

**B.**

Mailing Address 1101 NEW YORK AVENUE, NW  
SECOND FLOOR

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00428623

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 29 / 2015

**Transaction ID : SA11C.110462**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**HALLIBURTON PAC**

**C.**

Mailing Address 10200 BELLAIRE BLVD

City

HOUSTON

State

TX

Zip Code

77072

FEC ID number of contributing  
federal political committee.

**C** C00035691

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 26 / 2015

**Transaction ID : SA11C.110130**

Amount of Each Receipt this Period

2500.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**HALLIBURTON PAC**

Mailing Address 10200 BELLAIRE BLVD

City

HOUSTON

State

TX

Zip Code

77072

FEC ID number of contributing  
federal political committee.

C C00035691

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11C.110515

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

**HOLLAND AND KNIGHT COMMITTEE FOR EFFECTIVE GOVERNMENT**Mailing Address 800 17TH STREET, NW  
SUITE 1100

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

C C00171330

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11C.110524

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

**HONEYWELL INTERNATIONAL PAC**Mailing Address 101 CONSTITUTION AVE NW  
SUITE 500 W

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00096156

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2015

Transaction ID : SA11C.110108

Amount of Each Receipt this Period

2500.00

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

4500.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**INSTITUTE OF MAKERS OF EXPLOSIVES PAC****A.**

Mailing Address 1120 19TH ST NW

SUITE 310

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.**C** C00135590

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2015

**Transaction ID : SA11C.110133**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**INTERSTATE NATURAL GAS ASSOC. PAC****B.**

Mailing Address 10 G ST NE SUITE 700

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.**C** C00116145

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2015

**Transaction ID : SA11C.110226**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**IPAA WILDCATTERS FUND****C.**

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

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2015

**Transaction ID : SA11C.110158**

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JIM GERLACH FOR CONGRESS****A.**

Mailing Address PO BOX 87

City

UWCHLAND

State

PA

Zip Code

19480

FEC ID number of contributing federal political committee.

C C00372102

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2015

Transaction ID : SA11C.109993

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**JOY GLOBAL INC****B.**

Mailing Address PO BOX 554

City

MILWAUKEE

State

WI

Zip Code

53201

FEC ID number of contributing federal political committee.

C C00232546

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2015

Transaction ID : SA11C.110236

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**KELLEY DRYE & WARREN POLITICAL ACTION COMMITTEE****C.**

Mailing Address 3050 K STREET NW SUITE 400

City

WASHINGTON

State

DC

Zip Code

20007

FEC ID number of contributing federal political committee.

C C00301929

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11C.110531






Amount of Each Receipt this Period

2000.00

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

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

4500.00

 11a   
  11b   
  11c   
  11d   
  15

NAME OF COMMITTEE (In Full)  
**BILL SHUSTER FOR CONGRESS**

1000.00

7000.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MARATHON OIL CO PAC**

Mailing Address 5555 SAN FELIPE ST., STE. 4148

City

HOUSTON

State

TX

Zip Code

77056

FEC ID number of contributing  
federal political committee.

C C00040568

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11C.110520

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**MARKWEST ENERGY PARTNERS LP PAC**Mailing Address 1515 ARAPAHOE STREET  
TOWER 2 SUITE 700

City

DENVER

State

CO

Zip Code

80202

FEC ID number of contributing  
federal political committee.

C C00489468

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2015

Transaction ID : SA11C.110168

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**MARRIOTT INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 10400 FERNWOOD ROAD

City

BETHESDA

State

MD

Zip Code

20817

FEC ID number of contributing  
federal political committee.

C C00284810

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : SA11C.110367

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

FOR LINE NUMBER:  
(check only one)

A diagram showing a 2x6 grid of cells. The top row contains cells labeled 11a, 11b, 11c, and 11d. The bottom row contains cells labeled 12, 13a, 13b, 14, and 15. Cell 11c contains an 'X'.

NAME OF COMMITTEE (In Full)  
**BILL SHUSTER FOR CONGRESS**

FEC Schedule A (Form 3) (Revised 02/2009)

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NACD RESPONSIBLE DISTRIBUTION PAC**

Mailing Address 1555 WILSON BLVD

SUITE 700

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.

**C** C00379180

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 29 / 2015

Transaction ID : SA11C.110456

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**NACD RESPONSIBLE DISTRIBUTION PAC**

Mailing Address 1555 WILSON BLVD

SUITE 700

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.

**C** C00379180

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11C.110570

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**NATIONAL AIR TRAFFIC CONTROLLERS PAC**

Mailing Address 1325 MASSACHUSETTS AVE NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00238725

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SA11C.110224

Amount of Each Receipt this Period

1000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 144 OF 227

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL AIR TRAFFIC CONTROLLERS PAC****A.**

Mailing Address 1325 MASSACHUSETTS AVE NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00238725

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2015

**Transaction ID : SA11C.110336**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**NATIONAL BUSINESS AVIATION ASSOCIATION INC PAC (NBAA-PAC)****B.**

Mailing Address 1200 EIGHTEENTH ST NW SUITE 400

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.**C** C00319723

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2015

**Transaction ID : SA11C.110102**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**NATIONAL CATTLEMEN'S BEEF ASSOCIATION POLITICAL ACTION COMMITTEE (NCBA-PAC)****C.**

Mailing Address 9110 EAST NICHOLS AVENUE

City

CENTENNIAL

State

CO

Zip Code

80112

FEC ID number of contributing  
federal political committee.**C** C00028787

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2015

**Transaction ID : SA11C.110139**

Amount of Each Receipt this Period

2500.00

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

8500.00

**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 145 OF 227

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL FUEL GAS FEDERAL PAC**

Mailing Address 6363 MAIN STREET

City

WILLIAMSVILLE

State

NY

Zip Code

14221

FEC ID number of contributing  
federal political committee.

C C00083758

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2015

Transaction ID : SA11C.110231

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**NATIONAL MULTI HOUSING COUNCIL PAC**

Mailing Address 1850 M ST NW SUITE 540

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C C00130773

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11C.110533

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**NATIONAL OCEAN INDUSTRIES ASSOCIATION**

Mailing Address 1120 G ST NW SUITE 900

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C C00409565

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2015

Transaction ID : SA11C.110233

Amount of Each Receipt this Period

1000.00

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

7500.00

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 147 OF 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NEXTERA ENERGY PAC**

Mailing Address 700 UNIVERSE BLVD

PO BOX 14000

City

JUNO BEACH

State

FL

Zip Code

33408

FEC ID number of contributing  
federal political committee.

**C** C00064774

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2015

Transaction ID : SA11C.109995

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**NISOURCE INC. PAC**

Mailing Address 200 CIVIC CENTER DR

City

COLUMBUS

State

OH

Zip Code

43215

FEC ID number of contributing  
federal political committee.

**C** C00051979

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2015

Transaction ID : SA11C.109982

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**NISOURCE INC. PAC**

Mailing Address 200 CIVIC CENTER DR

City

COLUMBUS

State

OH

Zip Code

43215

FEC ID number of contributing  
federal political committee.

**C** C00051979

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2015

Transaction ID : SA11C.109983

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)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NRA-POLITICAL VICTORY FUND**

Mailing Address 11250 WAPLES MILL RD

City

FAIRFAX

State

VA

Zip Code

22030

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

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11C.110525

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**NUCOR CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 1915 REXFORD ROAD

City

CHARLOTTE

State

NC

Zip Code

28211

FEC ID number of contributing  
federal political committee.**C** C00379628

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2015

Transaction ID : SA11C.110100

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**OFFICE OF THE COMMISSIONER OF MAJOR LEAGUE BASEBALL POLITICAL ACTION COMMITTEE**

Mailing Address 1050 CONNECTICUT AVE NW STE 1100

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.**C** C00368142

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2015

Transaction ID : SA11C.110454

Amount of Each Receipt this Period

5000.00

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

9500.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**OFFSHORE MARINE SERVICE ASSOCIATION PAC**

Mailing Address 935 GRAAVIER STREET  
SUITE 2040

City	State	Zip Code
NEW ORLEANS	LA	70112

FEC ID number of contributing  
federal political committee.

**C** C00455584

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2015

Transaction ID : SA11C.110101

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**OLD CASTLE MATERIALS INC. PAC**

Mailing Address 101 CONSTITUTION AVE NW  
SUITE 600W

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing  
federal political committee.

**C** C00346353

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : SA11C.110459

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**OLD DOMINION FREIGHT LINE INC POLITICAL ACTION COMMITTEE (OLD DOMINION PAC)**

Mailing Address 500 OLD DOMINION WAY

City	State	Zip Code
THOMASVILLE	NC	27360

FEC ID number of contributing  
federal political committee.

**C** C00496836

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2015

Transaction ID : SA11C.110008

Amount of Each Receipt this Period

2500.00

**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)  
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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. OUTBACK STEAKHOUSE INC (BLOOMIN' BRANDS) PAC**

Mailing Address 2202 WESTSHORE BLVD FL 5 N

City	State	Zip Code
TAMPA	FL	33607

FEC ID number of contributing  
federal political committee.**C** C00253153

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		08		2015

**Transaction ID : SA11C.110206**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. OWNER OPERATOR INDEPENDENT DRIVERS**Mailing Address 122 C ST NW  
SUITE 520

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing  
federal political committee.**C** C00236778

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		23		2015

**Transaction ID : SA11C.110372**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. OXYPAC**

Mailing Address 10889 WILSHIRE BLVD

City	State	Zip Code
LOS ANGELES	CA	90024

FEC ID number of contributing  
federal political committee.**C** C00083857

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2015

**Transaction ID : SA11C.110529**

Amount of Each Receipt this Period

1000.00

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

4000.00

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(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

NAME OF COMMITTEE (In Full)  
**BILL SHUSTER FOR CONGRESS**

1000.00

2500.00

5000.00

8500.00

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

Use separate schedule(s)  
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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PG&E CORPORATION EMPLOYEES ENERGY PAC**

Mailing Address 77 BEALE STREET

PO BOX 770000 B29H

City

SAN FRANCISCO

State

CA

Zip Code

94177

FEC ID number of contributing  
federal political committee.

**C** C00177469

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2015

Transaction ID : SA11C.109984

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**PG&E CORPORATION EMPLOYEES ENERGY PAC**

Mailing Address 77 BEALE STREET

PO BOX 770000 B29H

City

SAN FRANCISCO

State

CA

Zip Code

94177

FEC ID number of contributing  
federal political committee.

**C** C00177469

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 03 / 2015

Transaction ID : SA11C.110157

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**PHILLIPS 66 PAC**

Mailing Address 670 ADAMS BUILDING

411 SOUTH KEELER AVENUE

City

BARTLESVILLE

State

OK

Zip Code

74003

FEC ID number of contributing  
federal political committee.

**C** C00513549

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 23 / 2015

Transaction ID : SA11C.110373

Amount of Each Receipt this Period

2500.00

**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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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PORTLAND CEMENT ASSOCIATION, INC. PAC**

A.

Mailing Address 500 NEW JERSEY AVE NW  
SEVENTH FLOOR

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing  
federal political committee.

**C** C00237065

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		07		2015

Transaction ID : SA11C.110038

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**POWER PAC OF EDISON ELECTRIC INSTITUTE**

B.

Mailing Address 701 PENNSYLVANIA AVE NW

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing  
federal political committee.

**C** C00095869

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2015

Transaction ID : SA11C.110096

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**PPG BETTER GOVERNMENT TEAM**

C.

Mailing Address ONE PPG PLACE

City	State	Zip Code
PITTSBURGH	PA	15272

FEC ID number of contributing  
federal political committee.

**C** C00034298

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2015

Transaction ID : SA11C.110121

Amount of Each Receipt this Period

4500.00

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

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

9000.00

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

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for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PPG BETTER GOVERNMENT TEAM**

Mailing Address ONE PPG PLACE

City

PITTSBURGH

State

PA

Zip Code

15272

FEC ID number of contributing  
federal political committee.

**C** C00034298

Name of Employer

Occupation

Receipt For: 2016

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

5500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 20 / 2015

Transaction ID : SA11C.110122

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**PPL PEOPLE FOR GOOD GOVT PAC**

Mailing Address TWO NORTH NINTH ST

City

ALLENTOWN

State

PA

Zip Code

18101

FEC ID number of contributing  
federal political committee.

**C** C00228106

Name of Employer

Occupation

Receipt For: 2016

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11C.110530

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**PSC H2O**

Mailing Address 762 LANCASTER AVE W

City

BRYN MAWR

State

PA

Zip Code

19010

FEC ID number of contributing  
federal political committee.

**C** C00340455

Name of Employer

Occupation

Receipt For: 2016

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 14 / 2015

Transaction ID : SA11C.109928

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  
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(check only one)

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NAME OF COMMITTEE (In Full)  
**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**QUALCOMM INCORPORATED POLITICAL ACTION COMMITTEE (QPAC)**

Mailing Address 1730 PENNSYLVANIA AVE. NW  
 SUITE 850

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C** C00339085

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2015

Transaction ID : SA11C.110221

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**RAYONIER INC. GOOD GOVERNMENT COMMITTEE**

Mailing Address 1301 RIVERPLACE BLVD.  
 SUITE 2300

City JACKSONVILLE	State FL	Zip Code 32207
----------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C** C00451757

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2015

Transaction ID : SA11C.110362

Amount of Each Receipt this Period

1500.00

**C.** Full Name (Last, First, Middle Initial)  
**RBS CITIZENS FINANCIAL GROUP, INC. POLITICAL COMMITTEE (RBS CITIZENS PAC)**

Mailing Address C/O KENNETH W. ROBINSON, TREASURER  
 ONE CITIZENS PLAZA, 5TH FLOOR

City PROVIDENCE	State RI	Zip Code 02903
--------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C** C00307249

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 14 / 2015

Transaction ID : SA11C.109925

Amount of Each Receipt this Period

1000.00

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RITE AID CORPORATION POLITICAL ACTION COMMITTEE****A.**

Mailing Address 30 HUNTER LANE

City

CAMP HILL

State

PA

Zip Code

17011

FEC ID number of contributing  
federal political committee.

C C00104083

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2015

Transaction ID : SA11C.110517

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ROCKWELL COLLINS EMPLOYEE PAC****B.**

Mailing Address 1300 WILSON BLVD. STE. 200

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.

C C00365684

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		22		2015

Transaction ID : SA11C.110365

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**RURAL CELLULAR ASSOCIATION POLITICAL ACTION COMMITTEE****C.**

Mailing Address 805 15TH ST NW STE 401

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		29		2015

Transaction ID : SA11C.110453

Amount of Each Receipt this Period

500.00

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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RYDER SYSTEM INC. EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address 11690 NW 105TH STREET

City  
MIAMIState  
FLZip Code  
33178FEC ID number of contributing  
federal political committee.

C C00088435

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : SA11C.110368

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**SABRE INC**

Mailing Address 1101 17TH ST NW SUITE 602

City  
WASHINGTONState  
DCZip Code  
20036FEC ID number of contributing  
federal political committee.

C C00325811

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2015

Transaction ID : SA11C.110205

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**SAIC VOLUNTARY PAC**Mailing Address 2111 WILSON BOULEVARD  
SUITE 1110City  
ARLINGTONState  
VAZip Code  
22201FEC ID number of contributing  
federal political committee.

C C00300418

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2015

Transaction ID : SA11C.110104

Amount of Each Receipt this Period

1000.00

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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SALTCHUK RESOURCES INC. PAC**

**A.**

Mailing Address 32001 32ND AVE S STE 200

City

FEDERAL WAY

State

WA

Zip Code

98001

FEC ID number of contributing  
federal political committee.

**C** C00411694

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 03 / 2015

**Transaction ID : SA11C.110162**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**SCHEIDER NATIONAL INC. TRANS PAC**

**B.**

Mailing Address 3101 S PACKERLAND DR.

City

GREEN BAY

State

WI

Zip Code

54305

FEC ID number of contributing  
federal political committee.

**C** C00563924

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2015

**Transaction ID : SA11C.110229**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**SHEET METAL AND AIR CONDITIONING CONTRACTORS POLITICAL ACTION COMMITTEE**

**C.**

Mailing Address 4201 LAFAYETTE CENTER DRIVE

City

CHANTILLY

State

VA

Zip Code

20151

FEC ID number of contributing  
federal political committee.

**C** C00013961

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 03 / 2015

**Transaction ID : SA11C.110164**

Amount of Each Receipt this Period

2500.00

**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)  
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<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**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>SIEMENS CORPORATION PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>30</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	06		30		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
06		30		2015									
Mailing Address 601 PENNSYLVANIA AVENUE NW NORTH BUILDING - SUITE 1100		<b>Transaction ID : SA11C.110544</b>											
City WASHINGTON State DC Zip Code 20004	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table>								1000.00				
					1000.00								
FEC ID number of contributing federal political committee. <b>C</b> C00353797													
Name of Employer Occupation													
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>3500.00</td> </tr> </table>							3500.00				
					3500.00								
<b>B.</b> Full Name (Last, First, Middle Initial) <b>SOLVAY AMERICA INC EMPLOYEE POLITICAL FUND (SOLVAY AMERICA PAC)</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>30</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	06		30		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
06		30		2015									
Mailing Address 3333 RICHMOND AVENUE		<b>Transaction ID : SA11C.110536</b>											
City HOUSTON State TX Zip Code 77098	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table>								1000.00				
					1000.00								
FEC ID number of contributing federal political committee. <b>C</b> C00520254													
Name of Employer Occupation													
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table>							1000.00				
					1000.00								
<b>C.</b> Full Name (Last, First, Middle Initial) <b>SPECTRA ENERGY DCP PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>29</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	06		29		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
06		29		2015									
Mailing Address 5400 WESTHEIMER CT		<b>Transaction ID : SA11C.110461</b>											
City HOUSTON State TX Zip Code 77056	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>2000.00</td> </tr> </table>								2000.00				
					2000.00								
FEC ID number of contributing federal political committee. <b>C</b> C00429662													
Name of Employer Occupation													
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>2000.00</td> </tr> </table>							2000.00				
					2000.00								
<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="5"></td> <td>4000.00</td> </tr> </table>							4000.00				
					4000.00								
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>											

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

Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SSAB AMERICAS PAC SSAB ENTERPRISES LLC**

**A.**

Mailing Address 801 WARRENVILLE RD SUITE 800

City	State	Zip Code
LISLE	IL	60532

FEC ID number of contributing  
federal political committee.

**C** C00513861

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2015

**Transaction ID : SA11C.110103**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**TEXAS INSTRUMENTS INCORPORATED POLITICAL ACTION COMMITTEE (TI PAC)**

**B.**

Mailing Address PO BOX 742496

City	State	Zip Code
DALLAS	TX	75374

FEC ID number of contributing  
federal political committee.

**C** C00007070

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2015

**Transaction ID : SA11C.110230**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**TEXTRON INC. PAC**

**C.**

Mailing Address PO BOX 878

City	State	Zip Code
PROVIDENCE	RI	02901

FEC ID number of contributing  
federal political committee.

**C** C00123612

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2015

**Transaction ID : SA11C.110041**

Amount of Each Receipt this Period

1000.00

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

3000.00

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



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

 Use separate schedule(s)  
 for each category of the  
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**THE BOEING COMPANY PAC**

Mailing Address 929 LONG BRIDGE DR

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.

C C00142711

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2015

Transaction ID : SA11C.110125

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**THE DOW CHEMICAL COMPANY EMPLOYEES PAC (DOWPAC)**

Mailing Address 2030 DOW CENTER

City

MIDLAND

State

MI

Zip Code

48674

FEC ID number of contributing  
federal political committee.

C C00074096

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2015

Transaction ID : SA11C.110105

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**THE DOW CHEMICAL COMPANY EMPLOYEES PAC (DOWPAC)**

Mailing Address 2030 DOW CENTER

City

MIDLAND

State

MI

Zip Code

48674

FEC ID number of contributing  
federal political committee.

C C00074096

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2015

Transaction ID : SA11C.110523

Amount of Each Receipt this Period

2500.00

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

4500.00

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

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

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**THE WILLIAMS COMPANIES INC PAC**

Mailing Address 1627 I STREET NW

SUITE 900

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

**C** C00040394

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2015

Transaction ID : SA11C.110228

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC**

Mailing Address 601 THIRTEENTH STREET NW

STE 910 S

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00542365

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 11 / 2015

Transaction ID : SA11C.110043

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC**

Mailing Address 601 THIRTEENTH STREET NW

STE 910 S

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00542365

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 29 / 2015

Transaction ID : SA11C.110463

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)  
**BILL SHUSTER FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**TRALAPAC (TRUCK RENTING AND LEASING ASSOCIATION PAC)**

Mailing Address **675 N WASHINGTON STREET**  
**SUITE 410**

City State Zip Code  
**ALEXANDRIA VA 22314**

FEC ID number of contributing  
federal political committee.

**C** **C00499400**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**2500.00**

Date of Receipt

**06 / 22 / 2015**

Transaction ID : **SA11C.110360**

Amount of Each Receipt this Period

**2500.00**

B. Full Name (Last, First, Middle Initial)  
**U.S. TRAVEL ASSOCIATION PAC**

Mailing Address **1100 NEW YORK AVENUE**  
**SUITE 450W**

City State Zip Code  
**WASHINGTON DC 20005**

FEC ID number of contributing  
federal political committee.

**C** **C00457754**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**5000.00**

Date of Receipt

**06 / 29 / 2015**

Transaction ID : **SA11C.110455**

Amount of Each Receipt this Period

**5000.00**

C. Full Name (Last, First, Middle Initial)  
**UNITED MINE WORKERS OF AMERICA - COAL MINERS POLITICAL ACTION COMMITTEE**

Mailing Address **18354 QUANTICO GATEWAY DR**  
**SUITE 200**

City State Zip Code  
**TRIANGLE VA 22172**

FEC ID number of contributing  
federal political committee.

**C** **C00013342**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**2500.00**

Date of Receipt

**06 / 30 / 2015**

Transaction ID : **SA11C.110532**

Amount of Each Receipt this Period

**2500.00**

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

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

**10000.00**

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

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**UNITED TECHNOLOGIES CORP PAC**

A.

Mailing Address 1101 PENNSYLVANIA AVE NW 10TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing federal political committee.

**C** C00035683

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2015

Transaction ID : SA11C.110095

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**UNITED TECHNOLOGIES CORP PAC**

B.

Mailing Address 1101 PENNSYLVANIA AVE NW 10TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing federal political committee.

**C** C00035683

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11C.110540

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**UNITED TECHNOLOGIES CORP PAC**

C.

Mailing Address 1101 PENNSYLVANIA AVE NW 10TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing federal political committee.

**C** C00035683

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11C.110541

Amount of Each Receipt this Period

2500.00

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

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

7500.00

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

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for each category of the  
Detailed Summary Page

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(check only one)

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<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)  
**UNITED TRANSPORTATION UNION PAC**  
Mailing Address 24950 COUNTRY CLUB BLVD-STE 340

City State Zip Code  
NORTH OLMSTED OH 44070

FEC ID number of contributing  
federal political committee.

**C** C00001636

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 22 2015

Transaction ID : SA11C.110364

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**UPSPAC**  
Mailing Address 55 GLENLAKE PKWY NE

City State Zip Code  
ATLANTA GA 30328

FEC ID number of contributing  
federal political committee.

**C** C00064766

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 29 2015

Transaction ID : SA11C.109992

Amount of Each Receipt this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
**VERIZON COMMUNICATION INC GOOD GOVT**  
Mailing Address 1300 I ST NW  
SUITE 400 W

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00186288

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 23 2015

Transaction ID : SA11C.110375

Amount of Each Receipt this Period

1000.00

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

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

7000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WASHINGTON GAS LIGHT COMPANY PAC****A.**

Mailing Address 101 CONSTITUTION AVE. NW 3RD FL

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00102152

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2015

**Transaction ID : SA11C.110374**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**WERNER ENTERPRISES INC POLITICAL ACTION COMMITTEE****B.**

Mailing Address 14507 FRONTIER ROAD

City

OMAHA

State

NE

Zip Code

68138

FEC ID number of contributing  
federal political committee.**C** C00236034

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2015

**Transaction ID : SA11C.110131**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**WHITE ROSE PAC****C.**

Mailing Address PO BOX 15040

City

YORK

State

PA

Zip Code

17405

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

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2015

**Transaction ID : SA11C.110174**

Amount of Each Receipt this Period

1000.00

PERMISSIBLE FUNDS

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 167 OF 227

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WPX ENERGY, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 801 PENNSYLVANIA AVE. NW

SUITE 315

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C** C00502518

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2015

Transaction ID : SA11C.110161

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.**

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

Full Name (Last, First, Middle Initial)

**C.**

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).....

1000.00

344700.00

# **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 168 OF 227

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" 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)  
**CHOWDER AND MARCHING CLUB**

Mailing Address PO BOX 15376

City	State	Zip Code
WASHINGTON	DC	20003

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1683.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	16	/	2015

Transaction ID : SA14.110337

Amount of Each Receipt this Period

1683.00

OFFSET TO 1/13/2015 AMERICAN EXPRESS  
PAYMENT PLEASE SEE MEMO TEXT

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

Mailing Address 715 LEXINGTON AVENUE

City	State	Zip Code
ALTOONA	PA	16601

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

579.81

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	27	/	2015

Transaction ID : SA14.109974

Amount of Each Receipt this Period

579.81

REFUND

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

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

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

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

2262.81

2262.81



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 169 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. 814 CONSULTING LLC**

Mailing Address 5827 COLFAX AVE.

City	State	Zip Code
ALEXANDRIA	VA	22311

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

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)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2015

Amount of Each Disbursement this Period

8218.45
---------

Transaction ID : SB17.109909

**B. 814 CONSULTING LLC**

Mailing Address 5827 COLFAX AVE.

City	State	Zip Code
ALEXANDRIA	VA	22311

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

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)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

7239.84
---------

Transaction ID : SB17.110030

**C. 814 CONSULTING LLC**

Mailing Address 5827 COLFAX AVE.

City	State	Zip Code
ALEXANDRIA	VA	22311

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

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)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

7145.74
---------

Transaction ID : SB17.110297

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

22604.03

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ACE SELF STORAGE**

Mailing Address 300 ORCHARD AVE.

City	State	Zip Code
ALTOONA	PA	16602

Purpose of Disbursement  
STORAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2015

Amount of Each Disbursement this Period

291.50
--------

Transaction ID : SB17.109799

**B. ADP**

Mailing Address 1 ADP BLVD

City	State	Zip Code
ROSELAND	NJ	07068

Purpose of Disbursement  
PAYROLL SERVICE FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2015

Amount of Each Disbursement this Period

110.00
--------

Transaction ID : SB17.109838

**C. ADP**

Mailing Address 1 ADP BLVD

City	State	Zip Code
ROSELAND	NJ	07068

Purpose of Disbursement  
PAYROLL SERVICE FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2015

Amount of Each Disbursement this Period

7.00
------

Transaction ID : SB17.109873

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

408.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 1 ADP BLVD

City	State	Zip Code
ROSELAND	NJ	07068

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2015

Amount of Each Disbursement this Period

2791.56
---------

Transaction ID : SB17.110000

**B. MS. JENNIFER MEARKLE**

Mailing Address 3022 BROAD AVE

City	State	Zip Code
ALTOONA	PA	16601

Purpose of Disbursement  
SALARY

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2015

Amount of Each Disbursement this Period

171.18
--------

Transaction ID : SB17.110069

[MEMO ITEM]

**C. MR. WILLIAM STRAESSER**

Mailing Address PO BOX 1023

City	State	Zip Code
ALTOONA	PA	16603

Purpose of Disbursement  
SALARY

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2015

Amount of Each Disbursement this Period

2620.38
---------

Transaction ID : SB17.110070

[MEMO ITEM]

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

2791.56

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 172 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 1 ADP BLVD

City	State	Zip Code
ROSELAND	NJ	07068

Purpose of Disbursement  
PAYROLL TAXES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2015

Amount of Each Disbursement this Period

1028.12
---------

Transaction ID : SB17.110001

**B. ADP**

Mailing Address 1 ADP BLVD

City	State	Zip Code
ROSELAND	NJ	07068

Purpose of Disbursement  
PAYROLL FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2015

Amount of Each Disbursement this Period

110.00
--------

Transaction ID : SB17.110044

**C. ADP**

Mailing Address 1 ADP BLVD

City	State	Zip Code
ROSELAND	NJ	07068

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2015

Amount of Each Disbursement this Period

2791.55
---------

Transaction ID : SB17.110210

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

3929.67

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MS. JENNIFER MEARKLE**

Mailing Address 3022 BROAD AVE

City	State	Zip Code
ALTOONA	PA	16601

Purpose of Disbursement  
SALARY

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 27 / 2015

Amount of Each Disbursement this Period

171.18
--------

Transaction ID : SB17.110504

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. MR. WILLIAM STRAESSER**

Mailing Address PO BOX 1023

City	State	Zip Code
ALTOONA	PA	16603

Purpose of Disbursement  
SALARY

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 27 / 2015

Amount of Each Disbursement this Period

2620.37
---------

Transaction ID : SB17.110505

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 1 ADP BLVD

City	State	Zip Code
ROSELAND	NJ	07068

Purpose of Disbursement  
PAYROLL TAXES

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 27 / 2015

Amount of Each Disbursement this Period

1028.13
---------

Transaction ID : SB17.110211

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

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

1028.13

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 1 ADP BLVD

City	State	Zip Code
ROSELAND	NJ	07068

Purpose of Disbursement  
PAYROLL FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2015

Amount of Each Disbursement this Period

7.00
------

Transaction ID : SB17.110212

**B. ADP**

Mailing Address 1 ADP BLVD

City	State	Zip Code
ROSELAND	NJ	07068

Purpose of Disbursement  
PAYROLL FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Amount of Each Disbursement this Period

110.00
--------

Transaction ID : SB17.110213

**C. ADP**

Mailing Address 1 ADP BLVD

City	State	Zip Code
ROSELAND	NJ	07068

Purpose of Disbursement  
PAYROLL FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Disbursement this Period

7.00
------

Transaction ID : SB17.110501

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

124.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 1 ADP BLVD

City	State	Zip Code
ROSELAND	NJ	07068

Purpose of Disbursement  
PAYROLL TAXES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Amount of Each Disbursement this Period

1	0	2	8	.	1	2
---	---	---	---	---	---	---

Transaction ID : SB17.110502

**B. ADP**

Mailing Address 1 ADP BLVD

City	State	Zip Code
ROSELAND	NJ	07068

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Amount of Each Disbursement this Period

2	7	9	1	.	5	6
---	---	---	---	---	---	---

Transaction ID : SB17.110503

**C. MR. WILLIAM STRAESSER**

Mailing Address PO BOX 1023

City	State	Zip Code
ALTOONA	PA	16603

Purpose of Disbursement  
SALARY

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Amount of Each Disbursement this Period

2	6	2	0	.	3	8
---	---	---	---	---	---	---

Transaction ID : SB17.110506

[MEMO ITEM]

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

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

3819.68

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MS. JENNIFER MEARKLE**

Mailing Address 3022 BROAD AVE

City	State	Zip Code
ALTOONA	PA	16601

Purpose of Disbursement  
SALARY

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Disbursement this Period

171.18
--------

Transaction ID : SB17.110507

**[MEMO ITEM]****B. AMERICAN CHEMISTRY COUNCIL**

Mailing Address 700 2ND ST SW

City	State	Zip Code
WASHINGTON	DC	20002

Purpose of Disbursement  
EVENT FACILITY RENTAL

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Disbursement this Period

375.00
--------

Transaction ID : SB17.110339

**C. AMERICAN EXPRESS**

Mailing Address PO BOX 1270

City	State	Zip Code
NEWARK	NJ	07101

Purpose of Disbursement  
CC TRANSACTION FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2015

Amount of Each Disbursement this Period

7.95
------

Transaction ID : SB17.109868

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

382.95



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address PO BOX 1270

City	State	Zip Code
NEWARK	NJ	07101

Purpose of Disbursement  
CC TRANSACTION FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		06		2015

Amount of Each Disbursement this Period

196.28
--------

Transaction ID : SB17.109869

**B. AMERICAN EXPRESS**

Mailing Address PO BOX 1270

City	State	Zip Code
NEWARK	NJ	07101

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

17148.37
----------

Transaction ID : SB17.109962

**C. NEW YORK RACING ASSOCIATION**

Mailing Address 11000 ROCKAWAY BLVD

City	State	Zip Code
JAMAICA	NY	11420

Purpose of Disbursement  
EVENT TICKETS

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

300.00
--------

Transaction ID : SB17.109963

[MEMO ITEM]

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

17344.65
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ACQUA AL 2**

Mailing Address 212 7TH STREET SOUTHEAST

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

4597.65

Transaction ID : SB17.109966

**[MEMO ITEM]****B. PLAN B BURGER BAR**

Mailing Address 1530 14TH STREET NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

966.00

Transaction ID : SB17.109967

**[MEMO ITEM]****C. AMERICAN AIRLINES**

Mailing Address PO BOX 619612 MD 2400

City	State	Zip Code
DALLAS	TX	75261

Purpose of Disbursement  
AIRFARE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

4340.70

Transaction ID : SB17.109968

**[MEMO ITEM]****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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. US AIRWAYS**

Mailing Address 5620 UNIVERSITY PKWY

City	State	Zip Code
WINSTON SALEM	NC	27105

Purpose of Disbursement  
AIRFARE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

190.10
--------

Transaction ID : SB17.109969

**[MEMO ITEM]****B. THE PHOENICIAN**

Mailing Address 6000 EAST CAMELBACK ROAD

City	State	Zip Code
SCOTTSDALE	AZ	85251

Purpose of Disbursement  
LODGING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

2590.16
---------

Transaction ID : SB17.109970

**[MEMO ITEM]****C. TRANSTYLE**

Mailing Address 7525 E WILLIAMS DR # A

City	State	Zip Code
SCOTTSDALE	AZ	85255

Purpose of Disbursement  
TRANSPORTATION

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

280.32
--------

Transaction ID : SB17.109971

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RANDOR HOTEL**

Mailing Address 591 E LANCASTER AVE

City	State	Zip Code
WAYNE	PA	19087

Purpose of Disbursement  
LODGING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

1747.35

Transaction ID : SB17.109972

**[MEMO ITEM]****B. AMERICAN EXPRESS**

Mailing Address PO BOX 1270

City	State	Zip Code
NEWARK	NJ	07101

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		04		2015

Amount of Each Disbursement this Period

7.95

Transaction ID : SB17.110046

**C. AMERICAN EXPRESS**

Mailing Address PO BOX 1270

City	State	Zip Code
NEWARK	NJ	07101

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

7522.45

Transaction ID : SB17.110019

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

7530.40

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FREEDOMPAY INC**Mailing Address 17 CAMPUS BLVD  
SUITE 100

City NEWTOWN SQUARE State PA Zip Code 19073

Purpose of Disbursement  
MEETING EXPENSE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

213.15
--------

Transaction ID : SB17.110020

**[MEMO ITEM]****B. GOGOAIR.COM**Mailing Address 1250 NORTH ARLINGTON HEIGHTS RD  
SUITE 500

City ITASCA State IL Zip Code 60143

Purpose of Disbursement  
INTERNET

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

479.40
--------

Transaction ID : SB17.110021

**[MEMO ITEM]****C. OMNI WILLIAM PENN HOTEL**

Mailing Address 530 WILLIAM PENN PLACE

City PITTSBURGH State PA Zip Code 15219

Purpose of Disbursement  
LODGING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

119.42
--------

Transaction ID : SB17.110022

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. VALLOZZI'S**

Mailing Address 220 FIFTH AVENUE

City	State	Zip Code
PITTSBURGH	PA	15222

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

1751.46
---------

Transaction ID : SB17.110023

**[MEMO ITEM]****B. HILTON HARRISBURG AND TOWERS**

Mailing Address ONE NORTH SECOND STREET

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

2468.10
---------

Transaction ID : SB17.110024

**[MEMO ITEM]****C. POTBELLY**

Mailing Address 1275 1ST STREET NE BLD 1 STE. J

City	State	Zip Code
WASHINTON	DC	20002

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

94.11
-------

Transaction ID : SB17.110025

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. THE CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVENUE, NW

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
EVENT CATERING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

1295.05
---------

Transaction ID : SB17.110027

**[MEMO ITEM]****B. AMTRAK**

Mailing Address 400 N CAPITOL STREET NW

City	State	Zip Code
WASHINGTON	DC	20001

Purpose of Disbursement  
TRAVEL EXPENSE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

457.00
--------

Transaction ID : SB17.110028

**[MEMO ITEM]****C. SBRAGA**

Mailing Address 440 S BROAD ST

City	State	Zip Code
PHILADELPHIA	PA	19146

Purpose of Disbursement  
MEETING EXPENSE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

228.65
--------

Transaction ID : SB17.110029

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address PO BOX 1270

City	State	Zip Code
NEWARK	NJ	07101

Purpose of Disbursement  
CC TRANSACTION FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

72.40
-------

Transaction ID : SB17.110045

**B. AMERICAN EXPRESS**

Mailing Address PO BOX 1270

City	State	Zip Code
NEWARK	NJ	07101

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

8556.84
---------

Transaction ID : SB17.110298

**C. ACQUA AL 2**

Mailing Address 212 7TH STREET SOUTHEAST

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
EVENT CATERING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

2750.00
---------

Transaction ID : SB17.110299

[MEMO ITEM]

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

8629.24



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BOBBY VANS GRILLE**

Mailing Address 1201 NEW YORK AVENUE NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

819.66

Transaction ID : SB17.110300

**[MEMO ITEM]****B. DEL FRISCO GRILLE**

Mailing Address 50 ROCKEFELLER PLAZA

City	State	Zip Code
NEW YORK	NY	10020

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

290.00

Transaction ID : SB17.110301

**[MEMO ITEM]****C. MARRIOTT**

Mailing Address 296 STATE ST

City	State	Zip Code
BOSTON	MA	02109

Purpose of Disbursement  
LODGING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

552.50

Transaction ID : SB17.110302

**[MEMO ITEM]****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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TAYLOR GOURMET**

Mailing Address 485 K ST NW

City	State	Zip Code
WASHINGTON	DC	20001

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

495.21

Transaction ID : SB17.110303

[MEMO ITEM]

**B. UBER TECHNOLOGIES**

Mailing Address 800 MARKET STREET 7TH FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94115

Purpose of Disbursement  
TRAVEL EXPENSE

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

219.00

Transaction ID : SB17.110304

[MEMO ITEM]

**C. THE LIAISON CAPITOL**

Mailing Address 415 NEW JERSEY AVE NW

City	State	Zip Code
WASHINGTON	DC	20001

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

1394.24

Transaction ID : SB17.110305

[MEMO ITEM]

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UNITED AIRLINES**

Mailing Address 1200 E ALGONQUIN ROAD

City	State	Zip Code
ELK GROVE VILLAGE	IL	60007

Purpose of Disbursement  
AIRFARE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

668.20
--------

Transaction ID : SB17.110306

**[MEMO ITEM]****B. US AIRWAYS**

Mailing Address 5620 UNIVERSITY PKWY

City	State	Zip Code
WINSTON SALEM	NC	27105

Purpose of Disbursement  
AIRFARE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

987.20
--------

Transaction ID : SB17.110307

**[MEMO ITEM]****C. AMERICAN EXPRESS**

Mailing Address PO BOX 1270

City	State	Zip Code
NEWARK	NJ	07101

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Disbursement this Period

4603.19
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Transaction ID : SB17.110340

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

4603.19

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BULLFEATHERS**

Mailing Address 410 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Disbursement this Period

260.30
--------

Transaction ID : SB17.110343

[MEMO ITEM]

**B. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Disbursement this Period

792.35
--------

Transaction ID : SB17.110345

[MEMO ITEM]

**C. FACEBOOK**

Mailing Address 1 HACKER WAY

City	State	Zip Code
MENLO PARK	CA	94025

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Disbursement this Period

275.00
--------

Transaction ID : SB17.110347

[MEMO ITEM]

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LANDINI BROTHERS**

Mailing Address 115 KING STREET

City	State	Zip Code
ALEXANDIRA	VA	22314

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Disbursement this Period

2328.48
---------

Transaction ID : SB17.110350

**[MEMO ITEM]****B. MR. B'S BISTRO**

Mailing Address 201 ROYAL STREET

City	State	Zip Code
NEW ORLEANS	LA	70130

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Disbursement this Period

200.22
--------

Transaction ID : SB17.110352

**[MEMO ITEM]****C. VERIZON**

Mailing Address PO BOX 15026

City	State	Zip Code
ALBANY	NY	12212

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Disbursement this Period

285.27
--------

Transaction ID : SB17.110353

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 190 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address PO BOX 1270

City	State	Zip Code
NEWARK	NJ	07101

Purpose of Disbursement  
SEE MEMO ENTRY

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

5044.08
---------

Transaction ID : SB17.110487

**B. AMERICAN EXPRESS**

Mailing Address PO BOX 1270

City	State	Zip Code
NEWARK	NJ	07101

Purpose of Disbursement  
CC FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

203.30
--------

Transaction ID : SB17.110488

[MEMO ITEM]

**C. BULLFEATHERS**

Mailing Address 410 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
MEETING EXPRESS

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

43.50
-------

Transaction ID : SB17.110489

[MEMO ITEM]

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

5044.08

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 191 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. CAFE BERLIN**

Mailing Address 322 MASSACHUSETTS AVENUE NE

City	State	Zip Code
WASHINGTON	DC	20002

Purpose of Disbursement  
EVENT CATERING

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

2097.90
---------

Transaction ID : SB17.110490

**[MEMO ITEM]****B. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
MEETING EXPENSE

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

98.41
-------

Transaction ID : SB17.110491

**[MEMO ITEM]****C. GODADDY.COM**

Mailing Address 14455 N. HAYDEN RD STE 219

City	State	Zip Code
SCOTTSDALE	AZ	85260

Purpose of Disbursement  
DOMAIN NAME

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

308.40
--------

Transaction ID : SB17.110493

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. IL PIZZAIOLO**

Mailing Address 8 MARKET SQUARE

City	State	Zip Code
PITTSBURGH	PA	15222

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

453.78

Transaction ID : SB17.110494

**[MEMO ITEM]****B. JIMMY JOHNS**

Mailing Address 795 PHILADELPHIA ST.

City	State	Zip Code
INDIANA	PA	15701

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

648.18

Transaction ID : SB17.110495

**[MEMO ITEM]****C. POTBELLY**

Mailing Address 1275 1ST STREET NE BLD 1 STE. J

City	State	Zip Code
WASHINTON	DC	20002

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

117.59

Transaction ID : SB17.110496

**[MEMO ITEM]****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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SOTTO SOTTO**

Mailing Address 313 NORTH HIGHLAND AVE NE

City	State	Zip Code
ATLANTA	GA	30307

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

362.94
--------

Transaction ID : SB17.110497

**[MEMO ITEM]****B. TARGET**

Mailing Address 153 SIERRA DRIVE

City	State	Zip Code
ALTOONA	PA	16603

Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

33.90
-------

Transaction ID : SB17.110498

**[MEMO ITEM]****C. US AIRWAYS**

Mailing Address 5620 UNIVERSITY PKWY

City	State	Zip Code
WINSTON SALEM	NC	27105

Purpose of Disbursement  
AIRFARE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

352.10
--------

Transaction ID : SB17.110499

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. VERIZON**

Mailing Address PO BOX 15026

City	State	Zip Code
ALBANY	NY	12212

Purpose of Disbursement  
TELEPHONE

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

50.00
-------

Transaction ID : SB17.110500

**[MEMO ITEM]****B. ATLANTIC BROADBAND**

Mailing Address BOX 371801

City	State	Zip Code
PITTSBURGH	PA	15250

Purpose of Disbursement  
INTERNET SERVICE

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2015

Amount of Each Disbursement this Period

333.85
--------

Transaction ID : SB17.109800

**C. ATLANTIC BROADBAND**

Mailing Address BOX 371801

City	State	Zip Code
PITTSBURGH	PA	15250

Purpose of Disbursement  
INTERNET SERVICE

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

333.97
--------

Transaction ID : SB17.110031

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

667.82

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ATLANTIC BROADBAND**

Mailing Address BOX 371801

City	State	Zip Code
PITTSBURGH	PA	15250

Purpose of Disbursement  
INTERNET SERVICE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2015

Amount of Each Disbursement this Period

351.48
--------

Transaction ID : SB17.110294

**B. ATLANTIC BROADBAND**

Mailing Address BOX 371801

City	State	Zip Code
PITTSBURGH	PA	15250

Purpose of Disbursement  
INTERNET

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2015

Amount of Each Disbursement this Period

351.48
--------

Transaction ID : SB17.110326

**C. BEDFORD COUNTY GOP**

Mailing Address 255 GUNSIGHT PASS

City	State	Zip Code
IMLER	PA	16655

Purpose of Disbursement  
EVENT SPONSORSHIP

001

Category/  
Type

Candidate Name

**BEDFORD COUNTY GOP**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2015

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : SB17.110314

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

3702.96

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 196 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. BERKE FARAH LLP**

Mailing Address 2101 L STREET NW STE. 1000

City	State	Zip Code
WASHINGTON	DC	20037

Purpose of Disbursement  
LEGAL CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2015

Amount of Each Disbursement this Period

1500.00
---------

Transaction ID : SB17.109801

**B. BERKE FARAH LLP**

Mailing Address 2101 L STREET NW STE. 1000

City	State	Zip Code
WASHINGTON	DC	20037

Purpose of Disbursement  
LEGAL CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		04		2015

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : SB17.109998

**C. BERKE FARAH LLP**

Mailing Address 2101 L STREET NW STE. 1000

City	State	Zip Code
WASHINGTON	DC	20037

Purpose of Disbursement  
LEGAL CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		14		2015

Amount of Each Disbursement this Period

7500.00
---------

Transaction ID : SB17.110106

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

12000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BERKE FARAH LLP**

Mailing Address 2101 L STREET NW STE. 1000

City	State	Zip Code
WASHINGTON	DC	20037

Purpose of Disbursement  
LEGAL CONSULTING

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:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 08 / 2015

Amount of Each Disbursement this Period

1500.00
---------

Transaction ID : SB17.110315

**B. BERKE FARAH LLP**

Mailing Address 2101 L STREET NW STE. 1000

City	State	Zip Code
WASHINGTON	DC	20037

Purpose of Disbursement  
LEGAL CONSULTING

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:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 15 / 2015

Amount of Each Disbursement this Period

7500.00
---------

Transaction ID : SB17.110327

**C. BLAIR CO REPUBLICAN COMMITTEE**Mailing Address C/O BETH BRITZ  
1009 NEWRY LANE

City	State	Zip Code
DUNCANSVILLE	PA	16635

Purpose of Disbursement  
EVENT TICKETS

001

Category/  
Type

Candidate Name

**BLAIR CO REPUBLICAN COMMITTEE**

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:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 06 / 2015

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB17.109870

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

9500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 198 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. NANCY BULL**

Mailing Address 322 RIDGE AVENUE

City	State	Zip Code
WAYNESBORO	PA	17268

Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2015

Amount of Each Disbursement this Period

176.68
--------

Transaction ID : SB17.109806

**B. NANCY BULL**

Mailing Address 322 RIDGE AVENUE

City	State	Zip Code
WAYNESBORO	PA	17268

Purpose of Disbursement  
MILEAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2015

Amount of Each Disbursement this Period

79.52
-------

Transaction ID : SB17.109807

[MEMO ITEM]

**C. POSTMASTER**

Mailing Address 525 ALLEGHENY STREET

City	State	Zip Code
HOLLIDAYSBURG	PA	16648

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2015

Amount of Each Disbursement this Period

49.00
-------

Transaction ID : SB17.109808

[MEMO ITEM]

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

176.68
--------

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**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 199 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. ERIC BURGESSON**

Mailing Address 2403 N. UTAH ST.

City	State	Zip Code
ARLINGTON	VA	22207

Purpose of Disbursement  
OFFICE SUPPLIES NO ITEMIZATION NECESSARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2015

Amount of Each Disbursement this Period

175.86
--------

Transaction ID : SB17.110048

**B. CAMBRIA COUNTY REPUBLICAN PARTY**

Mailing Address 450 LURAY AVENUE

City	State	Zip Code
JOHSTOWN	PA	15904

Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

**CAMBRIA COUNTY REPUBLICAN PARTY**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2015

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB17.110328

**C. CENTRAL BLAIR RECREATION COMMISSION**

Mailing Address 2101 FIFTH AVENUE

City	State	Zip Code
ALTOONA	PA	16602

Purpose of Disbursement  
EVENT SPONSORSHIP

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

100.00
--------

Transaction ID : SB17.110478

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

775.86

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 200 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. CMDI**Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2015

Amount of Each Disbursement this Period

156.25
--------

Transaction ID : SB17.109866

**B. CMDI**Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2015

Amount of Each Disbursement this Period

99.75
-------

Transaction ID : SB17.109937

**C. CMDI**Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		21		2015

Amount of Each Disbursement this Period

30.50
-------

Transaction ID : SB17.110209

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

286.50



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 201 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. CMDI**Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2015

Amount of Each Disbursement this Period

74.00
-------

Transaction ID : SB17.110214

**B. CMDI**Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

152.62
--------

Transaction ID : SB17.110518

**C. COUNTERPOINT**

Mailing Address 416 W 13TH STREET SUITE 303

City NEW YORK State NY Zip Code 10014

Purpose of Disbursement  
STRATEGY CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		04		2015

Amount of Each Disbursement this Period

5000.00
---------

Transaction ID : SB17.109999

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

5226.62

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RANDOLPH DELAY**

Mailing Address 3331 BRIDGEBERRY LANE

City	State	Zip Code
HOUSTON	TX	77082

Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

1462.40
---------

Transaction ID : SB17.109950

**B. ENTERPRISE RENT-A-CAR**

Mailing Address 1525 KENWOOD AVENUE

City	State	Zip Code
ALEXANDRIA	VA	22302

Purpose of Disbursement  
CAR RENTAL

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

1462.40
---------

Transaction ID : SB17.109951

[MEMO ITEM]

**C. ELECTEKUSA**

Mailing Address PO BOX 23715

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2015

Amount of Each Disbursement this Period

29884.38
----------

Transaction ID : SB17.109802

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

31346.78

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ELECTEKUSA**

Mailing Address PO BOX 23715

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement  
SOFTWARE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

2307.79

Transaction ID : SB17.110032

**B. ELECTEKUSA**

Mailing Address PO BOX 23715

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement  
SOFTWARE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2015

Amount of Each Disbursement this Period

2328.05

Transaction ID : SB17.110316

**C. FIRST COMMONWEALTH BANK**Mailing Address CREDIT CARD DEPT  
PO BOX 0537

City	State	Zip Code
INDIANA	PA	15701

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

289.66

Transaction ID : SB17.109940

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

4925.50

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 204 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. SHEETZ INC**

Mailing Address 5700 SIXTH AVENUE

City	State	Zip Code
ALTOONA	PA	16602

Purpose of Disbursement  
TRAVEL EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

63.73
-------

Transaction ID : SB17.109941

**[MEMO ITEM]****B. FIRST COMMONWEALTH BANK**Mailing Address CREDIT CARD DEPT  
PO BOX 0537

City	State	Zip Code
INDIANA	PA	15701

Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		18		2015

Amount of Each Disbursement this Period

108.09
--------

Transaction ID : SB17.110110

**C. SHEETZ INC**

Mailing Address 5700 SIXTH AVENUE

City	State	Zip Code
ALTOONA	PA	16602

Purpose of Disbursement  
TRAVEL EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		18		2015

Amount of Each Disbursement this Period

65.00
-------

Transaction ID : SB17.110112

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

108.09
--------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 205 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. FIRST COMMONWEALTH BANK**Mailing Address CREDIT CARD DEPT  
PO BOX 0537

City INDIANA State PA Zip Code 15701

Purpose of Disbursement  
ANNUAL FEE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		18		2015

Amount of Each Disbursement this Period

15.00
-------

Transaction ID : SB17.110115

**B. FIRST COMMONWEALTH BANK**Mailing Address CREDIT CARD DEPT  
PO BOX 0537

City INDIANA State PA Zip Code 15701

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

391.50
--------

Transaction ID : SB17.110479

**C. VERIZON**

Mailing Address PO BOX 15026

City ALBANY State NY Zip Code 12212

Purpose of Disbursement  
TELEPHONE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

95.37
-------

Transaction ID : SB17.110480

[MEMO ITEM]

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

406.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 206 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. JIMMY JOHNS**

Mailing Address 795 PHILADELPHIA ST.

City	State	Zip Code
INDIANA	PA	15701

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

25.76
-------

Transaction ID : SB17.110482

[MEMO ITEM]

**B. SHEETZ INC**

Mailing Address 5700 SIXTH AVENUE

City	State	Zip Code
ALTOONA	PA	16602

Purpose of Disbursement  
TRAVEL EXPENSE

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

107.54
--------

Transaction ID : SB17.110484

[MEMO ITEM]

**C. FORD CREDIT**

Mailing Address BOX 220564

City	State	Zip Code
PITTSBURGH	PA	15257

Purpose of Disbursement  
CAMPAIGN VEHICLE LEASE

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2015

Amount of Each Disbursement this Period

410.77
--------

Transaction ID : SB17.109872

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

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

410.77

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 207 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. FORD CREDIT**

Mailing Address BOX 220564

City	State	Zip Code
PITTSBURGH	PA	15257

Purpose of Disbursement  
CAMPAIGN VEHICLE LEASE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2015

Amount of Each Disbursement this Period

410.77
--------

Transaction ID : SB17.110042

**B. FORD CREDIT**

Mailing Address BOX 220564

City	State	Zip Code
PITTSBURGH	PA	15257

Purpose of Disbursement  
CAMPAIGN VEHICLE LEASE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2015

Amount of Each Disbursement this Period

410.77
--------

Transaction ID : SB17.110216

**C. FRANKLIN CO REPUBLICAN COMMITTEE**

Mailing Address SUITE 293 SOUTH GATE MALL

City	State	Zip Code
CHAMBERSBURG	PA	17201

Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

**FRANKLIN CO REPUBLICAN COMMITTEE**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

1340.00
---------

Transaction ID : SB17.110033

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

2161.54

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 208 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. FRANKLIN FIRE COMPANY**

Mailing Address 158 WEST KING STREET

City	State	Zip Code
CHAMBERSBURG	PA	17201

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

750.00
--------

Transaction ID : SB17.109945

**B. HOUCK'S QUALITY SERVICES**

Mailing Address 191 CHERRYWOOD DR

City	State	Zip Code
ALTOONA	PA	16601

Purpose of Disbursement  
OFFICE EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

450.00
--------

Transaction ID : SB17.110034

**C. HUNTINGDON COUNTY GOP**

Mailing Address PO BOX 61

City	State	Zip Code
HUNTINGDON	PA	16652

Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2015

Amount of Each Disbursement this Period

225.00
--------

Transaction ID : SB17.109804

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

1425.00



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 209 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. SMITHFIELD VOLUNTEER FIRE COMPANY AUXILIARY**

Mailing Address 10 FIREHOUSE LANE

City	State	Zip Code
HUNTINGDON	PA	16652

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2015

Amount of Each Disbursement this Period

225.00
--------

Transaction ID : SB17.109805

**[MEMO ITEM]****B. JAFFA GUN RAFFLE**

Mailing Address PO BOX 1984

City	State	Zip Code
ALTOONA	PA	16603

Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2015

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : SB17.110330

**C. MR. SEAN JOYCE**

Mailing Address 1301 ALLEGHENY STREET

City	State	Zip Code
HOLLIDAYSBURG	PA	16648

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

119.84
--------

Transaction ID : SB17.109952

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

319.84

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 210 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. MR. SEAN JOYCE**

Mailing Address 1301 ALLEGHENY STREET

City	State	Zip Code
HOLLIDAYSBURG	PA	16648

Purpose of Disbursement  
SEE MEMO ENTRY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2015

Amount of Each Disbursement this Period

330.00
--------

Transaction ID : SB17.110331

**B. VERIZON**

Mailing Address PO BOX 15026

City	State	Zip Code
ALBANY	NY	12212

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2015

Amount of Each Disbursement this Period

330.00
--------

Transaction ID : SB17.110332

[MEMO ITEM]

**C. LAUREL HIGHLANDS COUNCIL BSA**

Mailing Address 201 W. HIGH STREET STE. 1

City	State	Zip Code
EBENSBURG	PA	15931

Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : SB17.110310

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

580.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LILLY & COMPANY**

Mailing Address 1005 CONGRESS AVE STE 910

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 20 / 2015

Amount of Each Disbursement this Period

6072.68
---------

Transaction ID : SB17.109947

**B. MAVERICK FINANCE**

Mailing Address 403 N SECOND STREET 2ND FL

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 06 / 2015

Amount of Each Disbursement this Period

4000.00
---------

Transaction ID : SB17.109871

**C. MAVERICK FINANCE**

Mailing Address 403 N SECOND STREET 2ND FL

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 20 / 2015

Amount of Each Disbursement this Period

100.00
--------

Transaction ID : SB17.109948

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

10172.68

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 212 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. MAVERICK FINANCE**

Mailing Address 403 N SECOND STREET 2ND FL

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

4483.53
---------

Transaction ID : SB17.110036

**B. MAVERICK FINANCE**

Mailing Address 403 N SECOND STREET 2ND FL

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		18		2015

Amount of Each Disbursement this Period

614.67
--------

Transaction ID : SB17.110114

**C. MAVERICK FINANCE**

Mailing Address 403 N SECOND STREET 2ND FL

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2015

Amount of Each Disbursement this Period

4000.00
---------

Transaction ID : SB17.110318

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

9098.20

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 213 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. MS. JENNIFER MEARKLE**

Mailing Address 3022 BROAD AVE

City	State	Zip Code
ALTOONA	PA	16601

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		18		2015

Amount of Each Disbursement this Period

40.32
-------

Transaction ID : SB17.110113

**B. NAUTICAL VENTURES LLC**

Mailing Address 16201 EAST MAIN STREET

City	State	Zip Code
CUT OFF	LA	70345

Purpose of Disbursement  
EVENT FACILITY RENTAL AND CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

767.50
--------

Transaction ID : SB17.110311

**C. PIRYX**

Mailing Address 144 2ND ST. 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2015

Amount of Each Disbursement this Period

247.50
--------

Transaction ID : SB17.110207

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

1055.32

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 144 2ND ST. 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
CC TRANSACTION FEES

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 15 / 2015

Amount of Each Disbursement this Period

45.00
-------

Transaction ID : SB17.110208

**B. S&T BANK**

Mailing Address 1100 LOGAN BLVD

City	State	Zip Code
ALTOONA	PA	16602

Purpose of Disbursement  
BANK FEES

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:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 01 / 2015

Amount of Each Disbursement this Period

50.00
-------

Transaction ID : SB17.109798

**C. S&T BANK**

Mailing Address 1100 LOGAN BLVD

City	State	Zip Code
ALTOONA	PA	16602

Purpose of Disbursement  
BANK FEES

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:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 02 / 2015

Amount of Each Disbursement this Period

30.00
-------

Transaction ID : SB17.109867

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

125.00



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 216 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. SHEETZ INC**

Mailing Address 5700 SIXTH AVENUE

Date of Disbursement

M M	D D	Y Y Y Y
06	16	2015

City	State	Zip Code
ALTOONA	PA	16602

Amount of Each Disbursement this Period

34.36
-------

Purpose of Disbursement  
TRAVEL EXPENSE

001

Transaction ID : SB17.110335

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. SOMERSET CO REPUBLICAN COMMITTEE**

Mailing Address PO BOX 401

Date of Disbursement

M M	D D	Y Y Y Y
06	08	2015

City	State	Zip Code
SOMERSET	PA	15501

Amount of Each Disbursement this Period

150.00
--------

Purpose of Disbursement  
EVENT TICKETS

001

Transaction ID : SB17.110319

Candidate Name

**SOMERSET CO REPUBLICAN COMMITTEE**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. STATE FARM INSURANCE**

Mailing Address 715 LEXINGTON AVENUE

Date of Disbursement

M M	D D	Y Y Y Y
04	14	2015

City	State	Zip Code
ALTOONA	PA	16601

Amount of Each Disbursement this Period

634.61
--------

Purpose of Disbursement  
INSURANCE

001

Transaction ID : SB17.109877

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

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

818.97



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. STATE FARM INSURANCE**

Mailing Address 715 LEXINGTON AVENUE

City	State	Zip Code
ALTOONA	PA	16601

Purpose of Disbursement  
INSURANCE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

494.82
--------

Transaction ID : SB17.110037

**B. MR. WILLIAM STRAESSER**

Mailing Address PO BOX 1023

City	State	Zip Code
ALTOONA	PA	16603

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

1658.95
---------

Transaction ID : SB17.109954

**C. MR. WILLIAM STRAESSER**

Mailing Address PO BOX 1023

City	State	Zip Code
ALTOONA	PA	16603

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

Amount of Each Disbursement this Period

837.76
--------

Transaction ID : SB17.109955

[MEMO ITEM]

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

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

2153.77

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BLAIR COUNTY REPUBLICAN PARTY**

Mailing Address 301 UNION AVE. #364

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

City	State	Zip Code
ALTOONA	PA	16602

Amount of Each Disbursement this Period

2001.18
---------

Purpose of Disbursement  
EVENT TICKETS

001

Transaction ID : SB17.109958

Candidate Name

**BLAIR COUNTY REPUBLICAN PARTY**Category/  
Type**[MEMO ITEM]**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. COPY RITE & BANNER ZONE**

Mailing Address 301 ALLEGHENY STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

City	State	Zip Code
HOLLIDAYSBURG	PA	16648

Amount of Each Disbursement this Period

30.21
-------

Purpose of Disbursement  
PRINTING

001

Transaction ID : SB17.109961

Candidate Name

Category/  
Type**[MEMO ITEM]**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. MR. WILLIAM STRAESSER**

Mailing Address PO BOX 1023

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2015

City	State	Zip Code
ALTOONA	PA	16603

Amount of Each Disbursement this Period

2001.18
---------

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Transaction ID : SB17.110051

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

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

2001.18

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 219 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. MR. WILLIAM STRAESSER**

Mailing Address PO BOX 1023

City	State	Zip Code
ALTOONA	PA	16603

Purpose of Disbursement  
MILEAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2015

Amount of Each Disbursement this Period

1120.00
---------

Transaction ID : SB17.110052

[MEMO ITEM]

**B. COPY RITE & BANNER ZONE**

Mailing Address 301 ALLEGHENY STREET

City	State	Zip Code
HOLLIDAYSBURG	PA	16648

Purpose of Disbursement  
PRINTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2015

Amount of Each Disbursement this Period

12.47
-------

Transaction ID : SB17.110056

[MEMO ITEM]

**C. STAPLES**

Mailing Address PLANK ROAD/ORCHARD PLAZA

City	State	Zip Code
ALTOONA	PA	16602

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2015

Amount of Each Disbursement this Period

17.47
-------

Transaction ID : SB17.110065

[MEMO ITEM]

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

0.00
------

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 220 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. MR. WILLIAM STRAESSER**

Mailing Address PO BOX 1023

City	State	Zip Code
ALTOONA	PA	16603

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2015

Amount of Each Disbursement this Period

1365.87
---------

Transaction ID : SB17.110320

**B. COPY RITE & BANNER ZONE**

Mailing Address 301 ALLEGHENY STREET

City	State	Zip Code
HOLLIDAYSBURG	PA	16648

Purpose of Disbursement  
PRINTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2015

Amount of Each Disbursement this Period

83.50
-------

Transaction ID : SB17.110321

[MEMO ITEM]

**C. MR. WILLIAM STRAESSER**

Mailing Address PO BOX 1023

City	State	Zip Code
ALTOONA	PA	16603

Purpose of Disbursement  
MILEAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2015

Amount of Each Disbursement this Period

795.76
--------

Transaction ID : SB17.110324

[MEMO ITEM]

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

1365.87
---------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 221 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. THE DUQUESNE CLUB**

Mailing Address 325 6TH AVE

City	State	Zip Code
PITTSBURGH	PA	15222

Purpose of Disbursement  
EVENT CATERING AND FACILITY RENTAL

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2015

Amount of Each Disbursement this Period

4534.41
---------

Transaction ID : SB17.110333

**B. UNITED WAY OF LAUREL HIGHLANDS**

Mailing Address 422 MAIN ST # 203

City	State	Zip Code
JOHNSTOWN	PA	15901

Purpose of Disbursement  
EVENT TICKETS

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2015

Amount of Each Disbursement this Period

300.00
--------

Transaction ID : SB17.109990

**C. VERIZON**

Mailing Address PO BOX 15026

City	State	Zip Code
ALBANY	NY	12212

Purpose of Disbursement  
TELEPHONE

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2015

Amount of Each Disbursement this Period

127.98
--------

Transaction ID : SB17.110050

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

4962.39

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. VERIZON**

Mailing Address PO BOX 15026

City	State	Zip Code
ALBANY	NY	12212

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

142.01
--------

Transaction ID : SB17.110312

**B. VERIZON**

Mailing Address PO BOX 15026

City	State	Zip Code
ALBANY	NY	12212

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

678.13
--------

Transaction ID : SB17.110313

**C. VERIZON**

Mailing Address PO BOX 15026

City	State	Zip Code
ALBANY	NY	12212

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2015

Amount of Each Disbursement this Period

63.99
-------

Transaction ID : SB17.110334

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

884.13

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. VERIZON**

Mailing Address PO BOX 15026

City	State	Zip Code
ALBANY	NY	12212

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Disbursement this Period

142.01
--------

Transaction ID : SB17.110357

**B. VERIZON**

Mailing Address PO BOX 15026

City	State	Zip Code
ALBANY	NY	12212

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

796.15
--------

Transaction ID : SB17.110486

**C. VERIZON WIRELESS**

Mailing Address PO BOX 25505

City	State	Zip Code
LEHIGH VALLEY	PA	18002

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2015

Amount of Each Disbursement this Period

1934.08
---------

Transaction ID : SB17.109811

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

2872.24

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. VOTESANE PAC**

Mailing Address PO BOX 2713

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2015

City	State	Zip Code
ALEXANDRIA	VA	22301

Amount of Each Disbursement this Period

225.00
--------

Purpose of Disbursement  
CC TRANSACTION FEES

001

Transaction ID : SB17.110237

Candidate Name

**VOTESANE PAC**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. VOTESANE PAC**

Mailing Address PO BOX 2713

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2015

City	State	Zip Code
ALEXANDRIA	VA	22301

Amount of Each Disbursement this Period

475.00
--------

Purpose of Disbursement  
CC TRANSACTION FEES

001

Transaction ID : SB17.110256

Candidate Name

**VOTESANE PAC**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. VOTESANE PAC**

Mailing Address PO BOX 2713

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

City	State	Zip Code
ALEXANDRIA	VA	22301

Amount of Each Disbursement this Period

125.00
--------

Purpose of Disbursement  
CC TRANSACTION FEES

001

Transaction ID : SB17.110386

Candidate Name

**VOTESANE PAC**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

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

825.00



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 225 OF 227

<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**

Full Name (Last, First, Middle Initial)

**A. VOTESANE PAC**

Mailing Address PO BOX 2713

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

City	State	Zip Code
ALEXANDRIA	VA	22301

Amount of Each Disbursement this Period

775.00
--------

Purpose of Disbursement  
CC TRANSACTION FEES

001

Transaction ID : SB17.110387

Candidate Name

**VOTESANE PAC**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)

**B.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

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:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

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

775.00

189530.29



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BILL SHUSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. JEFF MILLER FOR CONGRESS**

Mailing Address P. O. BOX 126

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2015

City	State	Zip Code
PENSACOLA	FL	32591

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Transaction ID : SB21.110440

Candidate Name

**JEFFERSON MILLER**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: FL District: 01

Full Name (Last, First, Middle Initial)

**B. KELLY FOR CONGRESS**

Mailing Address 5221-A CLIFF GOOKIN BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2015

City	State	Zip Code
TUPELO	MS	38801

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Transaction ID : SB21.110107

Candidate Name

**JOHN KELLY**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify)

State: MS District: 01

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

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

3000.00

3000.00