

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

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00364935

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

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
07 / 01 / 2016

through

M M / D D / Y Y Y Y
09 / 30 / 2016

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

Type or Print Name of Treasurer KILGORE, PAUL, A.,

Signature of Treasurer KILGORE, PAUL, A.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y
12 / 05 / 2016

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name
BILL SHUSTER FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	443769.27	3529540.53
(b) Total Contribution Refunds (from Line 20(d))	1200.00	5100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	442569.27	3524440.53
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	285675.10	2748563.06
(b) Total Offsets to Operating Expenditures (from Line 14).....	1567.60	5032.60
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	284107.50	2743530.46
8. Cash on Hand at Close of Reporting Period (from Line 27).....	969992.58	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

BILL SHUSTER FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	146600.00	1321853.64
(ii) Unitemized.....	1180.00	21178.47
(iii) TOTAL of contributions from individuals ▶	147780.00	1343032.11
(b) Political Party Committees.....	0.00	250.00
(c) Other Political Committees (such as PACs).....	295989.27	2186258.42
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	443769.27	3529540.53
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.)	1567.60	5032.60
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)..... ▶	445336.87	3541656.46

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	285675.10	2748563.06
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	2900.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1200.00	2200.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1200.00	5100.00
21. OTHER DISBURSEMENTS	80895.85	285847.60
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	367770.95	3039510.66

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	892426.66
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	445336.87
25. SUBTOTAL (add Line 23 and Line 24).....	1337763.53
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	367770.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	969992.58

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

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

FOR LINE NUMBER: PAGE 5 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ALDRIDGE, KENNETH, , ,
Mailing Address 844 E ROCKLAND RD

City: LIBERTYVILLE State: IL Zip Code: 60048

FEC ID number of contributing federal political committee: C

Name of Employer: ALDRIDGE GROUP Occupation: CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 2000.00

Date of Receipt: 08 / 03 / 2016
Transaction ID : SA11AI.113803

Amount of Each Receipt this Period: 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ANDREWS, GARNETT, L., ,
Mailing Address 16206 WRIGHT CIRCLE

City: OMAHA State: NE Zip Code: 68130

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: 08 / 03 / 2016
Transaction ID : SA11AI.113811

Amount of Each Receipt this Period: 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BARKOWSKI, MARK, , ,
Mailing Address 18051 JOHN CHARLES DR

City: ORLAND PARK State: IL Zip Code: 60467

FEC ID number of contributing federal political committee: C

Name of Employer: FH PASCHEN Occupation: VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 03 / 2016
Transaction ID : SA11AI.113805

Amount of Each Receipt this Period: 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3500.00

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

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

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

FOR LINE NUMBER: PAGE 6 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BAUGH, TERRY, L., ,
 Mailing Address 204 PARKWOOD BLVD
 City WEST MONROE State LA Zip Code 71292
 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 Y Y
 09 / 26 / 2016
Transaction ID : SA11AI.114236
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
BETSWORTH, KATE, , ,
 Mailing Address 17717 CASTELAR CIRCLE
 City OMAHA State NE Zip Code 68130
 FEC ID number of contributing federal political committee. C
 Name of Employer UNION PACIFIC 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 Y Y
 07 / 24 / 2016
Transaction ID : SA11AI.113715
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
BISSO OFFSHORE, LLC
 Mailing Address 1 WALNUT ST
 City NEW ORLEANS State LA Zip Code 70118
 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 / D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11AI.114241
 Amount of Each Receipt this Period
 500.00
 Memo Item
NO ITEMIZATION NECESSARY

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 7 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BOND, BENTON, , ,
Mailing Address 1322 NEELEY DR

City HOUSTON State TX Zip Code 77055

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

Name of Employer UNION PACIFIC 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 Y Y
 08 / 03 / 2016

Transaction ID : SA11AI.113818

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BORDELON, BENJAMIN, G, ,
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 ▼
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : SA11AI.114211

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BRIGNAC, SUE, , ,
Mailing Address 100 HUMMINGBIRD LN

City SUNSET State LA Zip Code 70584

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 Y Y
 09 / 26 / 2016

Transaction ID : SA11AI.114238

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRONCZEK, DAVID, , MR.,
Mailing Address 5965 RIVER OAKS

City MEMPHIS	State TN	Zip Code 38120
-----------------	-------------	-------------------

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

Name of Employer FEDEX	Occupation PRESIDENT/CEO
---------------------------	-----------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 24 / 2016

Transaction ID : SA11AI.113910

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BRONCZEK, JUDITH, M, ,
Mailing Address 5965 RIVER OAKS RD

City MEMPHIS	State TN	Zip Code 38120
-----------------	-------------	-------------------

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 Y Y
08 / 24 / 2016

Transaction ID : SA11AI.113904

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BRUENING, KENNETH, , ,
Mailing Address 3303 S 188TH AVE

City OMAHA	State NE	Zip Code 68130
---------------	-------------	-------------------

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

Name of Employer UNION PACIFIC RAILROAD	Occupation CHIEF 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 Y Y
07 / 18 / 2016

Transaction ID : SA11AI.113676

Amount of Each Receipt this Period
500.00

Memo Item

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 9 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRUNALLI, JOHN, A, ,
Mailing Address 95 BELLEVIEW AVE.

City SOUTHINGTON State CT Zip Code 06489

FEC ID number of contributing federal political committee. C

Name of Employer THE BRUNALLI CONSTRUCTION COMPANY Occupation EXECUTIVE

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
09 / 26 / 2016

Transaction ID : SA11AI.114206

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BUCHANAN, DEE, , ,
Mailing Address 2604 VALLEY DRIVE

City ALEXANDRIA State VA Zip Code 22302

FEC ID number of contributing federal political committee. C

Name of Employer OGILVY GOVERNMENT RELATIONS Occupation PRINCIPAL

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
07 / 18 / 2016

Transaction ID : SA11AI.113684

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CAFERO, LAWRENCE, F., , JR,
Mailing Address 6 WEED AVE

City NORWALK State CT Zip Code 06850

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.114202

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CARTER, ROBERT, B, ,
 Mailing Address 942 S SHADY GROVE RD
 City MEMPHIS State TN Zip Code 38119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FEDEX Occupation EXECUTIVE
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11AI.113909
 Amount of Each Receipt this Period
 2700.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
CAVANAGH, SEAN, , ,
 Mailing Address 23 LINDSAY DRIVE
 City UNIONTOWN State PA Zip Code 15401
 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 Y Y
 09 / 19 / 2016
Transaction ID : SA11AI.114162
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 IN-KIND: ADVERTISING

C. Full Name (Last, First, Middle Initial)
CHAPMAN, DAVID, , ,
 Mailing Address 19 JENDA WAY
 City MADISON State CT Zip Code 06443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BLAKESLEE ARPAIA CHAPMAN 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 Y Y
 09 / 26 / 2016
Transaction ID : SA11AI.114203
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4700.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 11 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHATELAIN, CHARLES, , ,
 Mailing Address PO BOX 159
 City CARENCRE State LA Zip Code 70520
 FEC ID number of contributing federal political committee. C
 Name of Employer DELTA NETWORK Occupation BROADCASTER
 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
 09 / 26 / 2016
Transaction ID : SA11AI.114213
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
CHLOPECKI, JULIE, , ,
 Mailing Address 1547 EVERS DR
 City MC LEAN State VA Zip Code 22101
 FEC ID number of contributing federal political committee. C
 Name of Employer XENOPHON STRATEGIES Occupation PARTNER
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1403.64

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11AI.114124
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
CIMINI, PETER, J, ,
 Mailing Address 71 HUNTERS RIDGE
 City ROCKY HILL State CT Zip Code 06067
 FEC ID number of contributing federal political committee. C
 Name of Employer CAPITOL STRATEGIES GROUP, LLC Occupation EXECUTIVE
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11AI.114221
 Amount of Each Receipt this Period
 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2750.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CLARK, MICHAEL, , MR.,

Mailing Address 1300 PENNSYLVANIA AVENUE NW
SUITE 700

City WASHINGTON State DC Zip Code 20004

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

Name of Employer SURMONT LLC 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 Y Y
07 / 20 / 2016

Transaction ID : SA11AI.113698

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CLARK, STEPHEN, 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 LYTLE GEDULDIG CRANFORD Occupation SENIOR MANAGING PARTNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA11AI.113690

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CLOWER, TODD, G., ,

Mailing Address 3801 N CAUSEWAY BLVD
STE 310

City METAIRIE State LA Zip Code 70002

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 Y Y
09 / 26 / 2016

Transaction ID : SA11AI.114229

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 200	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CONALLEN, MICHAEL, , ,

Mailing Address 27 EDEN ROC

City NEW HOPE	State PA	Zip Code 18938
------------------	-------------	-------------------

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

Name of Employer PENNONI ASSOCIATES	Occupation MANAGER, BUSINESS DEVELOPMENT
--	---

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
07 / 18 / 2016

Transaction ID : SA11AI.113673

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address PO BOX 246

City CRESSON	State PA	Zip Code 16630
-----------------	-------------	-------------------

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 ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.113881

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 50 KENNEDY PLAZA
STE. 1500

City PROVIDENCE	State RI	Zip Code 02903
--------------------	-------------	-------------------

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

Name of Employer HINCKLEY ALLEN	Occupation PARTNER
------------------------------------	-----------------------

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
09 / 26 / 2016

Transaction ID : SA11AI.114226

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	1700.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 14 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DEUPREE, WILLIAM, W, , JR.

Mailing Address 4043 SHORE LANE

City BOCA GRANDE State FL Zip Code 33921

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 Y Y
08 / 24 / 2016

Transaction ID : SA11AI.113906

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DEVAL OFFSHORE LLC

Mailing Address 2244 SWISCO RD

City SULPHUR State LA Zip Code 70665

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
09 / 26 / 2016

Transaction ID : SA11AI.114214

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DEVAL, JOSEPH, A., , JR.

Mailing Address 755 MAGAZINE ST

City NEW ORLEANS State LA Zip Code 70130

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

Name of Employer DEVAL OFFSHORE 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 Y Y
09 / 26 / 2016

Transaction ID : SA11AI.114215

Amount of Each Receipt this Period
1000.00

Memo Item
PARTNERSHIP DEVAL OFFSHORE LLC

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 15 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DEVIERNO, JOHN, A., ,
 Mailing Address 9417 BYEFORDE RD
 City KENSINGTON State MD Zip Code 20895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ATTORNEY
 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
 09 / 26 / 2016
Transaction ID : SA11AI.114216
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
DUCKER, MICHAEL, L., ,
 Mailing Address 5535 CENTER HILL RD
 City COLLIERVILLE State TN Zip Code 38017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FEDEX FREIGHT Occupation PRESIDENT & 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 Y Y
 08 / 24 / 2016
Transaction ID : SA11AI.113903
 Amount of Each Receipt this Period
 2700.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
DUPRE, REGGIE, , ,
 Mailing Address 201 ENERGY PARKWAY STE. 500
 City LAFAYETTE State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DUPRE LOGISTICS 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 Y Y
 09 / 26 / 2016
Transaction ID : SA11AI.114212
 Amount of Each Receipt this Period
 500.00
 Memo Item

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: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 16 OF 200

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

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

Mailing Address 301 NE 2ND AVE

City: PORTLAND State: OR Zip Code: 97232

FEC ID number of contributing federal political committee: C

Name of Employer: UNION PACIFIC Occupation: MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 24 / 2016

Transaction ID : SA11AI.113716

Amount of Each Receipt this Period: 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ELMORE, DOYLE, W., ,

Mailing Address 203 BENT TREE TR

City: LAFAYETTE State: LA Zip Code: 70508

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: 09 / 26 / 2016

Transaction ID : SA11AI.114237

Amount of Each Receipt this Period: 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FAERBER, TOD, W., ,

Mailing Address 115 N BRANDON DR

City: GLENDALE HEIGHTS State: IL Zip Code: 60139

FEC ID number of contributing federal political committee: C

Name of Employer: DUNNET BAY CONSTRUCTION Occupation: CONSTRUCTION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 03 / 2016

Transaction ID : SA11AI.113809

Amount of Each Receipt this Period: 1000.00

Memo Item

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 17 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FAISON, OLGA, M., ,

Mailing Address 2120 STONEBRIDGE LN

City CHARLOTTE State NC Zip Code 28211

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 Y Y
 09 / 22 / 2016

Transaction ID : SA11AI.114125

Amount of Each Receipt this Period
 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FAISON, JAY, W., ,

Mailing Address 1355 GREENWOOD CLIFFS
STE 301

City CHARLOTTE State NC Zip Code 28204

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

Name of Employer CLEARPATH FOUNDATION Occupation 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 Y Y
 09 / 22 / 2016

Transaction ID : SA11AI.114126

Amount of Each Receipt this Period
 2700.00

Memo Item

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

Mailing Address 235 BROADWAY ST.

City NEW ORLEANS State LA Zip Code 70118

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

Name of Employer CHANNEL SHIPYARD COMPANY INC 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 Y Y
 09 / 26 / 2016

Transaction ID : SA11AI.114230

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 6400.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FERGUSON, RHONDA, , ,

Mailing Address 37110 BROADSTONE DR

City SOLON State OH Zip Code 44139

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

Name of Employer UNION PACIFIC 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 Y Y
07 / 24 / 2016

Transaction ID : SA11AI.113718

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FLAHERTY, BRIAN, J., ,

Mailing Address 21 NEILL DR.

City WATERTOWN State CT Zip Code 06795

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

Name of Employer CBIA Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.114210

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FLETCHER, JAMES, K., ,

Mailing Address 18921 WINTERWOOD CT

City BATON ROUGE State LA Zip Code 70817

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 Y Y
09 / 26 / 2016

Transaction ID : SA11AI.114232

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 19 OF 200	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FORTNER, ROLAND, T, ,

Mailing Address 22428 HOMESTEAD ROAD

City ELKHORN	State NE	Zip Code 68022
-----------------	-------------	-------------------

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

Name of Employer UNION PACIFIC RAILROAD	Occupation MARKETING & SALES
--	---------------------------------

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
07 / 18 / 2016

Transaction ID : SA11AI.113678

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 8532 HICKORY ST

City OMAHA	State NE	Zip Code 68124
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FEC ID number of contributing federal political committee. **C**

Name of Employer UNION PACIFIC	Occupation 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 Y Y
07 / 25 / 2016

Transaction ID : SA11AI.113784

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GALLAGHER, CHARLES, J, MR.,

Mailing Address 3550 WILLIAMS LANE

City CRETE	State IL	Zip Code 60417
---------------	-------------	-------------------

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

Name of Employer GALLAGHER INDUSTRIES	Occupation CHAIRMAN
--	------------------------

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
08 / 03 / 2016

Transaction ID : SA11AI.113802

Amount of Each Receipt this Period
1000.00

Memo Item

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GALLIKER, LOUIS, G, ,
 Mailing Address 922 LUZERNE ST
 City JOHNSTOWN State PA Zip Code 15905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GALLIKER DAIRY COMPANY 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 Y Y
 09 / 01 / 2016
Transaction ID : SA11AI.113970
 Amount of Each Receipt this Period
 2700.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
GARRISON, GREGORY, , ,
 Mailing Address 1904 MALLARD VIEW CIRCLE
 City PAPILLION State NE Zip Code 68046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNION PACIFIC RAILROAD Occupation MANAGER
 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
 07 / 24 / 2016
Transaction ID : SA11AI.113709
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
GARRITY, WILLIAM, F, ,
 Mailing Address 6 MEADOWLARK RD.
 City WEST SIMSBURY State CT Zip Code 06092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GARRITY ASPHALT RECLAIMING, INC. Occupation CONSTRUCTION
 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
 09 / 26 / 2016
Transaction ID : SA11AI.114204
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

FOR LINE NUMBER: PAGE 21 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GEDULDIG, SAM, , ,

Mailing Address 1001 PENNSYLVANIA AVE. NW
SUITE 750 SOUTH

City WASHINGTON State DC Zip Code 20004

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

Name of Employer CLARK LYTTLE GEDULDIG CRANFORD 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 Y Y
 07 / 20 / 2016

Transaction ID : SA11AI.113688

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address PO BOX 104

City TORRINGTON State CT Zip Code 06790

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

Name of Employer VET'S EXPLOSIVES 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 Y Y
 09 / 22 / 2016

Transaction ID : SA11AI.114117

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GIBLIN, CHRISTOPHER, M, MR.,

Mailing Address 1304 CHANCEL PLACE

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer OGILVY GOVERNMENT RELATIONS Occupation SENIOR VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2016

Transaction ID : SA11AI.113672

Amount of Each Receipt this Period
1000.00

Memo Item

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 22 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GLENN, MICHAEL, , ,
Mailing Address 45 S PISGAH

City EADS State TN Zip Code 38028

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

Name of Employer FEDEX Occupation MARKETING & DEVELOPMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 24 / 2016

Transaction ID : SA11AI.113908

Amount of Each Receipt this Period
 _____ 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GRAF, ALAN, B, , JR.
Mailing Address 3609 CLASSIC DR S

City MEMPHIS State TN Zip Code 38125

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

Name of Employer FDEX Occupation CFO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 24 / 2016

Transaction ID : SA11AI.113902

Amount of Each Receipt this Period
 _____ 2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GRAU, AARON, L, ,
Mailing Address 110 ROYALBROOKE DR

City VENETIA State PA Zip Code 15367

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

Name of Employer COHEN AND GRIGSBY PC Occupation DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : SA11AI.113694

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ _____ 5650.00

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

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

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

FOR LINE NUMBER: PAGE 23 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GREEN, ROBERT, J, MR.,

Mailing Address 8026 PARK OVERLOOK DR

City: BETHESDA State: MD Zip Code: 20817

FEC ID number of contributing federal political committee: C

Name of Employer: NATIONAL RETAIL FEDERATION Occupation: V.P. - GOVERNMENT & POLITICAL AFFAIRS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 30 / 2016

Transaction ID : SA11AI.114285

Amount of Each Receipt this Period: 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HAMBERGER, EDWARD, R., ,

Mailing Address 2000 S OCEAN BLVD
APT 304

City: DELRAY BEACH State: FL Zip Code: 33483

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: 09 / 30 / 2016

Transaction ID : SA11AI.114286

Amount of Each Receipt this Period: 1000.00

Memo Item

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

Mailing Address 3016 RIDGE RD

City: NORTH HAVEN State: CT Zip Code: 06473

FEC ID number of contributing federal political committee: C

Name of Employer: WI CLARK Occupation: EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 2000.00

Date of Receipt: 09 / 26 / 2016

Transaction ID : SA11AI.114222

Amount of Each Receipt this Period: 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HAYNES LIFE FLIGHT LLC

Mailing Address PO BOX 1515

City: WETUMPKA State: AL Zip Code: 36092

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 / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.114205

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address PO BOX 1515

City: WETUMPKA State: AL Zip Code: 36092

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:
HAYNES LIFE FLIGHT LLC PARTNER

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
09 / 26 / 2016

Transaction ID : SA11AI.114249

Amount of Each Receipt this Period
2500.00

Memo Item

PARTNERSHIP HAYNES LIFE FLIGHT LLC

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

Mailing Address 8427 S 103RD ST

City: LA VISTA State: NE Zip Code: 68128

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:
UNION PACIFIC 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 Y Y
07 / 24 / 2016

Transaction ID : SA11AI.113711

Amount of Each Receipt this Period
500.00

Memo Item

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)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HILL, DAVID, B, , III

Mailing Address 395 W LAKE STREET

City: ELMHURST State: IL Zip Code: 60120

FEC ID number of contributing federal political committee: C

Name of Employer: SUPERIOR AIR-GROUND AMBULANCE SERV Occupation: CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt: 09 / 22 / 2016

Transaction ID : SA11AI.114108

Amount of Each Receipt this Period: 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HOBBS, DAVID, W, ,

Mailing Address 300 NEW JERSEY AVE. NW, STE. 601

City: WASHINGTON State: DC Zip Code: 20001

FEC ID number of contributing federal political committee: C

Name of Employer: THE HOBBS GROUP Occupation: PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt: 09 / 26 / 2016

Transaction ID : SA11AI.114217

Amount of Each Receipt this Period: 1000.00

Memo Item

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

Mailing Address 704 N 159TH ST

City: OMAHA State: NE Zip Code: 68118

FEC ID number of contributing federal political committee: C

Name of Employer: UNION PACIFIC Occupation: ASSISTANT VP

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt: 08 / 03 / 2016

Transaction ID : SA11AI.113820

Amount of Each Receipt this Period: 500.00

Memo Item

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
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
IRWIN, BRIAN, , ,

Mailing Address 329 SYLVAN OAKES DRIVE

City HOLLIDAYSBURG State PA Zip Code 16648

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

Name of Employer IRWIN FINANCIAL Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : SA11AI.114038

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KAISER, JOHN, E, ,

Mailing Address 3320 N 134TH CIR

City OMAHA State NE Zip Code 68164

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

Name of Employer UNION PACIFIC Occupation 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 Y Y
08 / 03 / 2016

Transaction ID : SA11AI.113817

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 1616 COOK SCHOOL ROAD

City UPPER ST. CLAIR State PA Zip Code 15241

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

Name of Employer KANIA ENTERPRISES Occupation MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 17 / 2016

Transaction ID : SA11AI.114314

Amount of Each Receipt this Period
1000.00

Memo Item
IN-KIND: OFFICE EQUIPMENT

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00

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

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

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

FOR LINE NUMBER: PAGE 27 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KELLY, MARK, K, ,
Mailing Address 55 WEST RD.

City EASTON State CT Zip Code 06612

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

Name of Employer SAFETY MARKETING Occupation PRESIDENT
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
09 / 26 / 2016
Transaction ID : SA11AI.114225

Amount of Each Receipt this Period
1000.00

 Memo Item

B. Full Name (Last, First, Middle Initial)
KENDRICK, RANDY, P, ,
Mailing Address 3964 E PARADISE VIEW DR.

City PARADISE VALLEY State AZ Zip Code 85253

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 ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 11 / 2016
Transaction ID : SA11AI.113994

Amount of Each Receipt this Period
2700.00

 Memo Item

C. Full Name (Last, First, Middle Initial)
KEYSTONE PLAZA
Mailing Address 200 E PLEASANT VALLEY BLVD

City ALTOONA State PA Zip Code 16602

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 / D D / Y Y Y Y Y Y
08 / 18 / 2016
Transaction ID : SA11AI.113882

Amount of Each Receipt this Period
500.00

 Memo Item

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
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SERVELLO, DAVID, F, ,
 Mailing Address 1500 HARRISON AVE
 City ALTOONA State PA Zip Code 16602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KEYSTONE PLAZA 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 Y Y
 08 18 2016
Transaction ID : SA11AI.113888
 Amount of Each Receipt this Period
 500.00
 Memo Item
 PARTNERSHIP KEYSTONE PLAZA

B. Full Name (Last, First, Middle Initial)
KIEF, CORY, H, ,
 Mailing Address 721 ROSEDOWN DRIVE
 City THIBODAUX State LA Zip Code 70301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CROSBY TUGS Occupation DIRECTOR
 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
 09 22 2016
Transaction ID : SA11AI.114107
 Amount of Each Receipt this Period
 2000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
KIRCHHOEFER, KARI, ANN, ,
 Mailing Address 1445 NORTH 143RD AVE CIRCLE
 City OMAHA State NE Zip Code 68154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNION PACIFIC Occupation 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 Y Y
 07 24 2016
Transaction ID : SA11AI.113714
 Amount of Each Receipt this Period
 500.00
 Memo Item

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

2500.00

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

Use separate schedule(s)
for each category of the
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KUEHNE, FRANCES, B., ,
Mailing Address 424 TIFFANY DR

City RIVER RIDGE State LA Zip Code 70123

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 ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : SA11AI.114228

Amount of Each Receipt this Period
 300.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LANDRY, SHARON, , ,
Mailing Address 203 SILVER OAK LN

City BROUSSARD State LA Zip Code 70518

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 ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : SA11AI.114233

Amount of Each Receipt this Period
 1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LAPIDES, JOHN, S., ,
Mailing Address 217 SAINT RONAN ST

City NEW HAVEN State CT Zip Code 06511

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

Name of Employer UNITED ALUMINUM CORP 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 Y Y
 09 / 26 / 2016

Transaction ID : SA11AI.114209

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2800.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LAWSON, LIISA, , ,

Mailing Address 8 BURNING OAK TRAIL

City BARRINGTON HILLS State IL Zip Code 60010

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

Name of Employer UNION PACIFIC RAILROAD Occupation PUBLIC 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 Y Y
07 / 20 / 2016

Transaction ID : SA11AI.113707

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LEISS TOOL & DIE

Mailing Address 801 N PLEASANT AVE.

City SOMERSET State PA Zip Code 15501

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

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
07 / 14 / 2016

Transaction ID : SA11AI.113669

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 633 GILMORE RD

City SOMERSET State PA Zip Code 15501

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

Name of Employer LEISS TOOL & DIE Occupation 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
07 / 14 / 2016

Transaction ID : SA11AI.113670

Amount of Each Receipt this Period
1000.00

Memo Item
PARTNERSHIP LEISS TOOL & DIE

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)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

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

Mailing Address 630 NORTH 156TH AVE

City OMAHA State NE Zip Code 68118

FEC ID number of contributing federal political committee. C

Name of Employer UNION PACIFIC RAILROAD Occupation OPERATIONS

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
07 / 18 / 2016

Transaction ID : SA11AI.113683

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LITZINGER, VERNON, E, ,

Mailing Address 975 LOCKE MOUNTAIN RD

City HOLLIDAYSBURG State PA Zip Code 16648

FEC ID number of contributing federal political committee. C

Name of Employer PACKAGING SERVICES Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 25 / 2016

Transaction ID : SA11AI.113721

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LORIG, DAVID, H, ,

Mailing Address 181 N ENID LANE

City NORTHFIELD State IL Zip Code 60093

FEC ID number of contributing federal political committee. C

Name of Employer LORIG CONSTRUCTION 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 Y Y
08 / 03 / 2016

Transaction ID : SA11AI.113806

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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

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

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LUJAN, WESLEY, J, ,

Mailing Address 5114 WEDGEWOOD WAY

City: ROCKLIN State: CA Zip Code: 95765

FEC ID number of contributing federal political committee: C

Name of Employer: UNION PACIFIC Occupation: VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 03 / 2016

Transaction ID : SA11AI.113816

Amount of Each Receipt this Period: 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MARIAN, THOMAS, P., ,

Mailing Address 43 FOREST GREEN TRL

City: KINGWOOD State: TX Zip Code: 77339

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: 2500.00

Date of Receipt: 09 / 26 / 2016

Transaction ID : SA11AI.114227

Amount of Each Receipt this Period: 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MATHER, LINWOOD, S, , III

Mailing Address PO BOX 108

City: CANTON CENTER State: CT Zip Code: 06020

FEC ID number of contributing federal political committee: C

Name of Employer: MATHER CORPORATION Occupation: PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 09 / 26 / 2016

Transaction ID : SA11AI.114208

Amount of Each Receipt this Period: 1000.00

Memo Item

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

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MATTOON, DANIEL, J, ,
 Mailing Address 6344 CAVALIER CORRIDOR
 City FALLS CHURCH State VA Zip Code 22044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MATTOON & ASSOCIATES Occupation PRESIDENT
 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
 09 / 30 / 2016
Transaction ID : SA11AI.114284
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
MCCABE, PATRICK, E, ,
 Mailing Address 36 TRUMBULL ST.
 City HARTFORD State CT Zip Code 06103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CAPITOL STRATEGIES GROUP, LLC 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 Y Y
 09 / 26 / 2016
Transaction ID : SA11AI.114220
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
MCELWEE, GEORGE, , ,
 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 ▼
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11AI.113682
 Amount of Each Receipt this Period
 500.00
 Memo Item

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

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 34 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MCGAVOCK, BRIAN, , ,

Mailing Address 6915 SANDWEDGE POINT CT

City SPRING State TX Zip Code 77389

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

Name of Employer UNION PACIFIC Occupation 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 Y Y
07 / 24 / 2016

Transaction ID : SA11AI.113710

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MCNAUGHTON, JENNIFER, K, ,

Mailing Address 4564 LAWN AVE

City WESTON SPRINGS State IL Zip Code 60558

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

Name of Employer K-5 CONSTRUCTION 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 Y Y
08 / 03 / 2016

Transaction ID : SA11AI.113808

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MILLER, JONATHAN, E, MR.,

Mailing Address 2425 N OTTAWA ST

City ARLINGTON State VA Zip Code 22205

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

Name of Employer VOLVO GROUP NORTH AMERICA 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 Y Y
09 / 30 / 2016

Transaction ID : SA11AI.114312

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 35 OF 200	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MILNE, JOHN, D., ,

Mailing Address 409 G ST SE

City WASHINGTON	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C**

Name of Employer MWH AMERICAS PAC	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 Y Y
09 / 26 / 2016

Transaction ID : SA11AI.114219

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MONTE, ASBEL, A., , II

Mailing Address 305 RUE BORDEAUX

City CARENCRO	State LA	Zip Code 70520
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
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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
09 / 26 / 2016

Transaction ID : SA11AI.114239

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MOORE, SCOTT, DALE, ,

Mailing Address 9803 ASCOT DR

City OMAHA	State NE	Zip Code 68114
---------------	-------------	-------------------

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

Name of Employer UNION PACIFIC	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 Y Y
07 / 26 / 2016

Transaction ID : SA11AI.113786

Amount of Each Receipt this Period
1000.00

Memo Item

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 36 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MORONGO BAND OF MISSION INDIANS

Mailing Address 12700 PUMARRA RD

City BANNING	State CA	Zip Code 92220
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.113706

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
MORRISON, ROBERT, R, ,

Mailing Address 7613 LEAWOOD ST

City PAPILLION	State NE	Zip Code 68046
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FEC ID number of contributing federal political committee.

Name of Employer UNION PACIFIC	Occupation RAILROAD POLICE
-----------------------------------	-------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.113815

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 219 FOREST RIDGE ROAD

City INDIANA	State PA	Zip Code 15701
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer INDIANA ANESTHESIA ASSOCIATES	Occupation ANESTHESIOLOGIST
---	--------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.113995

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="2250.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 37 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
OLIN, TERRY, , ,
Mailing Address 202 FOREST DR
City BELLEVUE State NE Zip Code 68005
FEC ID number of contributing federal political committee. **C**
Name of Employer UNION PACIFIC RAILROAD Occupation LABOR RELATIONS
Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 20 / 2016
Transaction ID : SA11AI.113708
Amount of Each Receipt this Period
500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
ONEGLIA, RAYMOND, R, ,
Mailing Address 112 WALL ST.
City TORRINGTON State CT Zip Code 06790
FEC ID number of contributing federal political committee. **C**
Name of Employer O&G INDUSTRIES INC. Occupation VICE CHAIRMAN
Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2016
Transaction ID : SA11AI.114207
Amount of Each Receipt this Period
2500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
OSORNO, GARY, , ,
Mailing Address PO BOX 2283
City KENNER State LA Zip Code 70065
FEC ID number of contributing federal political committee. **C**
Name of Employer ACCUTRANS, INC. Occupation PRESIDENT
Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2016
Transaction ID : SA11AI.114231
Amount of Each Receipt this Period
1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4000.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 38 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PARKER, MICHAEL, W, ,
Mailing Address 5124 CHICAGO ST

City OMAHA	State NE	Zip Code 68132
---------------	-------------	-------------------

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

Name of Employer UNION PACIFIC	Occupation MARKETING & SALES
-----------------------------------	---------------------------------

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
07 / 18 / 2016

Transaction ID : SA11AI.113677

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PATTEN, GARRETT, , ,
Mailing Address 635 W LAKE STREET

City ELMHURST	State IL	Zip Code 60126
------------------	-------------	-------------------

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 Y Y
09 / 01 / 2016

Transaction ID : SA11AI.113969

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PEMRICK, KEITH, J., ,
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 ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 24 / 2016

Transaction ID : SA11AI.113713

Amount of Each Receipt this Period
500.00

Memo Item

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 39 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PERSSON, HAROLD, SCOTT, ,
Mailing Address 111 AUGUSTA DR

City: HOLLIDAYSBURG State: PA Zip Code: 16648

FEC ID number of contributing federal political committee: C

Name of Employer: DEPT OF VETERANS AFFAIRS Occupation: POLICE OFFICER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt: 08 / 07 / 2016
Transaction ID : SA11AI.113823

Amount of Each Receipt this Period: 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PHARR, MARK, R., ,
Mailing Address 101 BONNER DR

City: LAFAYETTE State: LA Zip Code: 70508

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: 09 / 26 / 2016
Transaction ID : SA11AI.114234

Amount of Each Receipt this Period: 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PLOTE, DANIEL, R, MR.,
Mailing Address 830 SEERS DRIVE

City: SCHAUMBURG State: IL Zip Code: 60173

FEC ID number of contributing federal political committee: C

Name of Employer: PLOTE PROPERTIES Occupation: PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt: 08 / 03 / 2016
Transaction ID : SA11AI.113801

Amount of Each Receipt this Period: 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2250.00

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

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

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

FOR LINE NUMBER: PAGE 40 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RAU, KAREN, E, ,
Mailing Address 407 REDWOOD DR

City: COUNCIL BLFS State: IL Zip Code: 51503

FEC ID number of contributing federal political committee: C

Name of Employer: UNION PACIFIC Occupation: MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 03 / 2016
Transaction ID : SA11AI.113814

Amount of Each Receipt this Period: 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
REYES, MARCOS, G, ,
Mailing Address 15515 CRAWFORD AVE

City: MARKHAM State: IL Zip Code: 60428

FEC ID number of contributing federal political committee: C

Name of Employer: REYES GROUP Occupation: PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 750.00

Date of Receipt: 08 / 03 / 2016
Transaction ID : SA11AI.113804

Amount of Each Receipt this Period: 750.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RICHARDS, CHRISTINE, P, ,
Mailing Address 8855 MEMPHIS ARLINGTON RD

City: ARLINGTON State: TN Zip Code: 38002

FEC ID number of contributing federal political committee: C

Name of Employer: FEDEX Occupation: GENERAL COUNSEL

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 2700.00

Date of Receipt: 08 / 24 / 2016
Transaction ID : SA11AI.113905

Amount of Each Receipt this Period: 2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3950.00

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

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

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

FOR LINE NUMBER: PAGE 41 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RICHARDS, DANIEL, R, ,

Mailing Address 8855 MEMPHIS ARLINGTON RD

City ARLINGTON State TN Zip Code 38002

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

Name of Employer DR CONSULTING Occupation CPA

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 24 / 2016

Transaction ID : SA11AI.113907

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 9371 ALCOSTA PLACE

City HIGHLANDS RANCH State CO Zip Code 80126

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

Name of Employer UNION PACIFIC 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 Y Y
07 / 24 / 2016

Transaction ID : SA11AI.113717

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 6034 W COURTYARD DR STE. 205

City AUSTIN State TX Zip Code 78730

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

Name of Employer LANCER RESOURCES, LP Occupation OIL & GAS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 11 / 2016

Transaction ID : SA11AI.113867

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

5900.00

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

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

FOR LINE NUMBER: PAGE 42 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROCK, MICHAEL, A, ,
Mailing Address 1331 CASSIA ST

City: HERNDON State: VA Zip Code: 20170

FEC ID number of contributing federal political committee: C

Name of Employer: UNION PACIFIC CORPORATION Occupation: LOBBYIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 4700.00

Date of Receipt: 08 / 03 / 2016
Transaction ID : SA11AI.113813

Amount of Each Receipt this Period: 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ROCK, KATHLEEN, , ,
Mailing Address 37W600 YORK LANE

City: ELGIN State: IL Zip Code: 60124

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: 08 / 03 / 2016
Transaction ID : SA11AI.113807

Amount of Each Receipt this Period: 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ROWLAND, JAMES, A, ,
Mailing Address 232 8TH STREET SE

City: WASHINGTON State: DC Zip Code: 20003

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: 07 / 20 / 2016
Transaction ID : SA11AI.113691

Amount of Each Receipt this Period: 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3500.00

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

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

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

FOR LINE NUMBER: PAGE 43 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SANTA YNEZ BAND OF MISSION INDIANS

Mailing Address PO BOX 517

City State Zip Code
SABTA YBEZ CA 93460

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

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
09 22 2016

Transaction ID : SA11AI.114128

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SCHENENDORF, JACK, L, ,

Mailing Address 4707 MORGAN DR

City State Zip Code
CHEVY CHASE MD 20815

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

Name of Employer Occupation
COVINGTON & BURLING ATTORNEY

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
09 30 2016

Transaction ID : SA11AI.114271

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 5135 STIRLING ST

City State Zip Code
GRANITE BAY CA 95746

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

Name of Employer Occupation
UNION PACIFIC RR 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 Y Y
07 18 2016

Transaction ID : SA11AI.113675

Amount of Each Receipt this Period
500.00

Memo Item

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SCOTT, CAMERON, A, ,

Mailing Address 2124 S 190 CIR

City OMAHA State NE Zip Code 68130

FEC ID number of contributing federal political committee. C

Name of Employer UNION PACIFIC Occupation COO

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
08 / 03 / 2016

Transaction ID : SA11AI.113819

Amount of Each Receipt this Period
500.00

Memo Item

B. 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 ▼
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.113880

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SHEA, PHILIP, E, ,

Mailing Address 1313 PICKWICK CT

City NAPERVILLE State IL Zip Code 60563

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 ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : SA11AI.113810

Amount of Each Receipt this Period
450.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3650.00

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 45 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SHUMACK, TUCKER, C, ,
Mailing Address 2346 S NASH ST

City ARLINGTON	State VA	Zip Code 22202
-------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
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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
07 / 20 / 2016

Transaction ID : SA11AI.113693

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SMITH, FREDERICK, W, ,
Mailing Address 649 SWEETBRIAR RD.

City MEMPHIS	State TN	Zip Code 38120
-----------------	-------------	-------------------

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

Name of Employer FEDEX	Occupation 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 Y Y
08 / 24 / 2016

Transaction ID : SA11AI.113900

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SMITH, DIANE, , ,
Mailing Address 942 S SHADY GROVE RD

City MEMPHIS	State TN	Zip Code 38120
-----------------	-------------	-------------------

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 Y Y
08 / 24 / 2016

Transaction ID : SA11AI.113901

Amount of Each Receipt this Period
2700.00

Memo Item

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 46 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SONNIER, MICHAEL, P., ,
 Mailing Address 201 HUNDRED OAKS DR
 City YOUNGSVILLE State LA Zip Code 70592
 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 Y Y
 09 / 26 / 2016
Transaction ID : SA11AI.114235
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
STEELE, JASON, , ,
 Mailing Address 18510 LAFAYETTE CIRCLE
 City ELKHORN State NE Zip Code 68022
 FEC ID number of contributing federal political committee. C
 Name of Employer UNION PACIFIC Occupation MARKETING
 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
 07 / 24 / 2016
Transaction ID : SA11AI.113712
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
STIPICEVIC, JOHN, A, ,
 Mailing Address 1312 SOUTH CAROLINA AVE SE
 City WASHINGTON State DC Zip Code 20003
 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 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11AI.113689
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
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 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SUZIO, HENRY, , MR.,
Mailing Address PO BOX 748

City MERIDEN State CT Zip Code 06450

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

Name of Employer L. SUZIO CONCRETE Occupation SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : SA11AI.114224

Amount of Each Receipt this Period
2750.00

Memo Item

B. Full Name (Last, First, Middle Initial)
THRASHER, BRADLEY, A, ,
Mailing Address 17318 MICKY DR

City BELLEVUE State NE Zip Code 68123

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

Name of Employer UNION PACIFIC Occupation MARKETING AND SALES

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
 08 / 03 / 2016

Transaction ID : SA11AI.113812

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TORRES, DANIEL, , ,
Mailing Address 5303 OSPREY OAK

City SAN ANTONIO State TX Zip Code 78253

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

Name of Employer UNION PACIFIC Occupation TRANSPORTATION

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
 07 / 18 / 2016

Transaction ID : SA11AI.113686

Amount of Each Receipt this Period
400.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4150.00

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 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TORRES, DANIEL, , ,
 Mailing Address 5303 OSPREY OAK
 City SAN ANTONIO State TX Zip Code 78253
 FEC ID number of contributing federal political committee. C
 Name of Employer UNION PACIFIC Occupation TRANSPORTATION
 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
 07 / 18 / 2016
Transaction ID : SA11AI.113687
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
TRYON, WARREN, J, MR.,
 Mailing Address 216 9TH STREET SE
 City WASHINGTON State DC Zip Code 20003
 FEC ID number of contributing federal political committee. C
 Name of Employer RR&G Occupation CONSULTANT
 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
 07 / 20 / 2016
Transaction ID : SA11AI.113692
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
VITARELLI, RICHARD, F, ,
 Mailing Address 22 CARDINAL DR.
 City GLASTONBURY State CT Zip Code 06033
 FEC ID number of contributing federal political committee. C
 Name of Employer JACKSON LEWIS 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 Y Y
 09 / 26 / 2016
Transaction ID : SA11AI.114223
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 49 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WALKER, ROBERT, S, ,
 Mailing Address 609 WILLOW GRN
 City LITITZ State PA Zip Code 17543
 FEC ID number of contributing federal political committee. C
 Name of Employer WEXLER & WALKER PPA Occupation CHAIRMAN - FORMER CONGRESSMAN
 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
 09 / 26 / 2016
Transaction ID : SA11AI.114218
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
WATTERS, ROBB, , ,
 Mailing Address 1030 15TH ST NW
 City WASHINGTON State DC Zip Code 20005
 FEC ID number of contributing federal political committee. C
 Name of Employer THE MADISON GROUP Occupation FOUNDER
 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
 08 / 07 / 2016
Transaction ID : SA11AI.113821
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
WHITE, JACQUELINE, , ,
 Mailing Address 13806 TREGARON DR
 City BELLEVUE State NE Zip Code 68123
 FEC ID number of contributing federal political committee. C
 Name of Employer UNION PACIFIC RAILROAD Occupation AVP MARKETING AND SALES
 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
 07 / 26 / 2016
Transaction ID : SA11AI.113785
 Amount of Each Receipt this Period
 500.00
 Memo Item

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 50 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILBOURN, CHAD, , ,

Mailing Address 24125 ALDINE WESTFIELD

City SPRING State TX Zip Code 77373

FEC ID number of contributing federal political committee. C

Name of Employer UNION PACIFIC 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 Y Y
07 / 18 / 2016

Transaction ID : SA11AI.113674

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 813 VICAR LANE

City ALEXANDRIA State VA Zip Code 22302

FEC ID number of contributing federal political committee. C

Name of Employer BGR GROUP LLC 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 Y
09 / 30 / 2016

Transaction ID : SA11AI.114257

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 513 WEST CAMPBELL AVE

City PHOENIX State AZ Zip Code 85013

FEC ID number of contributing federal political committee. C

Name of Employer YESCALIS CONSULTING Occupation SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : SA11AI.113976

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1750.00

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 51 OF 200	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ZUSCHLAG, RICHARD, E., ,

Mailing Address 108 ASTORIA LOOP

City LAFAYETTE	State LA	Zip Code 70508
-------------------	-------------	-------------------

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 ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.114240

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	146600.00

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

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

FOR LINE NUMBER: PAGE 52 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Mailing Address P.O. BOX 98000

City LAFAYETTE State LA Zip Code 70509

FEC ID number of contributing federal political committee. **C** C00335570

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 860.40

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11C.114251

Amount of Each Receipt this Period
 860.40

Memo Item
 IN-KIND: EVENT CATERING

B. Full Name (Last, First, Middle Initial)
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Mailing Address P.O. BOX 98000

City LAFAYETTE State LA Zip Code 70509

FEC ID number of contributing federal political committee. **C** C00335570

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3360.40

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : SA11C.114194

Amount of Each Receipt this Period
 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ACCENTURE INC. POLITICAL ACTION COMMITTEE

Mailing Address 800 CONNECTICUT AVENUE NW
 SUITE 600

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00300707

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
 09 / 30 / 2016

Transaction ID : SA11C.114272

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4360.40

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 53 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

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

Mailing Address 2101 WILSON BOULEVARD
7TH FLOOR

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00374447

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
09 / 30 / 2016

Transaction ID : SA11C.114261

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AIR METHODS CORPORATION POLITICAL ACTION COMMITTEE (AMPAC)

Mailing Address 1550 LARIMER STREET
SUITE 229

City DENVER State CO Zip Code 80202

FEC ID number of contributing federal political committee. **C** C00529909

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 Y Y
07 / 07 / 2016

Transaction ID : SA11C.113665

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AIRBUS GROUP, INC. PAC

Mailing Address 2550 WASSER TERR
STE 9000

City HERNDON State VA Zip Code 20171

FEC ID number of contributing federal political committee. **C** C00421230

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
07 / 20 / 2016

Transaction ID : SA11C.113703

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AIRBUS GROUP, INC. PAC

Mailing Address 2550 WASSER TERR
STE 9000

City HERNDON State VA Zip Code 20171

FEC ID number of contributing federal political committee. **C** C00421230

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
09 / 22 / 2016

Transaction ID : SA11C.114123

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ALASKA AIR GROUP INC. POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 68900

City SEATTLE State WA Zip Code 98168

FEC ID number of contributing federal political committee. **C** C00024349

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
09 / 30 / 2016

Transaction ID : SA11C.114305

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ALLIANT ENERGY CORPORATION EMPLOYEE'S POLITICAL ACTION COMM

Mailing Address 801 PENNSYLVANIA AVE, NW
SUITE 640

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00132092

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
08 / 03 / 2016

Transaction ID : SA11C.113791

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ALLIANT ENERGY CORPORATION EMPLOYEE'S POLITICAL ACTION COMM

Mailing Address 801 PENNSYLVANIA AVE, NW
SUITE 640

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00132092

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114260

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ALLY FINANCIAL INC. ADVOCACY POLITICAL ACTION COMMITTEE

Mailing Address 25 MASSACHUSETTS AVE, N.W.
SUITE 350

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00579540

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
07 / 20 / 2016

Transaction ID : SA11C.113697

Amount of Each Receipt this Period
2500.00

Memo Item

C. 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
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114304

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	6500.00
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 56 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN CAR RENTAL ASSOCIATION PAC (ACRA PAC)

Mailing Address PO BOX 584

City LONG LAKE	State NY	Zip Code 12847
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00612010

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
09 / 22 / 2016

Transaction ID : SA11C.114127

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN COMMERCIAL LINES INC. PAC

Mailing Address 1701 EAST MARKET STREET

City JEFFERSONVILLE	State IN	Zip Code 47130
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00418269

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
09 / 26 / 2016

Transaction ID : SA11C.114181

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN CONCRETE PIPE ASSOCIATION PAC

Mailing Address 8445 FREEPORT PKWY
SUITE 350

City IRVING	State TX	Zip Code 75063
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00425686

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
09 / 26 / 2016

Transaction ID : SA11C.114189

Amount of Each Receipt this Period
1000.00

Memo Item

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)		PAGE 57 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSOCIATION

Mailing Address 325 7TH ST NW
LIBERTY PLACE SUITE 700

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00106146

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
08 / 03 / 2016

Transaction ID : SA11C.113798

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSOCIATION

Mailing Address 325 7TH ST NW
LIBERTY PLACE SUITE 700

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11C.114198

Amount of Each Receipt this Period
2000.00

Memo Item

C. 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 ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11C.113879

Amount of Each Receipt this Period
3000.00

Memo Item

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	FOR LINE NUMBER: (check only one)		PAGE 58 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1505 PRINCE STREET
SUITE 300

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA11C.113704

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN PILOTS' ASSOCIATION

Mailing Address 499 SOUTH CAPITOL ST SW
APT 409

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00041061

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
09 / 30 / 2016

Transaction ID : SA11C.114300

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN SHORTLINBE & REGIONAL RAILROAD ASSOC. PAC (ASLRRA-PAC)

Mailing Address 50 F ST NW SUITE 7020

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00298190

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 Y
09 / 26 / 2016

Transaction ID : SA11C.114183

Amount of Each Receipt this Period
5000.00

Memo Item

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 59 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. 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 ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : SA11C.113796

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN WATERWAYS OPERATORS PAC

Mailing Address 801 QUINCY ST N
SUITE 200

City ARLINGTON	State VA	Zip Code 22203
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FEC ID number of contributing federal political committee. **C** C00034678

Name of Employer	Occupation
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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 Y
09 / 30 / 2016

Transaction ID : SA11C.114278

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ARCHER DANIELS MIDLAND COMPANY-ADM PAC

Mailing Address P.O. BOX 1470

City DECATUR	State IL	Zip Code 62525
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FEC ID number of contributing federal political committee. **C** C00093963

Name of Employer	Occupation
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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
08 / 03 / 2016

Transaction ID : SA11C.113797

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	12500.00
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 60 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ARDA-ROC

Mailing Address 1201 15TH ST NW SUITE 400

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00358663

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 Y
09 / 26 / 2016

Transaction ID : SA11C.114196

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address 1219 28TH ST NW

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00118208

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114268

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ASPLUNDH TREE EXPERT CO POLITICAL ACTION COMMITTEE (ATE PAC)

Mailing Address BLAIR MILL ROAD

City WILLOW GROVE	State PA	Zip Code 19090
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00177741

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 Y
08 / 24 / 2016

Transaction ID : SA11C.113891

Amount of Each Receipt this Period
5000.00

Memo Item

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 Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ASSOCIATION OF EQUIPMENT MANUFACTURERS POLITICAL ACTION COMMITTEE

Mailing Address 1000 VERMONT AVENUE, NW
SUITE 450

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00442996

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 Y
09 / 02 / 2016

Transaction ID : SA11C.113973

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BAE SYSTEMS USA PAC

Mailing Address 1300 17TH ST N
SUITE 1400

City ARLINGTON	State VA	Zip Code 22209
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00281212

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
09 / 30 / 2016

Transaction ID : SA11C.114266

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BAKER BOTTS BLUEBONNET FUND

Mailing Address 910 LOUISIANA ST
SUITE 3000

City HOUSTON	State TX	Zip Code 77002
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00077552

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114289

Amount of Each Receipt this Period
1000.00

Memo Item

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 62 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BAKER, DONELSON, BEARMAN, CALDWELL & BERKOWITZ, PC PAC

Mailing Address 901 K ST. NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00431072

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11C.114190

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BASF CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 100 PARK AVENUE

City FLORHAM PARK State NJ Zip Code 07932

FEC ID number of contributing federal political committee. **C** C00340075

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 Y
09 / 30 / 2016

Transaction ID : SA11C.114311

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BLESSEY MARINE SERVICE INC. PAC

Mailing Address PO BOX 23734

City HARAHAN State LA Zip Code 70183

FEC ID number of contributing federal political committee. **C** C00409789

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
09 / 26 / 2016

Transaction ID : SA11C.114200

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CANAL BARGE PAC

Mailing Address 835 UNION STREET

City NEW ORLEANS	State LA	Zip Code 70112
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00541110

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
09 / 26 / 2016

Transaction ID : SA11C.114180

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CELLULAR TELECOMM/INTERNET ASSOC

Mailing Address 1250 CONNECTICUT AVE NW
SUITE 800

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00262295

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
07 / 20 / 2016

Transaction ID : SA11C.113700

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CENTURYLINK INC. EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 1099 NEW YORK AVENUE NW
SUITE 250

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00419911

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
08 / 24 / 2016

Transaction ID : SA11C.113898

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CH2M HILL COMPANIES LTD PAC

Mailing Address 9191 S JAMAICA STREET

City ENGLEWOOD	State CO	Zip Code 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 ▼
8000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : SA11C.113999

Amount of Each Receipt this Period

1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CH2M HILL COMPANIES LTD PAC

Mailing Address 9191 S JAMAICA STREET

City ENGLEWOOD	State CO	Zip Code 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 ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114298

Amount of Each Receipt this Period

2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGROUP PAC-FEDERAL)

Mailing Address 1101 PENNSYLVANIA AVENUE NW #1000

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00008474

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
09 / 30 / 2016

Transaction ID : SA11C.114283

Amount of Each Receipt this Period

3000.00

Memo Item

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	FOR LINE NUMBER: (check only one)		PAGE 65 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

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

Mailing Address 200 E. BASSE ROAD

City SAN ANTONIO	State TX	Zip Code 78209
---------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 8500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11C.114265

Amount of Each Receipt this Period
 _____ 1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CONCRETE REINFORCING STEEL INSTITUTE PAC (REBAR PAC)

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 ▼
 _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11C.114274

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CONNECTICUT ASSOCIATION OF OPTOMETRISTS INC PAC; THE

Mailing Address 35 COLD SPRING ROAD SUITE 211

City ROCKY HILL	State CT	Zip Code 06067
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00453290

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
 09 / 26 / 2016

Transaction ID : SA11C.114178

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

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)		PAGE 66 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CONSERVATIVE OPPURTUNITY LEADERSHIP AND ENTERPRISE PAC (COLE PAC)

Mailing Address 12176 CHANCERY STATION CIRCLE

City RESTON	State VA	Zip Code 20190
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00404392

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
09 / 22 / 2016

Transaction ID : SA11C.114119

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CONSERVATIVE OPPURTUNITY LEADERSHIP AND ENTERPRISE PAC (COLE PAC)

Mailing Address 12176 CHANCERY STATION CIRCLE

City RESTON	State VA	Zip Code 20190
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00404392

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
09 / 26 / 2016

Transaction ID : SA11C.114186

Amount of Each Receipt this Period
2500.00

Memo Item

C. 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 ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114309

Amount of Each Receipt this Period
5000.00

Memo Item

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 Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CONTINENTAL AUTOMOTIVE INC PAC (CONTI PAC)

Mailing Address 700 13TH STREET NW SUITE 600

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00551846

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
 07 / 20 / 2016

Transaction ID : SA11C.113701

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

B. 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 ▼
 _____ 7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : SA11C.114201

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CRUISE LINES INTERNATIONAL ASSOC PAC

Mailing Address 2111 WILSON BLVD
8TH FLOOR

City ARLINGTON	State VA	Zip Code 22201
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00432393

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 Y
 09 / 30 / 2016

Transaction ID : SA11C.114262

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

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	FOR LINE NUMBER: (check only one)		PAGE 68 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAY & ZIMMERMAN INC FEDERAL

Mailing Address 1655 FORT MYER DR N
SUITE 520

City ARLINGTON	State VA	Zip Code 22209
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00341271

Name of Employer	Occupation
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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
09 / 26 / 2016

Transaction ID : SA11C.114199

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DAY & ZIMMERMAN INC FEDERAL

Mailing Address 1655 FORT MYER DR N
SUITE 520

City ARLINGTON	State VA	Zip Code 22209
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FEC ID number of contributing federal political committee. **C** C00341271

Name of Employer	Occupation
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Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114307

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 400 NORTH CAPITOL STREET NW
SUITE 875

City WASHINGTON	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C00108209

Name of Employer	Occupation
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Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
9500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 11 / 2016

Transaction ID : SA11C.113868

Amount of Each Receipt this Period
5000.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

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

Mailing Address PO BOX 6312

City LIBERTYVILLE	State IL	Zip Code 60048
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00572123

Name of Employer	Occupation
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Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2028.87

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11C.113876

Amount of Each Receipt this Period
2028.87

Memo Item
IN-KIND:EVENT CATERING

B. Full Name (Last, First, Middle Initial)
ECOLAB INC. POLITICAL ACTION COMMITTEE

Mailing Address 370 WABASH STREET N.

City ST. PAUL	State MN	Zip Code 55102
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00101485

Name of Employer	Occupation
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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 Y
09 / 30 / 2016

Transaction ID : SA11C.114276

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
EMPLOYEES OF NORTHROP GRUMMAN CORP

Mailing Address 520 GRAND AVE S
SUITE 700

City LOS ANGELES	State CA	Zip Code 90071
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer	Occupation
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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 Y
07 / 20 / 2016

Transaction ID : SA11C.113705

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	12028.87
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 70 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. 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
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Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114263

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ERIE INDEMNITY COMPANY PAC - FEDERAL

Mailing Address 100 ERIE INSURANCE PLACE

City ERIE	State PA	Zip Code 16530
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00153577

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
08 / 24 / 2016

Transaction ID : SA11C.113893

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ERIE INDEMNITY COMPANY PAC - FEDERAL

Mailing Address 100 ERIE INSURANCE PLACE

City ERIE	State PA	Zip Code 16530
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00153577

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
08 / 24 / 2016

Transaction ID : SA11C.113894

Amount of Each Receipt this Period
1000.00

Memo Item

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: (check only one)		PAGE 71 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FAA MANAGERS ASSOCIATION, INC. PAC

Mailing Address #315 4410 MASSACHUSETTS AVE NW

City WASHINGTON	State DC	Zip Code 20016
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00366070

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 Y
07 / 20 / 2016

Transaction ID : SA11C.113695

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 942 SHADY GROVE RD S

City MEMPHIS	State TN	Zip Code 38120
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00068692

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 Y
08 / 24 / 2016

Transaction ID : SA11C.113896

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FLORIDA EAST COAST INDUSTRIES INC GOOD GOVERNMENT COMMITTEE (FECI PAC)

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 ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11C.114185

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	12500.00
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 72 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FMC CORPORATION GOOD GOVERNMENT PROGRAM

Mailing Address 1600 WILSON BOULEVARD
SUITE 700

City ARLINGTON	State VA	Zip Code 22209
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00033704

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
09 / 30 / 2016

Transaction ID : SA11C.114297

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FOOD MARKETING INSTITUTE PAC

Mailing Address 2345 CRYSTAL DR SUITE 800

City WASHINGTON	State DC	Zip Code 22202
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00014555

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
08 / 24 / 2016

Transaction ID : SA11C.113899

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FORD MOTOR CO CIVIC ACTION FUND

Mailing Address 1350 I STREET NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00046474

Name of Employer	Occupation
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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 Y
09 / 30 / 2016

Transaction ID : SA11C.114270

Amount of Each Receipt this Period
5000.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FUND FOR AMERICAN OPPORTUNITY

Mailing Address POST OFFICE BOX 65796

City WASHINGTON	State DC	Zip Code 20035
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00336297

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
09 / 30 / 2016

Transaction ID : SA11C.114292

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS VOLUNTARY PAC

Mailing Address 2941 FAIRVIEW PARK DR
SUITE 100

City FALLS CHURCH	State VA	Zip Code 22042
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00078451

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 Y
09 / 30 / 2016

Transaction ID : SA11C.114303

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 1101 14TH ST NW
SUITE 750

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00215129

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
09 / 30 / 2016

Transaction ID : SA11C.114294

Amount of Each Receipt this Period
1000.00

Memo Item

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 74 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HARRIS CORPORATION PAC

Mailing Address 600 MARYLAND AVE SW STE. 850 E

City WASHINGTON	State DC	Zip Code 20024
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00100321

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 24 / 2016

Transaction ID : SA11C.113897

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

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

Mailing Address 600 MARYLAND AVE SW STE. 850 E

City WASHINGTON	State DC	Zip Code 20024
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00100321

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11C.114267

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

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

Mailing Address 600 MARYLAND AVE SW STE. 850 E

City WASHINGTON	State DC	Zip Code 20024
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00100321

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11C.114279

Amount of Each Receipt this Period
 _____ 3000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 5000.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HDR, INC PAC

Mailing Address 8404 INDIAN HILLS DR

City OMAHA	State NE	Zip Code 68114
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00103903

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 Y
08 / 03 / 2016

Transaction ID : SA11C.113790

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HORNBECK OFFSHORE SERVICES INC POLITICAL ACTION COMMITTEE

Mailing Address 103 NORTH PARK BLVD SUITE 300

City COVINGTON	State LA	Zip Code 70433
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00424366

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
09 / 26 / 2016

Transaction ID : SA11C.114193

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HUSCH BLACKWELL POLITICAL ACTION COMMITTEE

Mailing Address 4801 MAIN STREET
SUITE 1000

City KANSAS CITY	State MO	Zip Code 64112
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00424382

Name of Employer	Occupation
------------------	------------

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
08 / 24 / 2016

Transaction ID : SA11C.113892

Amount of Each Receipt this Period
500.00

Memo Item

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: (check only one)		PAGE 76 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
INGRAM BARGE COMPANY PAC

Mailing Address ONE BELLE MEADE PL 4400 HARDING RD

City NASHVILLE	State TN	Zip Code 37205
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00364471

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
09 / 26 / 2016

Transaction ID : SA11C.114179

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
INVEST IN A STRONG AND SECURE AMERICA - ISSA PAC

Mailing Address PO BOX 3799

City VISTA	State CA	Zip Code 92085
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00450320

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
09 / 01 / 2016

Transaction ID : SA11C.113971

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address PO BOX 26141

City ALEXANDRIA	State VA	Zip Code 22313
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00582726

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
09 / 26 / 2016

Transaction ID : SA11C.114191

Amount of Each Receipt this Period
1000.00

Memo Item

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: (check only one)		PAGE 77 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

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

Mailing Address 2150 RIVER PLAZA DR. #150

City SACRAMENTO	State CA	Zip Code 95833
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00489112

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 Y
09 / 22 / 2016

Transaction ID : SA11C.114118

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JM FAMILY ENTERPRISES INC PAC

Mailing Address 111 JIM MORAN BLVD

City DEERFIELD BEACH	State FL	Zip Code 33442
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00240911

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA11C.113699

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JM FAMILY ENTERPRISES INC PAC

Mailing Address 111 JIM MORAN BLVD

City DEERFIELD BEACH	State FL	Zip Code 33442
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00240911

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : SA11C.113794

Amount of Each Receipt this Period
2500.00

Memo Item

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 Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

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

Mailing Address 55 WAUGH DR SUITE 1000

City HOUSTON	State TX	Zip Code 77007
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00250027

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
09 / 26 / 2016

Transaction ID : SA11C.114195

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LATOURETTE FOR CONGRESS

Mailing Address 320 KENARDEN DR

City CLEVELAND	State OH	Zip Code 44143
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00284174

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
09 / 30 / 2016

Transaction ID : SA11C.114290

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LEHIGH HANSON INC POLITICAL ACTION COMMITTEE

Mailing Address 300 E JOHN CARPENTER FREEWAY

City IRVING	State TX	Zip Code 75062
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00493270

Name of Employer	Occupation
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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
09 / 22 / 2016

Transaction ID : SA11C.114121

Amount of Each Receipt this Period
2500.00

Memo Item

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	FOR LINE NUMBER: (check only one)		PAGE 79 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LEIDOS INC. POLITICAL ACTION COMMITTEE

Mailing Address 301 LABORATORY ROAD

City OAK RIDGE	State TN	Zip Code 37830
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00546234

Name of Employer	Occupation
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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
 09 / 30 / 2016

Transaction ID : SA11C.114302

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EPAC

Mailing Address 2121 CRYSTAL DRIVE - SUITE 100

City ARLINGTON	State VA	Zip Code 22202
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer	Occupation
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Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016

Transaction ID : SA11C.113671

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LOEWS CORPORATION PUBLIC AFFAIRS COMMITTEE

Mailing Address 655 MADISON AVENUE
ATT: CORPORATE SECRETARY

City NEW YORK	State NY	Zip Code 10065
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00416495

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
 09 / 30 / 2016

Transaction ID : SA11C.114280

Amount of Each Receipt this Period
 1000.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 80 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LOWE'S COMPANIES INC PAC

Mailing Address 1000 LOWE'S BOULEVARD

City MOORESVILLE	State NC	Zip Code 28117
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00251751

Name of Employer	Occupation
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Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114277

Amount of Each Receipt this Period
3000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL ASPHALT PAVEMENT ASSOCIATION PAC (NAPA-PAC)

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 600 WEST

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00444539

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
09 / 30 / 2016

Transaction ID : SA11C.114301

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF SURETY BOND PRODUCERS POLITICAL ACTION COMMITTEE (SURETYPAC)

Mailing Address 1140 19TH STREET NW
SUITE 800

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00300525

Name of Employer	Occupation
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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
09 / 30 / 2016

Transaction ID : SA11C.114291

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	5000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL AUTOMOBILE DEALERS ASSOCIATION PAC

Mailing Address 8400 WESTPARK DR

City MC LEAN	State VA	Zip Code 22102
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00040998

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 Y
09 / 26 / 2016

Transaction ID : SA11C.114188

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION PAC

Mailing Address 1101 KING ST SUITE 600

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer	Occupation
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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 Y
08 / 24 / 2016

Transaction ID : SA11C.113895

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL EMERGENCY MEDICINE PAC

Mailing Address 2121 K ST NW SUITE 325

City WASHINGTON	State DC	Zip Code 20037
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00140061

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
08 / 03 / 2016

Transaction ID : SA11C.113793

Amount of Each Receipt this Period
1000.00

Memo Item

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	FOR LINE NUMBER: (check only one)		PAGE 82 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. 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
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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 Y
07 / 20 / 2016

Transaction ID : SA11C.113702

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL TANK TRUCK CARRIERS PAC

Mailing Address 950 GLEBE RD N SUITE 520

City ARLINGTON	State VA	Zip Code 22203
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FEC ID number of contributing federal political committee. **C** C00188011

Name of Employer	Occupation
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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 Y
09 / 26 / 2016

Transaction ID : SA11C.114184

Amount of Each Receipt this Period
4000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NOSSAMAN LLP POLITICAL ACTION COMMITTEE (NOSSAMAN PAC)

Mailing Address 1666 K STREET, NW SUITE 500

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00473652

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
09 / 30 / 2016

Transaction ID : SA11C.114281

Amount of Each Receipt this Period
1000.00

Memo Item

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: (check only one)		PAGE 83 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
OFFSHORE MARINE SERVICE ASSOCIATION PAC

Mailing Address 935 GRAAVIER STREET
SUITE 2040

City NEW ORLEANS	State LA	Zip Code 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 ▼
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11C.114177

Amount of Each Receipt this Period
1900.00

Memo Item

B. Full Name (Last, First, Middle Initial)
OLD CASTLE MATERIALS INC. PAC

Mailing Address 101 CONSTITUTION AVE NW
SUITE 600W

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00346353

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11C.114120

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
OLD DOMINION FREIGHT LINE INC POLITICAL ACTION COMMITTEE (OLD DOMINION PAC)

Mailing Address 500 OLD DOMINION WAY

City THOMASVILLE	State NC	Zip Code 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 ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114273

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	5400.00
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 84 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
OSHKOSH CORPORATION EMPLOYEES

Mailing Address PO BOX 2566

City OSHKOSH	State WI	Zip Code 54903
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00304477

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
08 / 03 / 2016

Transaction ID : SA11C.113792

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
OSHKOSH CORPORATION EMPLOYEES

Mailing Address PO BOX 2566

City OSHKOSH	State WI	Zip Code 54903
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00304477

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 Y
09 / 26 / 2016

Transaction ID : SA11C.114187

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PARSONS BRINCKERHOFF INC PAC

Mailing Address ONE PENN PLAZA

City NEW YORK	State NY	Zip Code 10119
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00287003

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114264

Amount of Each Receipt this Period
1000.00

Memo Item

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	FOR LINE NUMBER: (check only one)		PAGE 85 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. 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 ▼
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : SA11C.113799

Amount of Each Receipt this Period
1000.00

Memo Item

B. 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 ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11C.113878

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PHYSICAL THERAPY (PTPAC)

Mailing Address 1111 FAIRFAX ST N

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 27 / 2016

Transaction ID : SA11C.113782

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PORTLAND CEMENT ASSOCIATION, INC. PAC

Mailing Address 500 NEW JERSEY AVE NW
SEVENTH FLOOR

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114299

Amount of Each Receipt this Period
1000.00

Memo Item

B. 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 General
 Other (specify) ▼

Election Cycle-to-Date ▼
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : SA11C.113800

Amount of Each Receipt this Period
1000.00

Memo Item

C. 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 General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114282

Amount of Each Receipt this Period
1500.00

Memo Item

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)		PAGE 87 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

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

Mailing Address 430 MICHIGAN AVE N

City CHICAGO	State IL	Zip Code 60611
-----------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
9000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : SA11C.113666

Amount of Each Receipt this Period
4000.00

Memo Item

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

Mailing Address 430 MICHIGAN AVE N

City CHICAGO	State IL	Zip Code 60611
-----------------	-------------	-------------------

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

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 Y
07 / 14 / 2016

Transaction ID : SA11C.113668

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
REPUBLICAN MAINSTREET PARTNERSHIP PAC

Mailing Address C/O G&W 2201 WISCONSIN AVE., N
SUITE 320

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00165159

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
09 / 26 / 2016

Transaction ID : SA11C.114176

Amount of Each Receipt this Period
1000.00

Memo Item

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	FOR LINE NUMBER: (check only one)		PAGE 88 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RETAIL LEADERS PAC

Mailing Address 1700 N. MOORE STREET
SUITE 2250

City ARLINGTON	State VA	Zip Code 22209
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00112763

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
09 / 30 / 2016

Transaction ID : SA11C.114287

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
RICHARD HANNA FOR CONGRESS

Mailing Address PO BOX 118

City UTICA	State NY	Zip Code 13503
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00451005

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
09 / 16 / 2016

Transaction ID : SA11C.114036

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RICHARD HANNA FOR CONGRESS

Mailing Address PO BOX 118

City UTICA	State NY	Zip Code 13503
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00451005

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
09 / 22 / 2016

Transaction ID : SA11C.114122

Amount of Each Receipt this Period
1000.00

Memo Item

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: (check only one)	PAGE 89 OF 200
	<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)
ROCKWELL COLLINS EMPLOYEE PAC

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 ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114296

Amount of Each Receipt this Period
3000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SCHEIDER NATIONAL INC. TRANS PAC

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 ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114308

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address 300 NEW JERSEY AVENUE, NW
SUITE 1000

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00353797

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 24 / 2016

Transaction ID : SA11C.113890

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	6500.00
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 90 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SOUTHERN COMPANY EMPLOYEES PAC

Mailing Address 601 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114275

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SPACE EXPLORATION TECHNOLOGIES CORPORATION PAC

Mailing Address 1030 15TH STREET, NW
SUITE 220 E

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00411116

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114293

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address ONE STATE FARM PLAZA
C/O MARK SCHWAMBERGER, TREASURER,

City BLOOMINGTON	State IL	Zip Code 61710
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00544817

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
07 / 27 / 2016

Transaction ID : SA11C.113783

Amount of Each Receipt this Period
1000.00

Memo Item

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 91 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STUPP BROS INC POLITICAL ACTION COMMITTEE (STUPP PAC)

Mailing Address 3800 WEBER ROAD

City ST LOUIS	State MO	Zip Code 63125
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00554097

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114310

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TESORO PETROLEUM CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 19100 RIDGEWOOD PARKWAY

City SAN ANTONIO	State TX	Zip Code 78259
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00358366

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
07 / 20 / 2016

Transaction ID : SA11C.113696

Amount of Each Receipt this Period
2500.00

Memo Item

C. 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 ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 25 / 2016

Transaction ID : SA11C.113722

Amount of Each Receipt this Period
1000.00

Memo Item

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 92 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. 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 ▼
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114295

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
THE HOME DEPOT INC. PAC

Mailing Address 101 CONSTITUTION AVE NW
SUITE 800 WEST

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00284885

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 Y
09 / 12 / 2016

Transaction ID : SA11C.113997

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TRANSPORTATION TRADES DEPARTMENT AFL-CIO PAC

Mailing Address 815 16TH ST NW
4TH FLOOR

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00280909

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 Y Y
09 / 30 / 2016

Transaction ID : SA11C.114288

Amount of Each Receipt this Period
1000.00

Memo Item

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 93 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TRINITY INDUSTRIES PAC

Mailing Address 2525 STEMMONS FWY.

City DALLAS	State TX	Zip Code 75207
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00268904

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 Y
07 / 14 / 2016

Transaction ID : SA11C.113667

Amount of Each Receipt this Period
3000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TTX COMPANY EMPLOYEES

Mailing Address 101 WACKER DR N

City CHICAGO	State IL	Zip Code 60606
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00138974

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
09 / 30 / 2016

Transaction ID : SA11C.114306

Amount of Each Receipt this Period
1500.00

Memo Item

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 TRIANGLE	State VA	Zip Code 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 ▼
6500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : SA11C.113795

Amount of Each Receipt this Period
1000.00

Memo Item

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

FOR LINE NUMBER: PAGE 94 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UNITED MINE WORKERS OF AMERICA - COAL MINERS POLITICAL ACTION COMMITTEE

Mailing Address 18354 QUANTICO GATEWAY DR
SUITE 200

City TRIANGLE State VA Zip Code 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 ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.114269

Amount of Each Receipt this Period
3500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
VULCAN MATERIALS COMPANY POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 385014

City BIRMINGHAM State AL Zip Code 35238

FEC ID number of contributing federal political committee. **C** C00116020

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
09 / 12 / 2016

Transaction ID : SA11C.113998

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WALMART STORES INC. PAC

Mailing Address 702 8TH ST SW

City BENTONVILLE State AR Zip Code 72716

FEC ID number of contributing federal political committee. **C** C00093054

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
09 / 12 / 2016

Transaction ID : SA11C.113996

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 95 OF 200	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WEBER FOR CONGRESS

Mailing Address PO BOX 1327

City FRIENDSWOOD	State TX	Zip Code 77549
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00502229

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11C.114116

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WERNER ENTERPRISES INC POLITICAL ACTION COMMITTEE

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 ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : SA11C.113789

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WERNER ENTERPRISES INC POLITICAL ACTION COMMITTEE

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 ▼
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11C.114182

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	7700.00
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 96 OF 200
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WESTINGHOUSE ELECTRIC COMPANY LLC PAC

Mailing Address 1775 PENNSYLVANIA AVE NW
SUITE 250

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00346361

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
09 / 26 / 2016

Transaction ID : SA11C.114197

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WEXLER & WALKER PUBLIC POLICY PAC

Mailing Address 1317 F STREET NW
SUITE 600

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00248195

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
09 / 26 / 2016

Transaction ID : SA11C.114192

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	295989.27

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

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

FOR LINE NUMBER: PAGE 97 OF 200
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GROSSMAN, ANDREW, , ,

Mailing Address 3714 LEYLAND DR

City MECHANICSBURG State PA Zip Code 17050

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 ▼
 _____ 1567.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2016

Transaction ID : SA14.114250

Amount of Each Receipt this Period
 _____ 1567.60

Memo Item
REFUND OF OVERPAYMENT

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	_____ 1567.60
TOTAL This Period (last page this line number only).....▶	_____ 1567.60

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. 814 CONSULTING LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016		
Mailing Address 5827 COLFAX AVE.			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22311	Amount of Each Disbursement this Period 19062.03		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : SB17.113824		
Candidate Name		Memo Item <input type="checkbox"/>			
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. ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2016		
Mailing Address P.O. BOX 98000			FEC Identification Number C C00335570		
City LAFAYETTE	State LA	Zip Code 70509	Amount of Each Disbursement this Period 860.40		
Purpose of Disbursement IN-KIND: EVENT CATERING		Category/ Type	Transaction ID : SB17.114252		
Candidate Name ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC		Memo Item <input type="checkbox"/>			
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. ADP			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016		
Mailing Address 1 ADP BLVD			FEC Identification Number C		
City ROSELAND	State NJ	Zip Code 07068	Amount of Each Disbursement this Period 1530.97		
Purpose of Disbursement SEE MEMO ENTRY		Category/ Type 001	Transaction ID : SB17.114022		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	21453.40
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 Page	FOR LINE NUMBER: (check only one)		PAGE 99 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BOOCKS, MEGHAN, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016	
Mailing Address 511 PAYNE HILL ROAD APT 212			FEC Identification Number C	
City JEFFERSON HILLS	State PA	Zip Code 15025	Amount of Each Disbursement this Period 1530.97	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114060	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. ADP			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016	
Mailing Address 1 ADP BLVD			FEC Identification Number C	
City ROSELAND	State NJ	Zip Code 07068	Amount of Each Disbursement this Period 782.54	
Purpose of Disbursement PAYROLL TAXES		Category/ Type 001	Transaction ID : SB17.114023	
Candidate Name		Memo Item <input type="checkbox"/>		
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. ADP			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2016	
Mailing Address 1 ADP BLVD			FEC Identification Number C	
City ROSELAND	State NJ	Zip Code 07068	Amount of Each Disbursement this Period 123.14	
Purpose of Disbursement PAYROLL FEES		Category/ Type 001	Transaction ID : SB17.114024	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	905.68
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement
Mailing Address 1 ADP BLVD		M M / D D / Y Y Y Y 07 / 15 / 2016
City ROSELAND	State NJ	Zip Code 07068
Purpose of Disbursement PAYROLL FEES	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period 115.28	
		Transaction ID : SB17.114025
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement
Mailing Address 1 ADP BLVD		M M / D D / Y Y Y Y 07 / 22 / 2016
City ROSELAND	State NJ	Zip Code 07068
Purpose of Disbursement PAYROLL FEES	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period 7.00	
		Transaction ID : SB17.114026
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement
Mailing Address 1 ADP BLVD		M M / D D / Y Y Y Y 07 / 28 / 2016
City ROSELAND	State NJ	Zip Code 07068
Purpose of Disbursement PAYROLL TAXES	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period 3599.07	
		Transaction ID : SB17.114027
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3721.35
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. ADP

Full Name (Last, First, Middle Initial)
Mailing Address 1 ADP BLVD

City ROSELAND State NJ Zip Code 07068

Purpose of Disbursement SEE MEMO ENTRIES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 07 / 28 / 2016

FEC Identification Number C

Amount of Each Disbursement this Period 8804.25

Transaction ID : SB17.114028

Memo Item

B. BOOCKS, MEGHAN, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 511 PAYNE HILL ROAD APT 212

City JEFFERSON HILLS State PA Zip Code 15025

Purpose of Disbursement SALARY Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 07 / 28 / 2016

FEC Identification Number C

Amount of Each Disbursement this Period 1530.97

Transaction ID : SB17.114054

Memo Item

C. GROSSMAN, ANDREW, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 3714 LEYLAND DR

City MECHANICSBURG State PA Zip Code 17050

Purpose of Disbursement SALARY Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 07 / 28 / 2016

FEC Identification Number C

Amount of Each Disbursement this Period 1567.60

Transaction ID : SB17.114055

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 8804.25

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MEARKLE, JENNIFER, , MS.,			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2016	
Mailing Address 3022 BROAD AVE			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16601	Amount of Each Disbursement this Period 170.88	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114056	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. MENZLER, TYLER, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2016	
Mailing Address 701 THOMPSON AVE			FEC Identification Number C	
City DONORA	State PA	Zip Code 15033	Amount of Each Disbursement this Period 2080.03	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114057	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. PSYHOGIOS-SMITH, BRITTANY, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2016	
Mailing Address 700 S. COURTHOUSE RD. #404			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22204	Amount of Each Disbursement this Period 834.60	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114058	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRAUSSER, WILLIAM, , MR.,			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2016	
Mailing Address PO BOX 1023			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16603	Amount of Each Disbursement this Period 2620.17	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114059	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. ADP			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2016	
Mailing Address 1 ADP BLVD			FEC Identification Number C	
City ROSELAND	State NJ	Zip Code 07068	Amount of Each Disbursement this Period 125.50	
Purpose of Disbursement PAYROLL FEES		Category/ Type 001	Transaction ID : SB17.114029	
Candidate Name		Memo Item <input type="checkbox"/>		
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. ADP			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2016	
Mailing Address 1 ADP BLVD			FEC Identification Number C	
City ROSELAND	State NJ	Zip Code 07068	Amount of Each Disbursement this Period 7.00	
Purpose of Disbursement PAYROLL FEES		Category/ Type 001	Transaction ID : SB17.114030	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	132.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 200			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2016		
Mailing Address 1 ADP BLVD			FEC Identification Number C		
City ROSELAND	State NJ	Zip Code 07068	Amount of Each Disbursement this Period 13581.89		
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.114031		
Candidate Name		<input type="checkbox"/> Memo Item			
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. BOOCKS, MEGHAN, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2016		
Mailing Address 511 PAYNE HILL ROAD APT 212			FEC Identification Number C		
City JEFFERSON HILLS	State PA	Zip Code 15025	Amount of Each Disbursement this Period 1530.97		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114047		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. CONTRES, CASEY, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2016		
Mailing Address 2213 7TH AVE APT. A			FEC Identification Number C		
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 4777.63		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114048		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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).....▶	13581.89
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GROSSMAN, ANDREW, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2016	
Mailing Address 3714 LEYLAND DR			FEC Identification Number C	
City MECHANICSBURG	State PA	Zip Code 17050	Amount of Each Disbursement this Period 1567.60	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114049	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. MEARKLE, JENNIFER, , MS.,			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2016	
Mailing Address 3022 BROAD AVE			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16601	Amount of Each Disbursement this Period 170.88	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114050	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. MENZLER, TYLER, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2016	
Mailing Address 701 THOMPSON AVE			FEC Identification Number C	
City DONORA	State PA	Zip Code 15033	Amount of Each Disbursement this Period 2080.05	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114051	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PSYHOGIOS-SMITH, BRITTANY, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2016	
Mailing Address 700 S. COURTHOUSE RD. #404			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22204	Amount of Each Disbursement this Period 834.60	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114052	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. STRAESSER, WILLIAM, , MR.,			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2016	
Mailing Address PO BOX 1023			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16603	Amount of Each Disbursement this Period 2620.16	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114053	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. ADP			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2016	
Mailing Address 1 ADP BLVD			FEC Identification Number C	
City ROSELAND	State NJ	Zip Code 07068	Amount of Each Disbursement this Period 6912.71	
Purpose of Disbursement PAYROLL TAXES		Category/ Type 001	Transaction ID : SB17.114032	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	6912.71
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 200			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <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		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2016
Mailing Address 1 ADP BLVD		FEC Identification Number C
City ROSELAND	State NJ	Zip Code 07068
Purpose of Disbursement PAYROLL TAXES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 407.59
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2016
Mailing Address 1 ADP BLVD		FEC Identification Number C
City ROSELAND	State NJ	Zip Code 07068
Purpose of Disbursement SEE MEMO ENTRIES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1108.30
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. BEENER, ASHLEY, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address 701 THOMPSON AVE		FEC Identification Number C
City DONORA	State PA	Zip Code 15033
Purpose of Disbursement SALARY	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 523.33
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:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1515.89
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BOOCKS, MEGHAN, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 511 PAYNE HILL ROAD APT 212			FEC Identification Number C	
City JEFFERSON HILLS	State PA	Zip Code 15025	Amount of Each Disbursement this Period 175.17	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114045	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. MENZLER, TYLER, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 701 THOMPSON AVE			FEC Identification Number C	
City DONORA	State PA	Zip Code 15033	Amount of Each Disbursement this Period 409.80	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114046	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. ADP			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2016	
Mailing Address 1 ADP BLVD			FEC Identification Number C	
City ROSELAND	State NJ	Zip Code 07068	Amount of Each Disbursement this Period 248.64	
Purpose of Disbursement PAYROLL FEES		Category/ Type 001	Transaction ID : SB17.114035	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	248.64
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2016
Mailing Address 1 ADP BLVD		FEC Identification Number C
City ROSELAND	State NJ	Zip Code 07068
Purpose of Disbursement PAYROLL TAXES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 7713.08
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2016
Mailing Address 1 ADP BLVD		FEC Identification Number C
City ROSELAND	State NJ	Zip Code 07068
Purpose of Disbursement SEE MEMO ENTRIES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 15765.79
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. BEENER, ASHLEY, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2016
Mailing Address 701 THOMPSON AVE		FEC Identification Number C
City DONORA	State PA	Zip Code 15033
Purpose of Disbursement SALARY	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1530.97
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:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	23478.87
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BOOCKS, MEGHAN, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2016	
Mailing Address 511 PAYNE HILL ROAD APT 212			FEC Identification Number C	
City JEFFERSON HILLS	State PA	Zip Code 15025	Amount of Each Disbursement this Period 1677.39	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114318	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. CONTRES, CASEY, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2016	
Mailing Address 2213 7TH AVE APT. A			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 4777.63	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114319	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. MEARKLE, JENNIFER, , MS.,			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2016	
Mailing Address 3022 BROAD AVE			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16601	Amount of Each Disbursement this Period 170.88	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114320	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MENZLER, TYLER, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2016	
Mailing Address 701 THOMPSON AVE			FEC Identification Number C	
City DONORA	State PA	Zip Code 15033	Amount of Each Disbursement this Period 2446.08	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114321	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. PSYHOGIOS-SMITH, BRITTANY, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2016	
Mailing Address 700 S. COURTHOUSE RD. #404			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22204	Amount of Each Disbursement this Period 834.60	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114322	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. RODGERS, KEVIN, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2016	
Mailing Address 5403 TALON CT			FEC Identification Number C	
City CLARKSVILLE	State MD	Zip Code 21029	Amount of Each Disbursement this Period 1708.07	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114323	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRAESSER, WILLIAM, , MR.,			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2016	
Mailing Address PO BOX 1023			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16603	Amount of Each Disbursement this Period 2620.17	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.114324	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. ADP			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2016	
Mailing Address 1 ADP BLVD			FEC Identification Number C	
City ROSELAND	State NJ	Zip Code 07068	Amount of Each Disbursement this Period 7.00	
Purpose of Disbursement PAYROLL FEES		Category/ Type 001	Transaction ID : SB17.114255	
Candidate Name		Memo Item <input type="checkbox"/>		
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. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016	
Mailing Address PO BOX 1270			FEC Identification Number C	
City NEWARK	State NJ	Zip Code 07101	Amount of Each Disbursement this Period 16250.83	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.114018	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	16257.83
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COURTYARD BY MARRIOTT			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016	
Mailing Address 2 CONVENTION CENTER BLVD			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 57.00	
Purpose of Disbursement LODGING		Category/ Type 001	Transaction ID : SB17.114068	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. DUNKIN DONUTS			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016	
Mailing Address 3132 PLEASANT VALLEY BLVD			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 60.45	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.114069	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. SEI RESTAURANT			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016	
Mailing Address 444 7TH STREET NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20004	Amount of Each Disbursement this Period 84.00	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.114070	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016	
Mailing Address PO BOX 9001309			FEC Identification Number C	
City LOUISVILLE	State KY	Zip Code 40290	Amount of Each Disbursement this Period 150.00	
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : SB17.114074	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. EXXON			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016	
Mailing Address 542 SOUTH CENTER STREET			FEC Identification Number C	
City EBENSBURG	State PA	Zip Code 15931	Amount of Each Disbursement this Period 200.28	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : SB17.114076	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. SHEETZ INC			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016	
Mailing Address 5700 SIXTH AVENUE			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 223.99	
Purpose of Disbursement TRAVEL EXPENSES		Category/ Type 001	Transaction ID : SB17.114077	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. CONGRESSIONAL BASEBALL GAME FOR CHARITY

Mailing Address 1108 LONGWORTH HOUSE OFFICE BUILDI

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement EVENT TICKETS Category/Type 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
08 / 04 / 2016

FEC Identification Number C

Amount of Each Disbursement this Period 250.00

Transaction ID : SB17.114078

Memo Item

Full Name (Last, First, Middle Initial)
B. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEETING EXPENSES Category/Type 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
08 / 04 / 2016

FEC Identification Number C

Amount of Each Disbursement this Period 285.24

Transaction ID : SB17.114079

Memo Item

Full Name (Last, First, Middle Initial)
C. DELTA AIR LINES

Mailing Address 1030 DELTA BOULEVARD

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement AIRFARE Category/Type 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
08 / 04 / 2016

FEC Identification Number C

Amount of Each Disbursement this Period 368.10

Transaction ID : SB17.114080

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 Page	FOR LINE NUMBER: (check only one)		PAGE 116 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SULLIVAN'S STEAKHOUSE			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016	
Mailing Address 222 S 15TH STREET			FEC Identification Number C	
City OMAHA	State NE	Zip Code 68102	Amount of Each Disbursement this Period 604.87	
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : SB17.114081	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. UNITED AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016	
Mailing Address 1200 E ALGONQUIN ROAD			FEC Identification Number C	
City ELK GROVE VILLAGE	State IL	Zip Code 60007	Amount of Each Disbursement this Period 1930.60	
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : SB17.114082	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. NEMACOLIN WOODLANDS RESORT			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016	
Mailing Address 1001 LAFAYETTE DRIVE			FEC Identification Number C	
City FARMINGTON	State PA	Zip Code 15437	Amount of Each Disbursement this Period 2474.84	
Purpose of Disbursement EVENT FACILITY RENTAL AND CATERING		Category/ Type 001	Transaction ID : SB17.114083	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ACQUA AL 2		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016
Mailing Address 212 7TH STREET SOUTHEAST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement EVENT CATERING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2929.25
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DEL FRISCO GRILLE		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016
Mailing Address 50 ROCKEFELLER PLAZA		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10020
Purpose of Disbursement EVENT CATERING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 5618.63
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2016
Mailing Address PO BOX 1270		FEC Identification Number C
City NEWARK	State NJ	Zip Code 07101
Purpose of Disbursement SEE MEMO ENTRIES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 3953.87
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3953.87
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HAMPTON INN		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2016
Mailing Address 180 CHARLOTTE DRIVE		FEC Identification Number C
City ALTOONA	State PA	Zip Code 16601
Purpose of Disbursement LODGING	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 929.38	
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) ▼	Transaction ID : SB17.114065
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. SOUTHWEST AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2016
Mailing Address 2702 LOVE FIELD DR.		FEC Identification Number C
City DALLAS	State TX	Zip Code 75235
Purpose of Disbursement AIRFARE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 1235.96	
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) ▼	Transaction ID : SB17.114066
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2016
Mailing Address PO BOX 619612 MD 2400		FEC Identification Number C
City DALLAS	State TX	Zip Code 75261
Purpose of Disbursement AIRFARE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 1759.75	
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) ▼	Transaction ID : SB17.114067
State: District:	<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016		
Mailing Address PO BOX 1270			FEC Identification Number C		
City NEWARK	State NJ	Zip Code 07101	Amount of Each Disbursement this Period 243.70		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.114021		
Candidate Name		<input type="checkbox"/> Memo Item			
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. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2016		
Mailing Address PO BOX 1270			FEC Identification Number C		
City NEWARK	State NJ	Zip Code 07101	Amount of Each Disbursement this Period 1129.81		
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.114020		
Candidate Name		<input type="checkbox"/> Memo Item			
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. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2016		
Mailing Address PO BOX 619612 MD 2400			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75261	Amount of Each Disbursement this Period 757.30		
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : SB17.114061		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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).....▶	1373.51
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2016
Mailing Address PO BOX 9001309		FEC Identification Number C
City LOUISVILLE	State KY	Zip Code 40290
Purpose of Disbursement TELEPHONE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 100.00
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:	Transaction ID : SB17.114062 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. HAMPTON INN		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2016
Mailing Address 180 CHARLOTTE DRIVE		FEC Identification Number C
City ALTOONA	State PA	Zip Code 16601
Purpose of Disbursement LODGING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 119.64
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:	Transaction ID : SB17.114063 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. SHEETZ INC		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2016
Mailing Address 5700 SIXTH AVENUE		FEC Identification Number C
City ALTOONA	State PA	Zip Code 16602
Purpose of Disbursement TRAVEL EXPENSES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 127.17
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:	Transaction ID : SB17.114064 <input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2016		
Mailing Address 5555 HILTON STE 106			FEC Identification Number C		
City BATON ROGUE	State LA	Zip Code 70808	Amount of Each Disbursement this Period 79.20		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.114017		
Candidate Name		<input type="checkbox"/> Memo Item			
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. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2016		
Mailing Address 5555 HILTON STE 106			FEC Identification Number C		
City BATON ROGUE	State LA	Zip Code 70808	Amount of Each Disbursement this Period 48.90		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.114256		
Candidate Name		<input type="checkbox"/> Memo Item			
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. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2016		
Mailing Address 5555 HILTON STE 106			FEC Identification Number C		
City BATON ROGUE	State LA	Zip Code 70808	Amount of Each Disbursement this Period 378.09		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.114316		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	506.19
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ATLANTIC BROADBAND			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016		
Mailing Address BOX 371801			FEC Identification Number C		
City PITTSBURGH	State PA	Zip Code 15250	Amount of Each Disbursement this Period 1191.37		
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : SB17.113763		
Candidate Name		<input type="checkbox"/> Memo Item			
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. ATLANTIC BROADBAND			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016		
Mailing Address BOX 371801			FEC Identification Number C		
City PITTSBURGH	State PA	Zip Code 15250	Amount of Each Disbursement this Period 594.54		
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : SB17.113825		
Candidate Name		<input type="checkbox"/> Memo Item			
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. ATLANTIC BROADBAND			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address BOX 371801			FEC Identification Number C		
City PITTSBURGH	State PA	Zip Code 15250	Amount of Each Disbursement this Period 167.16		
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : SB17.113912		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	1953.07
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ATLANTIC BROADBAND			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address BOX 371801			FEC Identification Number C		
City PITTSBURGH	State PA	Zip Code 15250	Amount of Each Disbursement this Period 107.96		
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : SB17.113965		
Candidate Name		Memo Item <input type="checkbox"/>			
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. ATLANTIC BROADBAND			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address BOX 371801			FEC Identification Number C		
City PITTSBURGH	State PA	Zip Code 15250	Amount of Each Disbursement this Period 565.75		
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : SB17.113967		
Candidate Name		Memo Item <input type="checkbox"/>			
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. ATLANTIC BROADBAND			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address BOX 371801			FEC Identification Number C		
City PITTSBURGH	State PA	Zip Code 15250	Amount of Each Disbursement this Period 916.01		
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : SB17.113968		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	1589.72
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ATLANTIC BROADBAND			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016		
Mailing Address BOX 371801			FEC Identification Number C		
City PITTSBURGH	State PA	Zip Code 15250	Amount of Each Disbursement this Period 600.76		
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : SB17.114129		
Candidate Name		<input type="checkbox"/> Memo Item			
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. BEDFORD JUNIOR LIFESTOCK SALE			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2016		
Mailing Address 108 TELEGRAPH ROAD			FEC Identification Number C		
City BEDFORD	State PA	Zip Code 15522	Amount of Each Disbursement this Period 1670.00		
Purpose of Disbursement EVENT SPONSORSHIP		Category/ Type 001	Transaction ID : SB17.114002		
Candidate Name		<input type="checkbox"/> Memo Item			
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. BEENER, ASHLEY, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016		
Mailing Address 701 THOMPSON AVE			FEC Identification Number C		
City DONORA	State PA	Zip Code 15033	Amount of Each Disbursement this Period 581.16		
Purpose of Disbursement MILEAGE		Category/ Type 001	Transaction ID : SB17.113978		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	2851.92
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 125 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BENZELS BRETZEL BAKERY			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 5200 SIXTH AVENUE			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.113913	
Candidate Name		Memo Item <input type="checkbox"/>		
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. BERKE FARAH LLP			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address 2101 L STREET NW STE. 1000			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20037	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement LEGAL CONSULTING		Category/ Type 001	Transaction ID : SB17.113764	
Candidate Name		Memo Item <input type="checkbox"/>		
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. BERKE FARAH LLP			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016	
Mailing Address 2101 L STREET NW STE. 1000			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20037	Amount of Each Disbursement this Period 3819.21	
Purpose of Disbursement LEGAL CONSULTING		Category/ Type 001	Transaction ID : SB17.113826	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	5369.21
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 126 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BERKE FARAH LLP			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016	
Mailing Address 2101 L STREET NW STE. 1000			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20037	Amount of Each Disbursement this Period 3329.00	
Purpose of Disbursement LEGAL CONSULTING		Category/ Type 001	Transaction ID : SB17.113979	
Candidate Name		<input type="checkbox"/> Memo Item		
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. BIG A BOOSTER CLUB			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 1415 SIXTH AVENUE			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 350.00	
Purpose of Disbursement ADVERTISING		Category/ Type 001	Transaction ID : SB17.113914	
Candidate Name		<input type="checkbox"/> Memo Item		
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. BISHOP GUILFOYLE H.S. ATHLETIC DEPT			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2016	
Mailing Address ATTN: MRS LYNN ADAMS 2400 PLEASANT VALLEY BLVD			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 350.00	
Purpose of Disbursement EVENT SPONSORSHIP		Category/ Type 001	Transaction ID : SB17.113752	
Candidate Name		<input type="checkbox"/> Memo Item		
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).....▶	4029.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BLAIR CO REPUBLICAN COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address C/O BETH BRITZ 1009 NEWRY LANE			FEC Identification Number C	
City DUNCANSVILLE	State PA	Zip Code 16635	Amount of Each Disbursement this Period 750.00	
Purpose of Disbursement OFFICE RENT		Category/ Type 001	Transaction ID : SB17.113915	
Candidate Name BLAIR CO REPUBLICAN COMMITTEE		Memo Item <input type="checkbox"/>		
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. BOOCKS, MEGHAN, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016	
Mailing Address 511 PAYNE HILL ROAD APT 212			FEC Identification Number C	
City JEFFERSON HILLS	State PA	Zip Code 15025	Amount of Each Disbursement this Period 1133.66	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.113846	
Candidate Name		Memo Item <input type="checkbox"/>		
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. BOOCKS, MEGHAN, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016	
Mailing Address 511 PAYNE HILL ROAD APT 212			FEC Identification Number C	
City JEFFERSON HILLS	State PA	Zip Code 15025	Amount of Each Disbursement this Period 1009.12	
Purpose of Disbursement MILEAGE		Category/ Type 001	Transaction ID : SB17.113847	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	1883.66
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BOOCKS, MEGHAN, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2016		
Mailing Address 511 PAYNE HILL ROAD APT 212			FEC Identification Number C		
City JEFFERSON HILLS	State PA	Zip Code 15025	Amount of Each Disbursement this Period 2099.04		
Purpose of Disbursement MILEAGE		Category/ Type 001	Transaction ID : SB17.114106		
Candidate Name		<input type="checkbox"/> Memo Item			
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. BROADRICK, MARK, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016		
Mailing Address 301 SEAWAY AVENUE			FEC Identification Number C		
City ALTOONA	State PA	Zip Code 16601	Amount of Each Disbursement this Period 1200.00		
Purpose of Disbursement OFFICE RENT		Category/ Type 001	Transaction ID : SB17.113977		
Candidate Name		<input type="checkbox"/> Memo Item			
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. BROADRICK, MARK, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016		
Mailing Address 301 SEAWAY AVENUE			FEC Identification Number C		
City ALTOONA	State PA	Zip Code 16601	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement OFFICE RENT		Category/ Type 001	Transaction ID : SB17.114171		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	4299.04
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 200			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BULL, NANCY, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016
Mailing Address 322 RIDGE AVENUE		FEC Identification Number C
City WAYNESBORO	State PA	Zip Code 17268
Purpose of Disbursement NO ITEMIZATION NECESSARY MEETING EXPENSE		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 100.00
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) ▼	Transaction ID : SB17.113849
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. BULL, NANCY, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016
Mailing Address 322 RIDGE AVENUE		FEC Identification Number C
City WAYNESBORO	State PA	Zip Code 17268
Purpose of Disbursement MILEAGE		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 174.94
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) ▼	Transaction ID : SB17.113872
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. BULL, NANCY, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address 322 RIDGE AVENUE		FEC Identification Number C
City WAYNESBORO	State PA	Zip Code 17268
Purpose of Disbursement MILEAGE		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 76.00
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) ▼	Transaction ID : SB17.113948
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	350.94
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 130 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BURGESON, ERIC, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2016	
Mailing Address 2403 N. UTAH ST.			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22207	Amount of Each Disbursement this Period 68.50	
Purpose of Disbursement MILEAGE		Category/Type 001		
Candidate Name			Transaction ID : SB17.113754	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				

Full Name (Last, First, Middle Initial) B. BURGESON, ERIC, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2016	
Mailing Address 2403 N. UTAH ST.			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22207	Amount of Each Disbursement this Period 70.00	
Purpose of Disbursement SEE MEMO ENTRY		Category/Type 001		
Candidate Name			Transaction ID : SB17.114041	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2016	
Mailing Address 800 MARKET STREET 7TH FLOOR			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94115	Amount of Each Disbursement this Period 70.00	
Purpose of Disbursement TRAVEL EXPENSE		Category/Type 001		
Candidate Name			Transaction ID : SB17.114042	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	138.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 131 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAMBRIA COUNTY REPUBLICAN PARTY			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address 450 LURAY AVENUE			FEC Identification Number C	
City JOHSTOWN	State PA	Zip Code 15904	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.113765	
Candidate Name CAMBRIA COUNTY REPUBLICAN PARTY		Memo Item <input type="checkbox"/>		
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. CAVANAGH, SEAN, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2016	
Mailing Address 23 LINDSAY DRIVE			FEC Identification Number C	
City UNIONTOWN	State PA	Zip Code 15401	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement IN-KIND: ADVERTISING		Category/ Type	Transaction ID : SB17.114163	
Candidate Name		Memo Item <input type="checkbox"/>		
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. CMDI			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2016	
Mailing Address 1593 SPRING HILL ROAD SUITE 400			FEC Identification Number C	
City TYSONS CORNER	State VA	Zip Code 22182	Amount of Each Disbursement this Period 15.60	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.114004	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	2015.60
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 200			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CMDI			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2016		
Mailing Address 1593 SPRING HILL ROAD SUITE 400			FEC Identification Number C		
City TYSONS CORNER	State VA	Zip Code 22182	Amount of Each Disbursement this Period 283.90		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.114005		
Candidate Name		<input type="checkbox"/> Memo Item			
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. CMDI			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2016		
Mailing Address 1593 SPRING HILL ROAD SUITE 400			FEC Identification Number C		
City TYSONS CORNER	State VA	Zip Code 22182	Amount of Each Disbursement this Period 188.40		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.114006		
Candidate Name		<input type="checkbox"/> Memo Item			
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. CMDI			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016		
Mailing Address 1593 SPRING HILL ROAD SUITE 400			FEC Identification Number C		
City TYSONS CORNER	State VA	Zip Code 22182	Amount of Each Disbursement this Period 5.30		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.114007		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	477.60
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 133 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2016
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement CC TRANSACTION FEES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 10.90
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2016
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement CC TRANSACTION FEES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 4.20
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2016
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement CC TRANSACTION FEES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 12.30
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	27.40
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 Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COMMUNITY FOUNDATION OF FAYETTE COUNTY			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016		
Mailing Address 2 W MAIN ST #101			FEC Identification Number C		
City UNIONTOWN	State PA	Zip Code 15401	Amount of Each Disbursement this Period 275.00		
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.113834		
Candidate Name		Memo Item <input type="checkbox"/>			
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. CONNELLSVILLE AREA COMMUNITY MINISTRIES			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016		
Mailing Address 110 W CRAWFORD AVE			FEC Identification Number C		
City CONNELLSVILLE	State PA	Zip Code 15425	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement EVENT SPONSORSHIP		Category/ Type 001	Transaction ID : SB17.114173		
Candidate Name		Memo Item <input type="checkbox"/>			
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. CONTRES, CASEY, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016		
Mailing Address 2213 7TH AVE APT. A			FEC Identification Number C		
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 735.66		
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.113830		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	3510.66
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 135 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CONTRES, CASEY, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016
Mailing Address 2213 7TH AVE APT. A		FEC Identification Number C
City ALTOONA	State PA	Zip Code 16602
Purpose of Disbursement MILEAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 215.60
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. HAMPTON INN		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016
Mailing Address 180 CHARLOTTE DRIVE		FEC Identification Number C
City ALTOONA	State PA	Zip Code 16601
Purpose of Disbursement LODGING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 355.83
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016
Mailing Address 800 MARKET STREET 7TH FLOOR		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94115
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 164.23
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:	<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 136 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CONTRES, CASEY, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016	
Mailing Address 2213 7TH AVE APT. A			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 864.28	
Purpose of Disbursement MILEAGE		Category/ Type 001	Transaction ID : SB17.113980	
Candidate Name		Memo Item <input type="checkbox"/>		
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. COPY RITE & BANNER ZONE			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address 301 ALLEGHENY STREET			FEC Identification Number C	
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 515.69	
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : SB17.113766	
Candidate Name		Memo Item <input type="checkbox"/>		
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. COPY RITE & BANNER ZONE			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2016	
Mailing Address 301 ALLEGHENY STREET			FEC Identification Number C	
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 48.50	
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : SB17.113753	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	1428.47
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COPY RITE & BANNER ZONE			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016		
Mailing Address 301 ALLEGHENY STREET			FEC Identification Number C		
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 55.65		
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : SB17.113835		
Candidate Name		Memo Item <input type="checkbox"/>			
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. COPY RITE & BANNER ZONE			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address 301 ALLEGHENY STREET			FEC Identification Number C		
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 53.00		
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : SB17.113916		
Candidate Name		Memo Item <input type="checkbox"/>			
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. COPY RITE & BANNER ZONE			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016		
Mailing Address 301 ALLEGHENY STREET			FEC Identification Number C		
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 85.33		
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : SB17.113982		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	193.98
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 200			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COPY RITE & BANNER ZONE			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016		
Mailing Address 301 ALLEGHENY STREET			FEC Identification Number C		
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 6.83		
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : SB17.114130		
Candidate Name		<input type="checkbox"/> Memo Item			
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. DIRECT PURCHASING SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016		
Mailing Address 307 4TH AVE BANK TOWER SUITE 1008			FEC Identification Number C		
City PITTSBURGH	State PA	Zip Code 15222	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : SB17.113767		
Candidate Name		<input type="checkbox"/> Memo Item			
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. DIRECT PURCHASING SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address 307 4TH AVE BANK TOWER SUITE 1008			FEC Identification Number C		
City PITTSBURGH	State PA	Zip Code 15222	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement OFFICE EQUIPMENT		Category/ Type 001	Transaction ID : SB17.113917		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	1256.83
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DIRECT PURCHASING SOLUTIONS

Mailing Address 307 4TH AVE
BANK TOWER SUITE 1008

City PITTSBURGH State PA Zip Code 15222

Purpose of Disbursement OFFICE EQUIPMENT 001

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 23 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 1750.00

Transaction ID : SB17.114131

Memo Item

Full Name (Last, First, Middle Initial)

B. DREAMS GO ON TRAIL RIDE

Mailing Address C/O BETSY LEHMAN
315 QUINCE COURT

City HOLLIDAYSBURG State PA Zip Code 16648

Purpose of Disbursement TRAIL MAKING SPONSOR 001

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 18 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 350.00

Transaction ID : SB17.113734

Memo Item

Full Name (Last, First, Middle Initial)

C. DREW MICHAEL TAYLOR FOUNDATION

Mailing Address 402 RICHWALTER AVE

City SHIPPENSBURG State PA Zip Code 17257

Purpose of Disbursement EVENT TICKETS 001

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 09 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 150.00

Transaction ID : SB17.113836

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 2250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EAGLE PAC		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2016
Mailing Address PO BOX 6312		FEC Identification Number C C00572123
City LIBERTYVILLE	State IL	Zip Code 60048
Purpose of Disbursement IN-KIND:EVENT CATERING		Amount of Each Disbursement this Period 2028.87
Candidate Name EAGLE PAC		Transaction ID : SB17.113877
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. ELECTEKUSA		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016
Mailing Address PO BOX 23715		FEC Identification Number C
City CHAGRIN FALLS	State OH	Zip Code 44023
Purpose of Disbursement SOFTWARE		Amount of Each Disbursement this Period 2390.00
Candidate Name		Transaction ID : SB17.113768
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. ELECTEKUSA		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016
Mailing Address PO BOX 23715		FEC Identification Number C
City CHAGRIN FALLS	State OH	Zip Code 44023
Purpose of Disbursement SOFTWARE		Amount of Each Disbursement this Period 2422.56
Candidate Name		Transaction ID : SB17.113838
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	6841.43
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 200			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <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			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016		
Mailing Address PO BOX 23715			FEC Identification Number C		
City CHAGRIN FALLS	State OH	Zip Code 44023	Amount of Each Disbursement this Period 2416.21		
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : SB17.113983		
Candidate Name		<input type="checkbox"/> Memo Item			
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. FAYETTE CO ASSOC OF TWP SUPERVISORS			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016		
Mailing Address LEIGH KLINK, FCATO SECRETARY PO BOX 87			FEC Identification Number C		
City NEW SALEM	State PA	Zip Code 15468	Amount of Each Disbursement this Period 100.00		
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.113870		
Candidate Name		<input type="checkbox"/> Memo Item			
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. FAYETTE COUNTY FAIR			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016		
Mailing Address 132 PECHIN RD			FEC Identification Number C		
City DUNBAR	State PA	Zip Code 15431	Amount of Each Disbursement this Period 998.00		
Purpose of Disbursement EVENT SPONSORSHIP		Category/ Type 001	Transaction ID : SB17.113871		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	3514.21
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FAYETTE FESTIVALS			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address 246 W MAIN STREET			FEC Identification Number C		
City UNIONTOWN	State PA	Zip Code 15401	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement EVENT SPONSORSHIP		Category/ Type 001	Transaction ID : SB17.113918		
Candidate Name		Memo Item <input type="checkbox"/>			
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. FAYETTE HOLDINGS LIMITED			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016		
Mailing Address 52 W MAIN ST			FEC Identification Number C		
City UNIONTOWN	State PA	Zip Code 15401	Amount of Each Disbursement this Period 600.00		
Purpose of Disbursement OFFICE RENT		Category/ Type 001	Transaction ID : SB17.113735		
Candidate Name		Memo Item <input type="checkbox"/>			
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. FCMC FOUNDATION			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016		
Mailing Address 214 PEACH ORCHARD ROAD			FEC Identification Number C		
City MCCONNELLSBURG	State PA	Zip Code 17233	Amount of Each Disbursement this Period 400.00		
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.113840		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 143 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FIRST COMMONWEALTH BANK			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address CREDIT CARD DEPT PO BOX 0537			FEC Identification Number C	
City INDIANA	State PA	Zip Code 15701	Amount of Each Disbursement this Period 2576.50	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.113769	
Candidate Name		Memo Item <input type="checkbox"/>		
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. APPLIANCE OUTLET			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address 3221 PA 764			FEC Identification Number C	
City DUNCANSVILLE	State PA	Zip Code 16635	Amount of Each Disbursement this Period 316.94	
Purpose of Disbursement OFFICE EQUIPMENT		Category/ Type 001	Transaction ID : SB17.114086	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. ATLANTIC BROADBAND			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address BOX 371801			FEC Identification Number C	
City PITTSBURGH	State PA	Zip Code 15250	Amount of Each Disbursement this Period 106.96	
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : SB17.114087	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	2576.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BLACK DOG COFFEE & CATERING			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016		
Mailing Address 519 ALLEGHENY STREET			FEC Identification Number C		
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 197.05		
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.114088		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
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. JIMMY JOHNS			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016		
Mailing Address 795 PHILADELPHIA ST.			FEC Identification Number C		
City INDIANA	State PA	Zip Code 15701	Amount of Each Disbursement this Period 19.40		
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.114089		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
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. SAMS CLUB			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016		
Mailing Address PO BOX 9001907			FEC Identification Number C		
City LOUISVILLE	State KY	Zip Code 40290	Amount of Each Disbursement this Period 147.63		
Purpose of Disbursement EVENT SUPPLIES		Category/ Type 001	Transaction ID : SB17.114090		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 145 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHEETZ INC			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address 5700 SIXTH AVENUE			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 75.00	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : SB17.114091	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. STAPLES			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address PLANK ROAD/ORCHARD PLAZA			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 1306.62	
Purpose of Disbursement OFFICE EQUIPMENT		Category/ Type 001	Transaction ID : SB17.114092	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. USPS			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address 525 ALLEGHENY STREET			FEC Identification Number C	
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 96.60	
Purpose of Disbursement POSTAGE		Category/ Type 001	Transaction ID : SB17.114093	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 146 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WAL-MART			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address 702 SW 8TH ST			FEC Identification Number C	
City BENTONVILLE	State AR	Zip Code 72716	Amount of Each Disbursement this Period 180.66	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : SB17.114094	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. FIRST COMMONWEALTH BANK			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address CREDIT CARD DEPT PO BOX 0537			FEC Identification Number C	
City INDIANA	State PA	Zip Code 15701	Amount of Each Disbursement this Period 1461.43	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.113919	
Candidate Name		Memo Item <input type="checkbox"/>		
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. DELGROSSO FOODS			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 632 SAUCE FACTORY DR			FEC Identification Number C	
City TIPTON	State PA	Zip Code 16684	Amount of Each Disbursement this Period 135.00	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.113922	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	1461.43
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 147 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HOME DEPOT			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 4640 ROOSEVELT BLVD			FEC Identification Number C	
City PHILADELPHIA	State PA	Zip Code 19124	Amount of Each Disbursement this Period 18.54	
Purpose of Disbursement EVENT SUPPLIES		Category/ Type 001	Transaction ID : SB17.113923	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. JETHROS			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 417 PARKVIEW LANE			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16601	Amount of Each Disbursement this Period 170.15	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.113925	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. MARZONI'S			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 165 PATCHWAY ROAD			FEC Identification Number C	
City DUNCANSVILLE	State PA	Zip Code 16635	Amount of Each Disbursement this Period 77.44	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.113926	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 148 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SAMS CLUB			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address PO BOX 9001907			FEC Identification Number C	
City LOUISVILLE	State KY	Zip Code 40290	Amount of Each Disbursement this Period 198.10	
Purpose of Disbursement EVENT SUPPLIES		Category/ Type 001	Transaction ID : SB17.113927	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. SHEETZ INC			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 5700 SIXTH AVENUE			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 86.60	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : SB17.113928	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. STAPLES			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address PLANK ROAD/ORCHARD PLAZA			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 115.40	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : SB17.113929	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 149 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address 525 ALLEGHENY STREET		FEC Identification Number C
City HOLLIDAYSBURG	State PA	Zip Code 16648
Purpose of Disbursement POSTAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 42.30
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WAL-MART		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address 702 SW 8TH ST		FEC Identification Number C
City BENTONVILLE	State AR	Zip Code 72716
Purpose of Disbursement EVENT SUPPLIES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 111.35
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FIRST COMMONWEALTH BANK		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016
Mailing Address CREDIT CARD DEPT PO BOX 0537		FEC Identification Number C
City INDIANA	State PA	Zip Code 15701
Purpose of Disbursement SEE MEMO ENTRIES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 3320.92
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3320.92
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 150 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHEETZ INC			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016	
Mailing Address 5700 SIXTH AVENUE			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 383.56	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : SB17.114148	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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. STAPLES			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016	
Mailing Address PLANK ROAD/ORCHARD PLAZA			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 473.93	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : SB17.114149	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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. SAMS CLUB			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016	
Mailing Address PO BOX 9001907			FEC Identification Number C	
City LOUISVILLE	State KY	Zip Code 40290	Amount of Each Disbursement this Period 306.95	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : SB17.114150	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 151 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CREEKSIDE INN			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016	
Mailing Address BEDFORD STREET			FEC Identification Number C	
City FREEDOM	State PA	Zip Code 16637	Amount of Each Disbursement this Period 216.42	
Purpose of Disbursement LODGING		Category/Type 001		
Candidate Name			Transaction ID : SB17.114151	
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) ▼		<input checked="" type="checkbox"/> Memo Item	
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. FIORE TRUE VALUE HARDWARE			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016	
Mailing Address 5514 SIXTH AVENUE			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 678.29	
Purpose of Disbursement EVENT SUPPLIES		Category/Type 001		
Candidate Name			Transaction ID : SB17.114152	
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) ▼		<input checked="" type="checkbox"/> Memo Item	
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. APPLIANCE OUTLET			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016	
Mailing Address 3221 PA 764			FEC Identification Number C	
City DUNCANVILLE	State PA	Zip Code 16635	Amount of Each Disbursement this Period 350.00	
Purpose of Disbursement OFFICE EQUIPMENT		Category/Type 001		
Candidate Name			Transaction ID : SB17.114153	
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) ▼		<input checked="" type="checkbox"/> Memo Item	
State: _____	District: _____			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 152 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016
Mailing Address 525 ALLEGHENY STREET		FEC Identification Number C
City HOLLIDAYSBURG	State PA	Zip Code 16648
Purpose of Disbursement POSTAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 57.45
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. KINGS FAMILY RESTAURANT		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016
Mailing Address 1180 NORTH CENTER AVENUE		FEC Identification Number C
City SOMERSET	State PA	Zip Code 15501
Purpose of Disbursement MEETING EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 27.83
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. COURTYARD BY MARRIOTT		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016
Mailing Address 2 CONVENTION CENTER BLVD		FEC Identification Number C
City ALTOONA	State PA	Zip Code 16602
Purpose of Disbursement LODGING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 241.70
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:	<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 153 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WAL-MART		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016
Mailing Address 702 SW 8TH ST		FEC Identification Number C
City BENTONVILLE	State AR	Zip Code 72716
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 51.03
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. BLACK DOG COFFEE & CATERING		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016
Mailing Address 519 ALLEGHENY STREET		FEC Identification Number C
City HOLLIDAYSBURG	State PA	Zip Code 16648
Purpose of Disbursement MEETING EXPENSE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 56.00
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. MARZONI'S		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016
Mailing Address 165 PATCHWAY ROAD		FEC Identification Number C
City DUNCANSVILLE	State PA	Zip Code 16635
Purpose of Disbursement MEETING EXPENSE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 80.04
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:	<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 200			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FORD CREDIT		Date of Disbursement
Mailing Address BOX 220564		M M / D D / Y Y Y Y 07 / 18 / 2016
City PITTSBURGH	State PA	Zip Code 15257
Purpose of Disbursement CAMPAIGN TRANSPORTATION	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period
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:	Transaction ID : SB17.114011	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. FORD CREDIT		Date of Disbursement
Mailing Address BOX 220564		M M / D D / Y Y Y Y 08 / 16 / 2016
City PITTSBURGH	State PA	Zip Code 15257
Purpose of Disbursement CAMPAIGN TRANSPORTATION	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period
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:	Transaction ID : SB17.114012	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. FORD CREDIT		Date of Disbursement
Mailing Address BOX 220564		M M / D D / Y Y Y Y 09 / 16 / 2016
City PITTSBURGH	State PA	Zip Code 15257
Purpose of Disbursement CAMPAIGN TRANSPORTATION	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period
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:	Transaction ID : SB17.114040	
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1232.31
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: (check only one)
 17 18 19a 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. FRIENDS OF JOHN RAFFERTY		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2016
Mailing Address PO BOX 11757		FEC Identification Number C
City HARRISBURG	State PA	Zip Code 17108
Purpose of Disbursement EVENT TICKETS	Category/ Type 001	
Candidate Name FRIENDS OF JOHN RAFFERTY		Amount of Each Disbursement this Period 250.00
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FRIENDS OF NRA		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address 298 MORGANTOWN ST.		FEC Identification Number C
City UNIONTOWN	State PA	Zip Code 15401
Purpose of Disbursement EVENT TICKETS	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 150.00
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FULTON COUNTY CHAMBER OF COMMERCE		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address 101 LINCOLN WAY WEST STE. 102		FEC Identification Number C
City MCCONNELLSBURG	State PA	Zip Code 17233
Purpose of Disbursement ADVERTISING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 150.00
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 156 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FULTON COUNTY FAIR ASSOC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016	
Mailing Address 888 LINCOLN WAY E			FEC Identification Number C	
City MCCONNELLSBURG	State PA	Zip Code 17233	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement ADVERTISING		Category/ Type 001	Transaction ID : SB17.114133	
Candidate Name		<input type="checkbox"/> Memo Item		
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. GIRLS NIGHT OUT ALTOONA INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016	
Mailing Address 1404 BRETON CIRCLE			FEC Identification Number C	
City BOALSBURG	State PA	Zip Code 16827	Amount of Each Disbursement this Period 200.00	
Purpose of Disbursement EVENT SPONSORSHIP		Category/ Type 001	Transaction ID : SB17.114172	
Candidate Name		<input type="checkbox"/> Memo Item		
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. GREATER WAYNESBORO CHAMBER OF COMMERCE			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016	
Mailing Address 5 ROADSIDE AVENUE			FEC Identification Number C	
City WAYNESBORO	State PA	Zip Code 17268	Amount of Each Disbursement this Period 150.00	
Purpose of Disbursement EVENT SPONSORSHIP		Category/ Type 001	Transaction ID : SB17.113737	
Candidate Name		<input type="checkbox"/> Memo Item		
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).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 157 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GREATER WAYNESBORO CHAMBER OF COMMERCE			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 5 ROADSIDE AVENUE			FEC Identification Number C	
City WAYNESBORO	State PA	Zip Code 17268	Amount of Each Disbursement this Period 186.00	
Purpose of Disbursement EVENT SPONSORSHIP		Category/ Type 001	Transaction ID : SB17.113939	
Candidate Name		Memo Item <input type="checkbox"/>		
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. GROSSMAN, ANDREW, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016	
Mailing Address 3714 LEYLAND DR			FEC Identification Number C	
City MECHANICSBURG	State PA	Zip Code 17050	Amount of Each Disbursement this Period 1202.06	
Purpose of Disbursement SEE BELOW		Category/ Type 001	Transaction ID : SB17.113723	
Candidate Name		Memo Item <input type="checkbox"/>		
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. CVS PHARMACY			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016	
Mailing Address 3200 PLEASANT VALLEY BLVD			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 17.46	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : SB17.113729	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	1388.06
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 200			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GROSSMAN, ANDREW, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016		
Mailing Address 3714 LEYLAND DR			FEC Identification Number C		
City MECHANICSBURG	State PA	Zip Code 17050	Amount of Each Disbursement this Period 982.24		
Purpose of Disbursement MILEAGE		Category/ Type 001	Transaction ID : SB17.113733		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. GROSSMAN, ANDREW, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2016		
Mailing Address 3714 LEYLAND DR			FEC Identification Number C		
City MECHANICSBURG	State PA	Zip Code 17050	Amount of Each Disbursement this Period 806.42		
Purpose of Disbursement MILEAGE		Category/ Type 001	Transaction ID : SB17.113787		
Candidate Name		<input type="checkbox"/> Memo Item			
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. GUCKENHEIMER AT UNION PACIFIC			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016		
Mailing Address 1400 DOUGLAS ST			FEC Identification Number C		
City OMAHA	State NE	Zip Code 68179	Amount of Each Disbursement this Period 261.57		
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.113842		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	1067.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HOLLIDAYSBURG AREA YOUTH FOOTBALL ASSOC.			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address PO BOX 96			FEC Identification Number C		
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 100.00		
Purpose of Disbursement ADVERTISING		Category/ Type 001	Transaction ID : SB17.113940		
Candidate Name		Memo Item <input type="checkbox"/>			
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. HOME HELPERS			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address 911 S SCOTCH VALLEY RD STE D			FEC Identification Number C		
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement EVENT SPONSORSHIP		Category/ Type 001	Transaction ID : SB17.113941		
Candidate Name		Memo Item <input type="checkbox"/>			
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. HOOKIES FIRE COMPANY			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016		
Mailing Address 1216 BLAIR AVE			FEC Identification Number C		
City TYRONE	State PA	Zip Code 16686	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.113984		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HUNTINGDON COUNTY GOP			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016		
Mailing Address PO BOX 61			FEC Identification Number C		
City HUNTINGDON	State PA	Zip Code 16652	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.113738		
Candidate Name		Memo Item <input type="checkbox"/>			
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. I360			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016		
Mailing Address PO BOX 37046			FEC Identification Number C		
City BALTIMORE	State MD	Zip Code 21297	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : SB17.113772		
Candidate Name		Memo Item <input type="checkbox"/>			
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. I360			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016		
Mailing Address PO BOX 37046			FEC Identification Number C		
City BALTIMORE	State MD	Zip Code 21297	Amount of Each Disbursement this Period 639.86		
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : SB17.113843		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	2139.86
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. I360			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016		
Mailing Address PO BOX 37046			FEC Identification Number C		
City BALTIMORE	State MD	Zip Code 21297	Amount of Each Disbursement this Period 656.07		
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : SB17.113985		
Candidate Name		<input type="checkbox"/> Memo Item			
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. IMLER'S POULTRY			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address PO BOX 836			FEC Identification Number C		
City DUNCANSVILLE	State PA	Zip Code 16635	Amount of Each Disbursement this Period 779.71		
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : SB17.113943		
Candidate Name		<input type="checkbox"/> Memo Item			
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. KANIA, ROB, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2016		
Mailing Address 1616 COOK SCHOOL ROAD			FEC Identification Number C		
City UPPER ST. CLAIR	State PA	Zip Code 15241	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement IN-KIND: OFFICE EQUIPMENT		Category/ Type	Transaction ID : SB17.114315		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	2435.78
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KEN WERTZ HAULING, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016		
Mailing Address 2567 W LOOP RD					
City HOLLIDAYSBURG	State PA	Zip Code 16648	FEC Identification Number C		
Purpose of Disbursement OFFICE EXPENSE		001	Amount of Each Disbursement this Period 180.00		
Candidate Name		Category/ Type	Transaction ID : SB17.113773		
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) B. KENDALL, EMILY, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016		
Mailing Address 566 MEADOW GROUND RD					
City MCCONNELLSBURG	State PA	Zip Code 17233	FEC Identification Number C		
Purpose of Disbursement MILEAGE		001	Amount of Each Disbursement this Period 1239.11		
Candidate Name		Category/ Type	Transaction ID : SB17.113839		
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) C. KENDALL, EMILY, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2016		
Mailing Address 566 MEADOW GROUND RD					
City MCCONNELLSBURG	State PA	Zip Code 17233	FEC Identification Number C		
Purpose of Disbursement FIELD CONSULTING		001	Amount of Each Disbursement this Period 1000.00		
Candidate Name		Category/ Type	Transaction ID : SB17.113875		
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2419.11
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KENDALL, EMILY, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2016
Mailing Address 566 MEADOW GROUND RD		FEC Identification Number C
City MCCONNELLSBURG	State PA	Zip Code 17233
Purpose of Disbursement FIELD CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1200.00
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:	Transaction ID : SB17.114000 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. KING COAL ASSOCIATION		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016
Mailing Address PO BOX 275		FEC Identification Number C
City CARMICHAELS	State PA	Zip Code 15230
Purpose of Disbursement EVENT FACILITY RENTAL	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 75.00
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:	Transaction ID : SB17.113844 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. KIWANIS CLUB OF ALTOONA		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address PO BOX 419		FEC Identification Number C
City HOLLIDAYSBURG	State PA	Zip Code 16648
Purpose of Disbursement EVENT SPONSORSHIP	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 100.00
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:	Transaction ID : SB17.113944 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1375.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KTAADN GROUP			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016		
Mailing Address 850 29TH STREET					
City ALTOONA	State PA	Zip Code 16601	FEC Identification Number C		
Purpose of Disbursement OFFICE EQUIPMENT REPAIR		Category/ Type 001	Amount of Each Disbursement this Period 130.91		
Candidate Name		Transaction ID : SB17.114135			
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) B. LANCER RESOURCES LP			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016		
Mailing Address 6034 W COURTYARD DR STE 205					
City AUSTIN	State TX	Zip Code 78730	FEC Identification Number C		
Purpose of Disbursement UTILITIES		Category/ Type 001	Amount of Each Disbursement this Period 2700.00		
Candidate Name		Transaction ID : SB17.113739			
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) C. LOCKER PLANT			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2016		
Mailing Address 422 E SOUTH ST					
City EVERETT	State PA	Zip Code 11537	FEC Identification Number C		
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Amount of Each Disbursement this Period 493.84		
Candidate Name		Transaction ID : SB17.114013			
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	3324.75
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MAVERICK FINANCE		Date of Disbursement
Mailing Address 403 N SECOND STREET 2ND FL		M M / D D / Y Y Y Y 07 / 15 / 2016
City HARRISBURG	State PA	Zip Code 17101
Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period
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) ▼	7061.69
State: District:	Transaction ID : SB17.113774	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. MAVERICK FINANCE		Date of Disbursement
Mailing Address 403 N SECOND STREET 2ND FL		M M / D D / Y Y Y Y 08 / 09 / 2016
City HARRISBURG	State PA	Zip Code 17101
Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period
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) ▼	7000.00
State: District:	Transaction ID : SB17.113845	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. MAVERICK FINANCE		Date of Disbursement
Mailing Address 403 N SECOND STREET 2ND FL		M M / D D / Y Y Y Y 09 / 06 / 2016
City HARRISBURG	State PA	Zip Code 17101
Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period
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) ▼	7000.00
State: District:	Transaction ID : SB17.113986	
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	21061.69
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 166 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MENDING HEARTS ANIMAL RESCUE			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 375 COVENTRY CT.			FEC Identification Number C	
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 240.00	
Purpose of Disbursement EVENT SPONSORSHIP		Category/ Type 001	Transaction ID : SB17.113947	
Candidate Name		Memo Item <input type="checkbox"/>		
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. MENZLER, TYLER, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016	
Mailing Address 701 THOMPSON AVE			FEC Identification Number C	
City DONORA	State PA	Zip Code 15033	Amount of Each Disbursement this Period 833.72	
Purpose of Disbursement SEE MEMOS		Category/ Type 001	Transaction ID : SB17.113748	
Candidate Name		Memo Item <input type="checkbox"/>		
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. AT&T			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016	
Mailing Address PO BOX 9001309			FEC Identification Number C	
City LOUISVILLE	State KY	Zip Code 40290	Amount of Each Disbursement this Period 152.42	
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : SB17.113749	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	1073.72
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 167 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MENZLER, TYLER, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016	
Mailing Address 701 THOMPSON AVE			FEC Identification Number C	
City DONORA	State PA	Zip Code 15033	Amount of Each Disbursement this Period 681.30	
Purpose of Disbursement MILEAGE		Category/ Type 001	Transaction ID : SB17.113750	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. MENZLER, TYLER, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2016	
Mailing Address 701 THOMPSON AVE			FEC Identification Number C	
City DONORA	State PA	Zip Code 15033	Amount of Each Disbursement this Period 1306.13	
Purpose of Disbursement MILEAGE		Category/ Type 001	Transaction ID : SB17.113869	
Candidate Name		Memo Item <input type="checkbox"/>		
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. MENZLER, TYLER, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2016	
Mailing Address 701 THOMPSON AVE			FEC Identification Number C	
City DONORA	State PA	Zip Code 15033	Amount of Each Disbursement this Period 747.75	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.113884	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	2053.88
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 168 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OLLIE'S			Date of Disbursement MM / DD / YYYY 08 / 19 / 2016	
Mailing Address 430 TRI COUNTY LANE			FEC Identification Number C	
City BELLE VERNON	State PA	Zip Code 15012	Amount of Each Disbursement this Period 217.27	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : SB17.113885	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. STAPLES			Date of Disbursement MM / DD / YYYY 08 / 19 / 2016	
Mailing Address PLANK ROAD/ORCHARD PLAZA			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 380.49	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : SB17.113886	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. MICROSOFT ONLINE SERVICES			Date of Disbursement MM / DD / YYYY 08 / 19 / 2016	
Mailing Address ONE MICROSOFT WAY			FEC Identification Number C	
City REDMOND	State WA	Zip Code 98052	Amount of Each Disbursement this Period 149.99	
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : SB17.113887	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 169 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MENZLER, TYLER, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2016	
Mailing Address 701 THOMPSON AVE			FEC Identification Number C	
City DONORA	State PA	Zip Code 15033	Amount of Each Disbursement this Period 1723.94	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.114109	
Candidate Name		<input type="checkbox"/> Memo Item		
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. MENZLER, TYLER, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2016	
Mailing Address 701 THOMPSON AVE			FEC Identification Number C	
City DONORA	State PA	Zip Code 15033	Amount of Each Disbursement this Period 1228.98	
Purpose of Disbursement MILEAGE		Category/ Type 001	Transaction ID : SB17.114110	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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. AT&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2016	
Mailing Address PO BOX 9001309			FEC Identification Number C	
City LOUISVILLE	State KY	Zip Code 40290	Amount of Each Disbursement this Period 242.63	
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : SB17.114111	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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).....▶	1723.94
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 170 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2016
Mailing Address PLANK ROAD/ORCHARD PLAZA		FEC Identification Number C
City ALTOONA	State PA	Zip Code 16602
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 63.59
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WAL-MART		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2016
Mailing Address 702 SW 8TH ST		FEC Identification Number C
City BENTONVILLE	State AR	Zip Code 72716
Purpose of Disbursement EVENT SUPPLIES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 45.48
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. NBCRC		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address PO BOX 118		FEC Identification Number C
City TIPTON	State PA	Zip Code 16684
Purpose of Disbursement EVENT SPONSORSHIP	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 150.00
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NRA FOUNDATION			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address 298 MORGANTOWN ST.			FEC Identification Number C		
City UNIONTOWN	State PA	Zip Code 15401	Amount of Each Disbursement this Period 340.00		
Purpose of Disbursement ADVERTISING		Category/ Type 001	Transaction ID : SB17.113950		
Candidate Name		Memo Item <input type="checkbox"/>			
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. NUNGESSER CONSULTING			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016		
Mailing Address 1554 LOBDELL AVE			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 22311	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : SB17.114136		
Candidate Name		Memo Item <input type="checkbox"/>			
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. OSBAUGH, ROGER, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2016		
Mailing Address 6575 ORPHANAGE RD. WESLEY HOUSE APT. 205			FEC Identification Number C		
City WAYNESBORO	State PA	Zip Code 17268	Amount of Each Disbursement this Period 109.93		
Purpose of Disbursement SEE MEMO		Category/ Type 001	Transaction ID : SB17.113759		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	2449.93
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 172 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DOLLAR GENERAL		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2016
Mailing Address 904 BLAIR ST		FEC Identification Number C
City HOLLIDAYSBURG	State PA	Zip Code 16648
Purpose of Disbursement OFFICE SUPPLIES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 109.93
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) ▼	Transaction ID : SB17.113760
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. OSBAUGH, ROGER, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address 6575 ORPHANAGE RD. WESLEY HOUSE APT. 205		FEC Identification Number C
City WAYNESBORO	State PA	Zip Code 17268
Purpose of Disbursement SEE MEMO ENTRY	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 109.97
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) ▼	Transaction ID : SB17.113956
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DOLLAR GENERAL		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address 904 BLAIR ST		FEC Identification Number C
City HOLLIDAYSBURG	State PA	Zip Code 16648
Purpose of Disbursement OFFICE SUPPLIES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 109.97
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) ▼	Transaction ID : SB17.113957
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	109.97
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 173 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OSBAUGH, ROGER, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016
Mailing Address 6575 ORPHANAGE RD. WESLEY HOUSE APT. 205		FEC Identification Number C
City WAYNESBORO	State PA	Zip Code 17268
Purpose of Disbursement SEE MEMO ENTRY	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 99.97	
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) ▼	Transaction ID : SB17.114139
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DOLLAR GENERAL		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016
Mailing Address 904 BLAIR ST		FEC Identification Number C
City HOLLIDAYSBURG	State PA	Zip Code 16648
Purpose of Disbursement TELEPHONE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 99.97	
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) ▼	Transaction ID : SB17.114140
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PENELEC		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2016
Mailing Address PO BOX 3687		FEC Identification Number C
City AKRON	State OH	Zip Code 44309
Purpose of Disbursement UTILITIES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 99.00	
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) ▼	Transaction ID : SB17.113758
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	198.97
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PENELEC			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address PO BOX 3687			FEC Identification Number C		
City AKRON	State OH	Zip Code 44309	Amount of Each Disbursement this Period 49.52		
Purpose of Disbursement UTILITIES		Category/ Type 001	Transaction ID : SB17.113952		
Candidate Name		Memo Item <input type="checkbox"/>			
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. PENELEC			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016		
Mailing Address PO BOX 3687			FEC Identification Number C		
City AKRON	State OH	Zip Code 44309	Amount of Each Disbursement this Period 145.51		
Purpose of Disbursement UTILITIES		Category/ Type 001	Transaction ID : SB17.114170		
Candidate Name		Memo Item <input type="checkbox"/>			
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. PEOPLES NATURAL GAS (PNG)			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016		
Mailing Address PO BOX 644760			FEC Identification Number C		
City PITTSBURGH	State PA	Zip Code 15264	Amount of Each Disbursement this Period 16.58		
Purpose of Disbursement UTILITIES		Category/ Type 001	Transaction ID : SB17.113775		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	211.61
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 175 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PEOPLES NATURAL GAS (PNG)		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016
Mailing Address PO BOX 644760		FEC Identification Number C
City PITTSBURGH	State PA	Zip Code 15264
Purpose of Disbursement UTILITIES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 15.43
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PEOPLES NATURAL GAS (PNG)		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016
Mailing Address PO BOX 644760		FEC Identification Number C
City PITTSBURGH	State PA	Zip Code 15264
Purpose of Disbursement UTILITIES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 14.88
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PSYHOGIOS-SMITH, BRITTANY, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016
Mailing Address 700 S. COURTHOUSE RD. #404		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22204
Purpose of Disbursement SEE MEMO ENTRY	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 185.91
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	216.22
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 176 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016	
Mailing Address 800 MARKET STREET 7TH FLOOR			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94115	Amount of Each Disbursement this Period 185.91	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : SB17.113829	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. RAVINE			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address 610 7TH ST			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 159.25	
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : SB17.113776	
Candidate Name		Memo Item <input type="checkbox"/>		
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. RAVINE			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016	
Mailing Address 610 7TH ST			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 2221.04	
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : SB17.113852	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	2380.29
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 OF 200			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RAVINE			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address 610 7TH ST			FEC Identification Number C		
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 443.62		
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : SB17.113954		
Candidate Name		<input type="checkbox"/> Memo Item			
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. RAVINE			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016		
Mailing Address 610 7TH ST			FEC Identification Number C		
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 250.25		
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : SB17.114137		
Candidate Name		<input type="checkbox"/> Memo Item			
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. RED MAVERICK MEDIA LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016		
Mailing Address 401 N. SECOND STREET			FEC Identification Number C		
City HARRISBURG	State PA	Zip Code 17101	Amount of Each Disbursement this Period 104.40		
Purpose of Disbursement MEDIA CONSULTING		Category/ Type 001	Transaction ID : SB17.113777		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	798.27
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RED MAVERICK MEDIA LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2016		
Mailing Address 401 N. SECOND STREET			FEC Identification Number C		
City HARRISBURG	State PA	Zip Code 17101	Amount of Each Disbursement this Period 18340.00		
Purpose of Disbursement MEDIA BUY		Category/ Type 001	Transaction ID : SB17.113788		
Candidate Name		<input type="checkbox"/> Memo Item			
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. RED MAVERICK MEDIA LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016		
Mailing Address 401 N. SECOND STREET			FEC Identification Number C		
City HARRISBURG	State PA	Zip Code 17101	Amount of Each Disbursement this Period 244.00		
Purpose of Disbursement MEDIA CONSULTING		Category/ Type 001	Transaction ID : SB17.113853		
Candidate Name		<input type="checkbox"/> Memo Item			
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. RED MAVERICK MEDIA LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016		
Mailing Address 401 N. SECOND STREET			FEC Identification Number C		
City HARRISBURG	State PA	Zip Code 17101	Amount of Each Disbursement this Period 9423.00		
Purpose of Disbursement MEDIA CONSULTING		Category/ Type 001	Transaction ID : SB17.113873		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	28007.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RED MAVERICK MEDIA LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016		
Mailing Address 401 N. SECOND STREET			FEC Identification Number C		
City HARRISBURG	State PA	Zip Code 17101	Amount of Each Disbursement this Period 2950.00		
Purpose of Disbursement MEDIA CONSULTING		Category/ Type 001	Transaction ID : SB17.114138		
Candidate Name		<input type="checkbox"/> Memo Item			
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. RED MAVERICK MEDIA LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016		
Mailing Address 401 N. SECOND STREET			FEC Identification Number C		
City HARRISBURG	State PA	Zip Code 17101	Amount of Each Disbursement this Period 3316.40		
Purpose of Disbursement ADVERTISING		Category/ Type 001	Transaction ID : SB17.114169		
Candidate Name		<input type="checkbox"/> Memo Item			
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. ROARING SPRING BOTTLING			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016		
Mailing Address PO BOX 97			FEC Identification Number C		
City ROARING SPRINGS	State PA	Zip Code 16673	Amount of Each Disbursement this Period 16.85		
Purpose of Disbursement BOTTLED WATER		Category/ Type 001	Transaction ID : SB17.113746		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	6283.25
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 180 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ROARING SPRING BOTTLING		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address PO BOX 97		FEC Identification Number C
City ROARING SPRINGS	State PA	Zip Code 16673
Purpose of Disbursement OFFICE EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 11.55
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ROB BEATTY CARPET AND UPHOLSTER		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016
Mailing Address 309 26TH AVE		FEC Identification Number C
City ALTOONA	State PA	Zip Code 16601
Purpose of Disbursement CARPET CLEANING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1132.10
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. S&T BANK		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016
Mailing Address 1100 LOGAN BLVD		FEC Identification Number C
City ALTOONA	State PA	Zip Code 16602
Purpose of Disbursement BANK FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 80.00
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1223.65
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 181 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. S&T BANK			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016	
Mailing Address 1100 LOGAN BLVD			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 80.00	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : SB17.114015	
Candidate Name			<input type="checkbox"/> Memo Item	
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. S&T BANK			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2016	
Mailing Address 1100 LOGAN BLVD			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 80.00	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : SB17.114016	
Candidate Name			<input type="checkbox"/> Memo Item	
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. SHUSTER, WILLIAM, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2016	
Mailing Address 455 OVERLOOK DR			FEC Identification Number C C00364935	
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 202.89	
Purpose of Disbursement SEE MEMO ENTRY		Category/ Type 001	Transaction ID : SB17.113992	
Candidate Name SHUSTER, WILLIAM, , ,			<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: PA District: 09				

SUBTOTAL of Disbursements This Page (optional).....▶	362.89
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2016		
Mailing Address PO BOX 9001309			FEC Identification Number C		
City LOUISVILLE	State KY	Zip Code 40290	Amount of Each Disbursement this Period 202.89		
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : SB17.113993		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. SHUSTER, GARRETT, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016		
Mailing Address 385 HAIMROD ST, APT 1			FEC Identification Number C		
City BROOKLYN	State NY	Zip Code 11237	Amount of Each Disbursement this Period 247.60		
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.113736		
Candidate Name		<input type="checkbox"/> Memo Item			
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. SHUSTER, GARRETT, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016		
Mailing Address 385 HAIMROD ST, APT 1			FEC Identification Number C		
City BROOKLYN	State NY	Zip Code 11237	Amount of Each Disbursement this Period 55.98		
Purpose of Disbursement TRAVEL EXPENSE - NO ITEMIZATION NECESSARY		Category/ Type 001	Transaction ID : SB17.113841		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	303.58
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 OF 200			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SOMERSET CO REPUBLICAN COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address PO BOX 401			FEC Identification Number C		
City SOMERSET	State PA	Zip Code 15501	Amount of Each Disbursement this Period 100.00		
Purpose of Disbursement ADVERTISING		Category/ Type 001	Transaction ID : SB17.113959		
Candidate Name SOMERSET CO REPUBLICAN COMMITTEE		Memo Item <input type="checkbox"/>			
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. SOMERSET CO REPUBLICAN COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016		
Mailing Address PO BOX 401			FEC Identification Number C		
City SOMERSET	State PA	Zip Code 15501	Amount of Each Disbursement this Period 150.00		
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.114141		
Candidate Name SOMERSET CO REPUBLICAN COMMITTEE		Memo Item <input type="checkbox"/>			
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. STRAESSER, WILLIAM, , MR.,			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016		
Mailing Address PO BOX 1023			FEC Identification Number C		
City ALTOONA	State PA	Zip Code 16603	Amount of Each Disbursement this Period 1581.04		
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.113780		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	1831.04
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 184 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRAESSER, WILLIAM, , MR.,			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address PO BOX 1023			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16603	Amount of Each Disbursement this Period 364.00	
Purpose of Disbursement MILEAGE		Category/ Type 001	Transaction ID : SB17.114095	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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. ALTOONA GRAND HOTEL			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address 1 SHERATON DR.			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16601	Amount of Each Disbursement this Period 89.16	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.114096	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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. BLACK DOG COFFEE & CATERING			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address 519 ALLEGHENY STREET			FEC Identification Number C	
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 64.00	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.114097	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 185 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE GRIFFITH FAMILY FOUNDATION			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address P.O. BOX 28			FEC Identification Number C	
City HOLLISDAYBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.114099	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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. MARZONI'S			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address 165 PATCHWAY ROAD			FEC Identification Number C	
City DUNCANSVILLE	State PA	Zip Code 16635	Amount of Each Disbursement this Period 170.04	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.114101	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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. STAPLES			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address PLANK ROAD/ORCHARD PLAZA			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 124.00	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : SB17.114102	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 186 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016
Mailing Address 525 ALLEGHENY STREET		FEC Identification Number C
City HOLLIDAYSBURG	State PA	Zip Code 16648
Purpose of Disbursement POSTAGE	Category/ Type 001	Amount of Each Disbursement this Period 77.99
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.114104
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. WAL-MART		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016
Mailing Address 702 SW 8TH ST		FEC Identification Number C
City BENTONVILLE	State AR	Zip Code 72716
Purpose of Disbursement EVENT SUPPLIES	Category/ Type 001	Amount of Each Disbursement this Period 137.75
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.114105
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. STRAESSER, WILLIAM, , MR.,		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016
Mailing Address PO BOX 1023		FEC Identification Number C
City ALTOONA	State PA	Zip Code 16603
Purpose of Disbursement SEE MEMO ENTRIES	Category/ Type 001	Amount of Each Disbursement this Period 1320.95
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.113856
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1320.95
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 187 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRAESSER, WILLIAM, , MR.,			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016	
Mailing Address PO BOX 1023			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16603	Amount of Each Disbursement this Period 364.00	
Purpose of Disbursement MILEAGE		Category/ Type 001	Transaction ID : SB17.113857	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. USPS			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016	
Mailing Address 525 ALLEGHENY STREET			FEC Identification Number C	
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 97.99	
Purpose of Disbursement POSTAGE		Category/ Type 001	Transaction ID : SB17.113859	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. CAMBRIA COUNTY REPUBLICAN PARTY			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016	
Mailing Address 450 LURAY AVENUE			FEC Identification Number C	
City JOHSTOWN	State PA	Zip Code 15904	Amount of Each Disbursement this Period 200.00	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.113860	
Candidate Name CAMBRIA COUNTY REPUBLICAN PARTY		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 188 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KINGS FAMILY RESTAURANT			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016	
Mailing Address 1180 NORTH CENTER AVENUE			FEC Identification Number C	
City SOMERSET	State PA	Zip Code 15501	Amount of Each Disbursement this Period 52.58	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.113861	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. DOLLAR GENERAL			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016	
Mailing Address 904 BLAIR ST			FEC Identification Number C	
City HOLLIDAYSBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 12.35	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : SB17.113866	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. STRAESSER, WILLIAM, , MR.,			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016	
Mailing Address PO BOX 1023			FEC Identification Number C	
City ALTOONA	State PA	Zip Code 16603	Amount of Each Disbursement this Period 1537.21	
Purpose of Disbursement MILEAGE		Category/ Type 001	Transaction ID : SB17.113991	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	1537.21
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SUNGALA, REBEKAH, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016		
Mailing Address 545 OLD NATIONAL PIKE			FEC Identification Number C		
City BROWNSVILLE	State PA	Zip Code 15417	Amount of Each Disbursement this Period 2057.35		
Purpose of Disbursement SEE MEMOS		Category/ Type 001	Transaction ID : SB17.113740		
Candidate Name		Memo Item <input type="checkbox"/>			
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. SUNGALA, REBEKAH, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016		
Mailing Address 545 OLD NATIONAL PIKE			FEC Identification Number C		
City BROWNSVILLE	State PA	Zip Code 15417	Amount of Each Disbursement this Period 624.50		
Purpose of Disbursement MILEAGE		Category/ Type 001	Transaction ID : SB17.113741		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
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. STAPLES			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016		
Mailing Address PLANK ROAD/ORCHARD PLAZA			FEC Identification Number C		
City ALTOONA	State PA	Zip Code 16602	Amount of Each Disbursement this Period 116.75		
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : SB17.113742		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
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).....▶	2057.35
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 190 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WAL-MART		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016
Mailing Address 702 SW 8TH ST		FEC Identification Number C
City BENTONVILLE	State AR	Zip Code 72716
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 35.32
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016
Mailing Address PLANK ROAD/ORCHARD PLAZA		FEC Identification Number C
City ALTOONA	State PA	Zip Code 16602
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 1000.78
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FAYETTE COUNTY FAIR		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016
Mailing Address 132 PECHIN RD		FEC Identification Number C
City DUNBAR	State PA	Zip Code 15431
Purpose of Disbursement BOOTH	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 280.00
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:	<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 191 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE DANIEL LAW GROUP, PLLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016	
Mailing Address 138 S 7TH ST			FEC Identification Number C	
City INDIANA	State PA	Zip Code 15701	Amount of Each Disbursement this Period 263.61	
Purpose of Disbursement LEGAL FEES		Category/ Type 001	Transaction ID : SB17.114168	
Candidate Name		<input type="checkbox"/> Memo Item		
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. THE GIORGIO FOUNDATION			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address PO BOX 598			FEC Identification Number C	
City HASTINGS	State PA	Zip Code 16646	Amount of Each Disbursement this Period 400.00	
Purpose of Disbursement EVENT SPONSORSHIP		Category/ Type 001	Transaction ID : SB17.113938	
Candidate Name		<input type="checkbox"/> Memo Item		
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. THE JOSEPH F. BIDDLE PUBLISHING CO			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016	
Mailing Address THE DAILY NEWS/THE DAILY HERALD PO BOX 384			FEC Identification Number C	
City HUNTINGDON	State PA	Zip Code 16652	Amount of Each Disbursement this Period 601.60	
Purpose of Disbursement ADVERTISING		Category/ Type 001	Transaction ID : SB17.113854	
Candidate Name		<input type="checkbox"/> Memo Item		
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).....▶	1265.21
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE JOSEPH F. BIDDLE PUBLISHING CO			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016		
Mailing Address THE DAILY NEWS/THE DAILY HERALD PO BOX 384			FEC Identification Number C		
City HUNTINGDON	State PA	Zip Code 16652	Amount of Each Disbursement this Period 144.50		
Purpose of Disbursement ADVERTISING		Category/ Type 001	Transaction ID : SB17.114143		
Candidate Name		Memo Item <input type="checkbox"/>			
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. THE TARRANCE GROUP, INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016		
Mailing Address 201 NORTH UNION STREET SUITE 410			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 29070.00		
Purpose of Disbursement POLLING		Category/ Type 001	Transaction ID : SB17.113990		
Candidate Name		Memo Item <input type="checkbox"/>			
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. TUSCARORA AREA CHAMBER OF COMMERCE			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016		
Mailing Address 19 NORTH MAIN STREET PO BOX 161			FEC Identification Number C		
City MERCERSBURG	State PA	Zip Code 17236	Amount of Each Disbursement this Period 100.00		
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.113855		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	29314.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 200			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TUSCARORA AREA CHAMBER OF COMMERCE			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016		
Mailing Address 19 NORTH MAIN STREET PO BOX 161					
City MERCERSBURG	State PA	Zip Code 17236	FEC Identification Number C		
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Amount of Each Disbursement this Period 100.00		
Candidate Name		Transaction ID : SB17.113874			
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) B. TUSCARORA AREA CHAMBER OF COMMERCE			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016		
Mailing Address 19 NORTH MAIN STREET PO BOX 161					
City MERCERSBURG	State PA	Zip Code 17236	FEC Identification Number C		
Purpose of Disbursement EVENT TICKET		Category/ Type 001	Amount of Each Disbursement this Period 50.00		
Candidate Name		Transaction ID : SB17.114167			
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) C. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2016		
Mailing Address PO BOX 15026					
City ALBANY	State NY	Zip Code 12212	FEC Identification Number C		
Purpose of Disbursement TELEPHONE		Category/ Type 001	Amount of Each Disbursement this Period 167.45		
Candidate Name		Transaction ID : SB17.113761			
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	317.45
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 200			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2016		
Mailing Address PO BOX 15026			FEC Identification Number C		
City ALBANY	State NY	Zip Code 12212	Amount of Each Disbursement this Period 192.44		
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : SB17.113762		
Candidate Name		<input type="checkbox"/> Memo Item			
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. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2016		
Mailing Address PO BOX 15026			FEC Identification Number C		
City ALBANY	State NY	Zip Code 12212	Amount of Each Disbursement this Period 670.20		
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : SB17.114001		
Candidate Name		<input type="checkbox"/> Memo Item			
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. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address PO BOX 15026			FEC Identification Number C		
City ALBANY	State NY	Zip Code 12212	Amount of Each Disbursement this Period 142.44		
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : SB17.113962		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	1005.08
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 200			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address PO BOX 15026			FEC Identification Number C		
City ALBANY	State NY	Zip Code 12212	Amount of Each Disbursement this Period 729.37		
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : SB17.113966		
Candidate Name		<input type="checkbox"/> Memo Item			
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. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2016		
Mailing Address PO BOX 15026			FEC Identification Number C		
City ALBANY	State NY	Zip Code 12212	Amount of Each Disbursement this Period 147.46		
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : SB17.114043		
Candidate Name		<input type="checkbox"/> Memo Item			
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. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016		
Mailing Address PO BOX 15026			FEC Identification Number C		
City ALBANY	State NY	Zip Code 12212	Amount of Each Disbursement this Period 1193.39		
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : SB17.114166		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	2070.22
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 196 OF 200	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WEX BANK		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016
Mailing Address PO BOX 6293		FEC Identification Number C
City CAROL STREAM	State IL	Zip Code 60197
Purpose of Disbursement SEE MEMO ENTRY	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 117.96
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:	Transaction ID : SB17.114145 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. SHEETZ INC		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016
Mailing Address 5700 SIXTH AVENUE		FEC Identification Number C
City ALTOONA	State PA	Zip Code 16602
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 117.96
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:	Transaction ID : SB17.114146 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. YMCA OF INDIANA COUNTY		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016
Mailing Address 60 N BEN FRANKLIN RD		FEC Identification Number C
City INDIANA	State PA	Zip Code 15701
Purpose of Disbursement EVENT SPONSORSHIP	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 800.00
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:	Transaction ID : SB17.113781 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	917.96
TOTAL This Period (last page this line number only).....▶	283565.36

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 197 OF 200	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WEBER FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016	
Mailing Address PO BOX 1327			FEC Identification Number C C00502229	
City FRIENDSWOOD	State TX	Zip Code 77549	Amount of Each Disbursement this Period 1200.00	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Transaction ID : SB20C.114165	
Candidate Name WEBER, RANDY, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: TX District: 14				

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 200			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. INDIANA JR. LIVESTOCK SALE			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016		
Mailing Address PO BOX 22			FEC Identification Number C		
City CLYMER	State PA	Zip Code 15728	Amount of Each Disbursement this Period 524.25		
Purpose of Disbursement DONATION		Category/ Type 012	Transaction ID : SB21.114134		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. JOHN BRANNAN FOR STATE REPRESENTATIVE			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2016		
Mailing Address 11 MERRILL ROAD			FEC Identification Number C		
City HULL	State MA	Zip Code 02045	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type 011	Transaction ID : SB21.113889		
Candidate Name , JOHN BRANNAN, ,		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. NRCC			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2016		
Mailing Address 320 1ST ST SE			FEC Identification Number C C00075820		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 25000.00		
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type 011	Transaction ID : SB21.114175		
Candidate Name NRCC		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	26524.25
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 199 OF 200	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

A. OPERATION OUR TOWN

Full Name (Last, First, Middle Initial)
Mailing Address 5508 6TH AVENUE

City ALTOONA State PA Zip Code 16602

Purpose of Disbursement DONATION Category/Type 012

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 25 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 1500.00

Transaction ID : SB21.113757

Memo Item

B. PENNSYLVANIA REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
Mailing Address 112 STATE STREET

City HARRISBURG State PA Zip Code 17101

Purpose of Disbursement POLITICAL CONTRIBUTION Category/Type 011

Candidate Name PENNSYLVANIA REPUBLICAN PARTY

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 27 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 50000.00

Transaction ID : SB21.114164

Memo Item

C. SOMERSET JR. LIVESTOCK SALE COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 291 POVERTY HOLLOW ROAD

City SOMERSET State PA Zip Code 15501

Purpose of Disbursement DONATION Category/Type 012

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 23 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 956.00

Transaction ID : SB21.114142

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 52456.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 200 OF 200	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BILL SHUSTER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE GRIFFITH FAMILY FOUNDATION			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016	
Mailing Address P.O. BOX 28			FEC Identification Number C	
City HOLLISDAYBURG	State PA	Zip Code 16648	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement DONATION		Category/ Type 012	Transaction ID : SB21.113747	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. THE HOMEWOOD FOUNDATION			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address 16107 ELLIOTT PARKWAY			FEC Identification Number C	
City WILLIAMSPORT	State MD	Zip Code 21795	Amount of Each Disbursement this Period 420.00	
Purpose of Disbursement DONATION		Category/ Type 012	Transaction ID : SB21.113779	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ULSH, STUART, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 226 RESERVOIR ROAD			FEC Identification Number C	
City MCCONNELLSBURG	State PA	Zip Code 17233	Amount of Each Disbursement this Period 995.60	
Purpose of Disbursement DONATION		Category/ Type 012	Transaction ID : SB21.113960	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1915.60
TOTAL This Period (last page this line number only).....▶	80895.85