

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Bill Shuster for Congress

ADDRESS (number and street)

PQ Box 27

Check if different than previously reported. (ACC)

Hollidaysburg

PA

16848

2. **FEC IDENTIFICATION NUMBER**

C00364935

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT **NEW (N)** OR **X AMENDED (A)**

PA 9

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

In the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period 01 01 2003 through 03 31 2003

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

Type or Print Name of Treasurer Frederick A Ciocca

Signature of Treasurer Electronically Filed by Frederick A Ciocca Date 11 21 2003

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

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Bill Shuster for Congress

Report Covering the Period: From: ^{M M} 0 1 ^{D D} 0 1 ^{Y Y Y Y} 2 0 0 3 To: ^{V M} 0 3 ^{D D} 3 1 ^{Y Y Y Y} 2 0 0 3

	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(a)).....	25136.50	33569.83
(b) Total Contribution Refunds (from Line 20(d)).....	.00	.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	25136.50	33569.83
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	29396.65	86819.63
(b) Total Offsets to Operating Expenditures (from Line 14).....	.00	50.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	29396.65	86769.63
8. Cash on Hand at Close of Reporting Period (from Line 27).....	25696.17	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	509.95	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	3602.16	

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 02/2003)

Page 3

Write or Type Committee Name

Bill Shuster for Congress

Report Covering the Period: From: ^{M M} 0 1 ^{D J} 0 1 ^Y 2 0 0 3 To: ^{V V} 0 3 ^{U J} 3 1 ^Y 2 0 0 3

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).....	7900.00	
(ii) Unitemized.....	3225.00	
(iii) TOTAL of contributions	11125.00	17625.00
from individuals..... ▶		
(b) Political Party Committees.....	411.50	411.50
(c) Other Political Committees (such as PACS).....	13600.00	15533.33
(d) The Candidate.....	.00	.00
(e) TOTAL CONTRIBUTIONS (other than loans)	25136.50	33569.83
(add Lines 11(a)(iii), (b), (c), and (d))		
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	.00	.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	.00	.00
(b) All Other Loans.....	.00	.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	.00	.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	.00	50.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	.00	.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	25136.50	33619.83

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	29396.65	86819.63
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	.00	.00
19. LOAN REPAYMENTS:		
(b) Of Loans Made or Guaranteed by the Candidate.....	.00	.00
(b) Of all Other Loans.....	673.25	894.34
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	673.25	894.34
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	.00	.00
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	.00	.00
21. OTHER DISBURSEMENTS.....	12280.00	14620.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) [>]	42349.90	102333.97

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	42909.57
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	25136.50
25. SUBTOTAL (add Line 23 and Line 24).....	68046.07
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	42349.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	25696.17

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 / 66	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Mark E Pasquerella		Date of Receipt M / D / Y 03 / 27 / 2003
Mailing Address 945 Mencher Blvd		Transaction ID: SA11Ai-CN2547
City Johnstown	State PA	Zip Code 15805
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Crown American Realty Trust	Occupation Real Estate Developer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Kenneth W Butler		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 11810 Lyrac Court		Transaction ID: SA11Ai-CN2608
City Oakton	State VA	Zip Code 22124
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Capital Partnerships(VA) Inc.	Occupation Transportation Consultant	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Edmund C Graber		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 10102 Lawyers Road		Transaction ID: SA11Ai-CN2598
City Vienna	State VA	Zip Code 22181
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Consultant-Government Affairs	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 66	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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

Full Name (Last, First, Middle Initial) A. Esq. Martin G Hamberger		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 111 D Water Pointe Lane		Transaction ID: SA11Ai-CN2604
City Reston	State VA	Zip Code 20184
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self Employed	Occupation Attorney/Consultant	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Heidi E Sroka		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 292 Golden Ridge Drive		Transaction ID: SA11Ai-CN2650
City Somerset	State PA	Zip Code 15501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) C. Leroy S Zimmerman		Date of Receipt M / D / Y 01 / 17 / 2003
Mailing Address P O Box 789		Transaction ID: SA11Ai-CN2640
City Harrisburg	State PA	Zip Code 17108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Select Medical Corporation	Occupation Executive Vice President	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 66	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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

Full Name (Last, First, Middle Initial) A. Michael E Strachn		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 8331 Silas Burke Street		Transaction ID: SA11Ai-CN2597
City Burke	State VA	Zip Code 22015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Cassidy & Associates	Occupation Government Affairs	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Robert E Letham		Date of Receipt M / D / Y 02 / 21 / 2003
Mailing Address 1003 Saint Andrews Court		Transaction ID: SA11Ai-CN2541
City City not found	State	Zip Code 17050
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Assoc PA Constructors	Occupation Executive Vice President	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Scott Bosworth		Date of Receipt M / D / Y 03 / 25 / 2003
Mailing Address 129 Fort Hill Street		Transaction ID: SA11Ai-CN2548
City Hingham	State MA	Zip Code 02043
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Cassidy & Associates	Occupation Government Affairs Consultant	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 66	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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

Full Name (Last, First, Middle Initial) A. Robert Scott		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address Po Box 4385		Transaction ID: SA11Ai-CN2549
City Hidden Valley	State PA	Zip Code 15502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) B. Michael W Brandle		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 252 Schoolhouse Road		Transaction ID: SA11Ai-CN2564
City Somerset	State PA	Zip Code 15501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Brandle Farms Inc.	Occupation President/Majority Owner	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. John B Blount		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 818 Connecticut Ave NW Suite 1100		Transaction ID: SA11Ai-CN2565
City Washington	State DC	Zip Code 20008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer The National Group	Occupation Lobbyist	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 66	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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

Full Name (Last, First, Middle Initial) A. WRobert Bastian		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 347 Blackburn Road		Transaction ID: SA11Ai-CN2571
City Friedens	State PA	Zip Code 15541
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Somerset Co	Occupation State Representative	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Jr. LeRoyD Kline		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 1709 Olmsbed Wway West		Transaction ID: SA11Ai-CN2584
City Camp Hill	State PA	Zip Code 17011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Delta Development Group, Inc	Occupation President	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. JamesR Marth		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 309 Tulip Drive		Transaction ID: SA11Ai-CN2588
City Indiana	State PA	Zip Code 15701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer PBS Coals Inc	Occupation CFO	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 66	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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

Full Name (Last, First, Middle Initial) A. Eileen Barbera Melvin		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address Po Box 775 215 Wind Drift Lane		Transaction ID: SA11Ai-CN2589
City Somerset	State PA	Zip Code 15501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Economic Development Councils	Occupation Consultant	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. David Urban		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 734 South Lee Street		Transaction ID: SA11Ai-CN2589
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer American Continental Group LLC	Occupation Lawyer/Lobbyist	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Patrick McCann		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 9717 Days Farm Drive		Transaction ID: SA11Ai-CN2589
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer McCann Capitol Advocates	Occupation Executive	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	7900.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 / 66	
	<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

Full Name (Last, First, Middle Initial) A. For Effective Govt		Date of Receipt M / D / Y 03 / 31 / 2003		
Mailing Address 800 Thirteenth Street, NW Suite 340		Transaction ID: SA11C-CN2611		
City Washington	State DC	Zip Code 20005	Amount of Each Receipt this Period 500.00 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
FEC ID number of contributing federal political committee. C C00010470				
Name of Employer none	Occupation none			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00			

Full Name (Last, First, Middle Initial) B. Dealers Election Action		Date of Receipt M / D / Y 03 / 28 / 2003		
Mailing Address 8400 Westpark Drive		Transaction ID: SA11C-CN2603		
City Mc Lean	State VA	Zip Code 22102	Amount of Each Receipt this Period 500.00 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
FEC ID number of contributing federal political committee. C C00040898				
Name of Employer none	Occupation none			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00			

Full Name (Last, First, Middle Initial) C. Truck		Date of Receipt M / D / Y 03 / 31 / 2003		
Mailing Address 430 First Street SE		Transaction ID: SA11C-CN2615		
City Washington	State DC	Zip Code 20003	Amount of Each Receipt this Period 500.00 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
FEC ID number of contributing federal political committee. C C00002851				
Name of Employer none	Occupation none			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00			

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 / 66	
	<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

Full Name (Last, First, Middle Initial) A. Amalgamated Transit Union-COPE		Date of Receipt M / D / Y 03 / 14 / 2003
Mailing Address 5025 Wisconsin Ave NW		Transaction ID: SA11C-CN2545
City Washington	State DC	Zip Code 20016
FEC ID number of contributing federal political committee. C C00032695		Amount of Each Receipt this Period 1000.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. American Maritime Officers Voluntary		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 850 Fourth Avenue		Transaction ID: SA11C-CN2607
City Brooklyn	State NY	Zip Code 11232
FEC ID number of contributing federal political committee. C C00027532		Amount of Each Receipt this Period 1000.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. PPL People For Good Govt		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address Two North Ninth Street		Transaction ID: SA11C-CN2613
City Allentown	State PA	Zip Code 18101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 / 66		
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Good Govt Club		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 1717 Arch Street 47-s		Transaction ID: SA11C-CN2605
City Philadelphia	State PA	Zip Code 19103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. American Dental		Date of Receipt M / D / Y 03 / 07 / 2003
Mailing Address 1111 14th Street NW Suite 1100		Transaction ID: SA11C-CN2543
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C CD0000729		Amount of Each Receipt this Period 2500.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. National Restaurant Assoc		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 1200 17th Street NW		Transaction ID: SA11C-CN2612
City Washington	State DC	Zip Code 20038
FEC ID number of contributing federal political committee. C CD0003784		Amount of Each Receipt this Period 500.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 / 66	
	<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

Full Name (Last, First, Middle Initial) A. Wine Spirits Wholesalers Of America		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 805 Fifteenth Street NW Suite 43D		Transaction ID: SA11C-CN2614
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00147173		Amount of Each Receipt this Period 500.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Bipartisan		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address One Mellon Bank Center Room 625		Transaction ID: SA11C-CN2609
City Pittsburgh	State PA	Zip Code 15259
FEC ID number of contributing federal political committee. C CD0017558		Amount of Each Receipt this Period 500.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. CME Action Fund		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address The American Road		Transaction ID: SA11C-CN2616
City Dearborn	State MI	Zip Code 48121
FEC ID number of contributing federal political committee. C CD0046474		Amount of Each Receipt this Period 500.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 / 66	
	<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

Full Name (Last, First, Middle Initial) A. GAMA		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 1400 K Street NW Suite B01		Transaction ID: SA11C-CN2606
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00014878		Amount of Each Receipt this Period 500.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Hardy-Magenta		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address P.O. Box 584 Rt 519		Transaction ID: SA11C-CN2610
City Eighty Four	State PA	Zip Code 15330
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. NFG FED		Date of Receipt M / D / Y 03 / 14 / 2003
Mailing Address 10 Lafayette Square		Transaction ID: SA11C-CN2544
City Buffalo	State NY	Zip Code 14203
FEC ID number of contributing federal political committee. C CD0083758		Amount of Each Receipt this Period 500.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 / 66	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Coal		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 101 Constitution Avenue NW Suite 500 East		Transaction ID: SA11C-CN2600
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C C00109819		Amount of Each Receipt this Period 500.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Manitowoc Company		Date of Receipt M / D / Y 02 / 28 / 2003
Mailing Address P.O. Box 1101		Transaction ID: SA11C-CN2542
City Marinette	State WI	Zip Code 54143
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Citizens For Gohar		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 242 Barron Road		Transaction ID: SA11C-CN2568
City Somerset	State PA	Zip Code 15501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 100.00	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 66	
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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

Full Name (Last, First, Middle Initial) A. National Air Traffic Controllers		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 1325 Massachusetts Avenue NW		Transaction ID: SA11C-CN2601
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee. C C00238725		Amount of Each Receipt this Period 500.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Watson		Date of Receipt M / D / Y 03 / 28 / 2003
Mailing Address 1001 Connecticut Avenue NW Suite 1200		Transaction ID: SA11C-CN2602
City	State	Zip Code
Washington	DC	20036
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	13600.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 / 66	
	<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Nat Republican Congressional		Date of Receipt M / D / Y 01 / 07 / 2003
Mailing Address 320 First Street SE		Transaction ID: SA11B-CN2653
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee. C C00075820		Amount of Each Receipt this Period 203.69
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 203.69	
		In-Kind Received Satellite Feed

Full Name (Last, First, Middle Initial) B. Nat Republican Congressional		Date of Receipt M / D / Y 02 / 17 / 2003
Mailing Address 320 First Street SE		Transaction ID: SA11B-CN2654
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee. C CD0075820		Amount of Each Receipt this Period 196.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 399.69	
		In-Kind Received Blast Fax for 2/17 & 2/28/2003

Full Name (Last, First, Middle Initial) C. Nat Republican Congressional		Date of Receipt M / D / Y 03 / 20 / 2003
Mailing Address 320 First Street SE		Transaction ID: SA11B-CN2655
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee. C CD0075820		Amount of Each Receipt this Period 11.81
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 411.50	
		In-Kind Received Satellite Feed

SUBTOTAL of Receipts This Page (optional)	▶	411.50
TOTAL This Period (last page this line number only)	▶	411.50

**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 19 / 66
	<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. First National Bank		Transaction ID: SB19B-LP17 Date of Disbursement 01 / 14 / 2003	
Mailing Address 101 Lincoln Way West		Amount of Each Disbursement this Period 222.74	
City Mc Connellsburg	State PA	Zip Code 17233	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Repay Loan		Category/ Type	
Candidate Name			Payment on Car Loan Acct #2000041785
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. First National Bank		Transaction ID: SB19B-LP18 Date of Disbursement 02 / 11 / 2003	
Mailing Address 101 Lincoln Way West		Amount of Each Disbursement this Period 224.41	
City Mc Connellsburg	State PA	Zip Code 17233	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Repay Loan		Category/ Type	
Candidate Name			Payment on Car Loan Acct #2000041785
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. First National Bank		Transaction ID: SB19B-LP19 Date of Disbursement 03 / 19 / 2003	
Mailing Address 101 Lincoln Way West		Amount of Each Disbursement this Period 226.10	
City Mc Connellsburg	State PA	Zip Code 17233	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Repay Loan		Category/ Type	
Candidate Name			Payment on Car Loan Acct #2000041785
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	673.25
TOTAL This Period (last page this line number only)	▶	673.25

**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 20 / 66
	<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 National Bank		Transaction ID: SB17-LP17 Date of Disbursement 01 / 14 / 2003	
Mailing Address 101 Lincoln Way West		Amount of Each Disbursement this Period 32.06	
City Mc Connellsburg	State PA	Zip Code 17233	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Loan interest Expenditure		Category/ Type	
Candidate Name			Payment on Car Loan Acct #2000041785
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. First National Bank		Transaction ID: SB17-LP18 Date of Disbursement 02 / 11 / 2003	
Mailing Address 101 Lincoln Way West		Amount of Each Disbursement this Period 30.39	
City Mc Connellsburg	State PA	Zip Code 17233	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Loan interest Expenditure		Category/ Type	
Candidate Name			Payment on Car Loan Acct #2000041785
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. First National Bank		Transaction ID: SB17-LP19 Date of Disbursement 03 / 19 / 2003	
Mailing Address 101 Lincoln Way West		Amount of Each Disbursement this Period 28.70	
City Mc Connellsburg	State PA	Zip Code 17233	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Loan interest Expenditure		Category/ Type	
Candidate Name			Payment on Car Loan Acct #2000041785
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	91.15
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 21 / 66
	<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. Manning		Transaction ID: SB17-EX1806 Date of Disbursement 01 / 13 / 2003	
Mailing Address 610 Garber Street			
City Holidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 319.29 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	12/28 to 1/11/2003 Campaign Workers' Salaries

Full Name (Last, First, Middle Initial) B. Grance Photography		Transaction ID: SB17-EX1807 Date of Disbursement 01 / 14 / 2003	
Mailing Address 25 East Main Street			
City Everett	State PA	Zip Code 15537	Amount of Each Disbursement this Period 180.20 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	on location photo session Office Expenses

Full Name (Last, First, Middle Initial) C. CTI/PAdotNET		Transaction ID: SB17-EX1810 Date of Disbursement 01 / 14 / 2003	
Mailing Address 5170 E. Trindle Road			
City Mechanicsburg	State PA	Zip Code 17050	Amount of Each Disbursement this Period 31.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Website 1/1 to 3/31/2003 Office Expenses

SUBTOTAL of Disbursements This Page (optional)	▶	530.49
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 22 / 66
	<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		Transaction ID: SB17-EX1811 Date of Disbursement 01 / 14 / 2003	
Mailing Address PO Box 8585			
City Philadelphia	State PA	Zip Code 19173	Amount of Each Disbursement this Period 179.58
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	814 698-0225-808 28Y 12/28 to 1/27 Telephone	
State: District			

Full Name (Last, First, Middle Initial) B. WRTA AM News/Talk		Transaction ID: SB17-EX1814 Date of Disbursement 01 / 14 / 2003	
Mailing Address 1419 12th Avenue			
City Altoona	State PA	Zip Code 16603	Amount of Each Disbursement this Period 250.00
Purpose of Disbursement Expenditure Candidate Name		004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	All xmas music invoice #1-2169 Radio Ads	
State: District			

Full Name (Last, First, Middle Initial) C. Bishop Guilfoyle High School		Transaction ID: SB17-EX1815 Date of Disbursement 01 / 14 / 2003	
Mailing Address 2210 16th Avenue			
City Altoona	State PA	Zip Code 16601	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Expenditure Candidate Name		004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Ad in Lady Marauder Program Print Ads	
State: District			

SUBTOTAL of Disbursements This Page (optional)	529.58
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 23 / 66
	<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. Hewitt		Transaction ID: SB17-EX1816 Date of Disbursement 01 / 14 / 2003	
Mailing Address 1407 Walnut Street			
City Holidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 36.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Indiana trip with firetruck Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) B. Kurtz		Transaction ID: SB17-EX1817 Date of Disbursement 01 / 14 / 2003	
Mailing Address 303 Laurel Street			
City Bellwood	State PA	Zip Code 16617	Amount of Each Disbursement this Period 19.07 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Camera Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) C. Kurtz		Transaction ID: SB17-EX1818 Date of Disbursement 01 / 14 / 2003	
Mailing Address 303 Laurel Street			
City Bellwood	State PA	Zip Code 16617	Amount of Each Disbursement this Period 30.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Gasoline Vehicle Expenses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	85.07
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 24 / 66
	<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. Kurtz		Transaction ID: SB17-EX1819 Date of Disbursement 01 / 14 / 2003	
Mailing Address 303 Laurel Street			
City Bellwood	State PA	Zip Code 16817	Amount of Each Disbursement this Period 55.20 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 mileage reimbursement Vehicle Expenses
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Campaign Resource Strategies		Transaction ID: SB17-EX1820 Date of Disbursement 01 / 14 / 2003	
Mailing Address 606 North Imboden Street No. 301			
City Alexandria	State VA	Zip Code 22304	Amount of Each Disbursement this Period 5000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Consulting fee-Dec 02 and Jan 03 Campaign Consultant
Purpose of Disbursement Expenditure		003 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. PA Department Of Revenue		Transaction ID: SB17-EX1821 Date of Disbursement 01 / 15 / 2003	
Mailing Address DEPT 280414			
City Harrisburg	State PA	Zip Code 17128	Amount of Each Disbursement this Period 30.10 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PA withholding P/E 12/31-02 Payroll Taxes
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	5085.30
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 25 / 66
	<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. M and T Bank		Transaction ID: SB17-EX1822 Date of Disbursement 01 / 15 / 2003	
Mailing Address 301 W Plank Road		Amount of Each Disbursement this Period 207.38	
City Altoona	State PA	Zip Code 16802	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		941 4th quarter 2002 Payroll Taxes	
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Dollar General Store		Transaction ID: SB17-EX1823 Date of Disbursement 01 / 13 / 2003	
Mailing Address 502 Third Avenue		Amount of Each Disbursement this Period 5.24	
City Duncansville	State PA	Zip Code 16835	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		Supplies for cards Petty Cash	
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Dunkin Donuts		Transaction ID: SB17-EX1824 Date of Disbursement 01 / 13 / 2003	
Mailing Address 3130 Pleasant Valley Blvd		Amount of Each Disbursement this Period 3.98	
City Altoona	State PA	Zip Code 16802	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		Volunteers for cards Petty Cash	
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	216.61
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 26 / 66
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. US Postal Service		Transaction ID: SB17-EX1826 Date of Disbursement 01 / 13 / 2003	
Mailing Address 525 Allegheny Street		Amount of Each Disbursement this Period 2.67	
City Hollidaysburg	State PA	Zip Code 16648	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/Type	
Candidate Name		postage Petty Cash	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Coffee Den		Transaction ID: SB17-EX1826 Date of Disbursement 01 / 13 / 2003	
Mailing Address Allegheny Street		Amount of Each Disbursement this Period 0.30	
City Hollidaysburg	State PA	Zip Code 16648	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/Type	
Candidate Name		lunch for volunteers Petty Cash	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Staples-291		Transaction ID: SB17-EX1827 Date of Disbursement 01 / 13 / 2003	
Mailing Address Plank Road/Orchard Plaza		Amount of Each Disbursement this Period 35.53	
City Altoona	State PA	Zip Code 16802	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/Type	
Candidate Name		medallion seals for cards Petty Cash	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	47.59
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 27 / 66
	<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. Coffee Den		Transaction ID: SB17-EX1828 Date of Disbursement 01 / 13 / 2003	
Mailing Address Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 19.40
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	lunch for volunteers Petty Cash	
State: District			

Full Name (Last, First, Middle Initial) B. US Postal Service		Transaction ID: SB17-EX1828 Date of Disbursement 01 / 13 / 2003	
Mailing Address 525 Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 3.95
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	postage Petty Cash	
State: District			

Full Name (Last, First, Middle Initial) C. Ciocca Benton And Company		Transaction ID: SB17-EX1830 Date of Disbursement 01 / 13 / 2003	
Mailing Address PO Box 1473			
City Altoona	State PA	Zip Code 16803	Amount of Each Disbursement this Period 15.00
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	5 reams of paper Petty Cash	
State: District			

SUBTOTAL of Disbursements This Page (optional)	38.35
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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. US Postal Service		Transaction ID: SB17-EX1831 Date of Disbursement 01 / 13 / 2003	
Mailing Address 525 Allegheny Street		Amount of Each Disbursement this Period 74.00	
City Hollidaysburg	State PA	Zip Code 16848	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 2 rolls of stamps Petty Cash
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	State: District	

Full Name (Last, First, Middle Initial) B. Starbucks		Transaction ID: SB17-EX1835 Date of Disbursement 01 / 14 / 2003	
Mailing Address Capitol Hill		Amount of Each Disbursement this Period 48.50	
City Washington	State DC	Zip Code 20003	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Supplies for meeting in DC Meals
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	State: District	

Full Name (Last, First, Middle Initial) C. Tortilla Coast		Transaction ID: SB17-EX1836 Date of Disbursement 01 / 14 / 2003	
Mailing Address 400 First Street SE		Amount of Each Disbursement this Period 118.94	
City Washington	State DC	Zip Code 20001	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Meals
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	State: District	

SUBTOTAL of Disbursements This Page (optional)	▶	243.44
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Minetta Tavern		Transaction ID: SB17-EX1837 Date of Disbursement 01 / 14 / 2003	
Mailing Address 113 MacDougal Street			
City New York	State NY	Zip Code 10012	Amount of Each Disbursement this Period 186.50
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	12/14 NYC Meals	
State: District			

Full Name (Last, First, Middle Initial) B. Minetta Tavern		Transaction ID: SB17-EX1838 Date of Disbursement 01 / 14 / 2003	
Mailing Address 113 MacDougal Street			
City New York	State NY	Zip Code 10012	Amount of Each Disbursement this Period 49.50
Purpose of Disbursement Expenditure		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	12/15 NYC Meals	
State: District			

Full Name (Last, First, Middle Initial) C. Minetta Tavern		Transaction ID: SB17-EX1839 Date of Disbursement 01 / 14 / 2003	
Mailing Address 113 MacDougal Street			
City New York	State NY	Zip Code 10012	Amount of Each Disbursement this Period 1617.25
Purpose of Disbursement Expenditure		003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	NYC event 12/14 Fundraising	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	1853.25
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 30 / 66
	<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. Town Car Limo Service Inc.		Transaction ID: SB17-EX1840 Date of Disbursement 01 / 14 / 2003	
Mailing Address 245 W 72nd Street			
City New York	State NY	Zip Code 10023	Amount of Each Disbursement this Period 510.00
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Teeterboro Airport Taxi/Car/Bus Expense	
State: District			

Full Name (Last, First, Middle Initial) B. Town Car Limo Service Inc.		Transaction ID: SB17-EX1841 Date of Disbursement 01 / 14 / 2003	
Mailing Address 245 W 72nd Street			
City New York	State NY	Zip Code 10023	Amount of Each Disbursement this Period 691.20
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Airport Taxi/Car/Bus Expense	
State: District			

Full Name (Last, First, Middle Initial) C. Splish Splash Auto Bath		Transaction ID: SB17-EX1842 Date of Disbursement 01 / 14 / 2003	
Mailing Address 2341 N Old Route 220			
City Duncansville	State PA	Zip Code 16835	Amount of Each Disbursement this Period 7.00
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	Vehicle Expenses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	1208.20
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 31 / 66
	<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. Hoss Steak And Sea		Transaction ID: SB17-EX1843 Date of Disbursement 01 / 14 / 2003	
Mailing Address Wye Switches			
City Duncansville	State PA	Zip Code 16835	Amount of Each Disbursement this Period 65.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Meals
State: District			

Full Name (Last, First, Middle Initial) B. Cozy Inn		Transaction ID: SB17-EX1844 Date of Disbursement 01 / 14 / 2003	
Mailing Address 114 S Main Street			
City Chambersburg	State PA	Zip Code 17201	Amount of Each Disbursement this Period 32.98 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Meals
State: District			

Full Name (Last, First, Middle Initial) C. Stop 35		Transaction ID: SB17-EX1845 Date of Disbursement 01 / 14 / 2003	
Mailing Address Street Required			
City Mifflintown	State PA	Zip Code 17059	Amount of Each Disbursement this Period 28.18 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Meals
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	127.17
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 32 / 66
	<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. M and T Bank		Transaction ID: SB17-EX1847 Date of Disbursement 01 / 22 / 2003	
Mailing Address 301 W Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 6.96
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 940-4th quarter 2002 Payroll Taxes
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Hollidaysburg Area School Dist		Transaction ID: SB17-EX1848 Date of Disbursement 01 / 22 / 2003	
Mailing Address 201 Jackson Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 34.00
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 4th quarter 2002 Payroll Taxes
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. PA LC Fund		Transaction ID: SB17-EX1849 Date of Disbursement 01 / 22 / 2003	
Mailing Address PO Box 60190			
City Harrisburg	State PA	Zip Code 17108	Amount of Each Disbursement this Period 64.55
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 4th quarter 2002 #07-16569 Payroll Taxes
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	105.51
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 33 / 66
	<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		Transaction ID: SB17-EX1850 Date of Disbursement 01 / 22 / 2003	
Mailing Address Account Address			
City Harrisburg	State PA	Zip Code 00000-0	Amount of Each Disbursement this Period 75.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Membership card fee Bank Service Charge	
State: District			

Full Name (Last, First, Middle Initial) B. Bedford Co. Twp Officials		Transaction ID: SB17-EX1851 Date of Disbursement 01 / 22 / 2003	
Mailing Address 5735 Chaneyville Road			
City Clearville	State PA	Zip Code 15535	Amount of Each Disbursement this Period 100.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		004 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Full page ad in directory Print Ads	
State: District			

Full Name (Last, First, Middle Initial) C. AT/T Wireless Services		Transaction ID: SB17-EX1852 Date of Disbursement 01 / 22 / 2003	
Mailing Address PO 944039			
City Maitland	State FL	Zip Code 32794	Amount of Each Disbursement this Period 88.10 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	2002529863 12/9 to 1/8/-03 Telephone	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	263.10
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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17 20a 18 20b 19a 20c 19b 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Manning		Transaction ID: SB17-EX1853 Date of Disbursement 01 / 27 / 2003	
Mailing Address 610 Garber Street			
City Holidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 372.29 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 1/12 to 1/25/2003 Campaign Workers' Salaries
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Manning		Transaction ID: SB17-EX1854 Date of Disbursement 02 / 10 / 2003	
Mailing Address 610 Garber Street			
City Holidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 33.81 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 mileage reimbursement Vehicle Expenses
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Manning		Transaction ID: SB17-EX1855 Date of Disbursement 02 / 10 / 2003	
Mailing Address 610 Garber Street			
City Holidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 234.87 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 1/26 to 2/8/2003 Campaign Workers' Salaries
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	640.97
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 35 / 66
	<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. Charter Communications VI LLC		Transaction ID: SB17-EX1858 Date of Disbursement 02 / 11 / 2003	
Mailing Address 2200 Beale Avenue		Amount of Each Disbursement this Period 94.25 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 installation & 1/21 to 2/20/03 Utilities	
City Altoona	State PA		Zip Code 16801
Purpose of Disbursement Expenditure			001 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Campaign Resource Strategies		Transaction ID: SB17-EX1858 Date of Disbursement 02 / 11 / 2003	
Mailing Address 606 North Imboden Street No. 301		Amount of Each Disbursement this Period 2500.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Campaign Consultant Campaign Consultant	
City Alexandria	State VA		Zip Code 22304
Purpose of Disbursement Expenditure			003 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Precision Marketing Inc		Transaction ID: SB17-EX1860 Date of Disbursement 02 / 11 / 2003	
Mailing Address 2906 William Penn Highway		Amount of Each Disbursement this Period 943.13 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Invoice #1890 Polling Costs	
City Easton	State PA		Zip Code 18045
Purpose of Disbursement Expenditure			005 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	3537.38
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 36 / 66
	<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 Co. Republican Comm		Transaction ID: SB17-EX1861 Date of Disbursement 02 / 11 / 2003	
Mailing Address PO Box 61			
City Huntingdon	State PA	Zip Code 16852	Amount of Each Disbursement this Period 100.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		004 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Lincoln Day Booklet ad Pr- int Ads
State: District			

Full Name (Last, First, Middle Initial) B. US Postal Service		Transaction ID: SB17-EX1862 Date of Disbursement 02 / 11 / 2003	
Mailing Address 525 Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 68.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	PO Box yearly fee Postage
State: District			

Full Name (Last, First, Middle Initial) C. Kurtz		Transaction ID: SB17-EX1863 Date of Disbursement 02 / 11 / 2003	
Mailing Address 303 Laurel Street			
City Bellwood	State PA	Zip Code 16817	Amount of Each Disbursement this Period 26.88 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Shelf for office Office Expenses
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	194.88
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 37 / 66
	<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		Transaction ID: SB17-EX1864 Date of Disbursement 02 / 11 / 2003
Mailing Address PO Box 8585		Amount of Each Disbursement this Period 423.45 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 814 698-0225-608 26Y 1/28 to 2/27 Telephone
City Philadelphia	State PA Zip Code 19173	
Purpose of Disbursement Expenditure	Candidate Name	
Office Sought: House Senate President		
State: District		

Full Name (Last, First, Middle Initial) B. M and T Bank		Transaction ID: SB17-EX1865 Date of Disbursement 02 / 11 / 2003
Mailing Address 301 W Plank Road		Amount of Each Disbursement this Period 157.23 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 941-1st quarter 2003 Payroll Taxes
City Altoona	State PA Zip Code 16602	
Purpose of Disbursement Expenditure	Candidate Name	
Office Sought: House Senate President		
State: District		

Full Name (Last, First, Middle Initial) C. Shuster William		Transaction ID: SB17-EX1866 Date of Disbursement 02 / 14 / 2003
Mailing Address B Overlook Drive		Amount of Each Disbursement this Period 1240.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 GDP Retreat conference Office Expenses
City Hollidaysburg	State PA Zip Code 16848	
Purpose of Disbursement Expenditure	Candidate Name	
Office Sought: House Senate President		
State: District		

SUBTOTAL of Disbursements This Page (optional)	▶	1820.68
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 38 / 66
	<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. Young		Transaction ID: SB17-EX1868 Date of Disbursement 02 / 21 / 2003	
Mailing Address 311 Stone Street		Amount of Each Disbursement this Period 28.65	
City Osceola Mills	State PA	Zip Code 16606	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		gasoline reimbursement Vehicle Expenses	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Ciocca Benton And Company		Transaction ID: SB17-EX1868 Date of Disbursement 02 / 21 / 2003	
Mailing Address PO Box 1473		Amount of Each Disbursement this Period 2200.00	
City Altoona	State PA	Zip Code 16603	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		Services from 11/9/02 to 2/6/03 Professional Services	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Charter Communications VI LLC		Transaction ID: SB17-EX1870 Date of Disbursement 02 / 21 / 2003	
Mailing Address 2200 Beale Avenue		Amount of Each Disbursement this Period 74.81	
City Altoona	State PA	Zip Code 16601	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		2/21 to 3/20 Utilities	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	2303.46
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 39 / 66
	<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 Wireless Services		Transaction ID: SB17-EX1871 Date of Disbursement 02 / 21 / 2003	
Mailing Address PO 944039			
City Maitland	State FL	Zip Code 32794	Amount of Each Disbursement this Period 88.41
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 2002528983 1/9 to 2/8/03 Telephone
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Kelley		Transaction ID: SB17-EX1872 Date of Disbursement 02 / 21 / 2003	
Mailing Address 43 Seneca Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 441.67
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 2202375986 814-835-8988 Telephone
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Shanksville Firemans Aux.		Transaction ID: SB17-EX1873 Date of Disbursement 02 / 21 / 2003	
Mailing Address 187 Three Point Lane			
City Berlin	State PA	Zip Code 15530	Amount of Each Disbursement this Period 25.00
Purpose of Disbursement Expenditure Candidate Name		004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Full page ad Print Ads
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	555.08
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 40 / 66
	<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. Manning		Transaction ID: SB17-EX1874 Date of Disbursement 02 / 24 / 2003	
Mailing Address 610 Garber Street			
City Holidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 119.51
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	2/9 to 2/22/2003 Campaign Workers' Salaries
State: District			

Full Name (Last, First, Middle Initial) B. Schaffer		Transaction ID: SB17-EX1875 Date of Disbursement 02 / 25 / 2003	
Mailing Address 1501 Bass Lake Road			
City Holly Springs	State NC	Zip Code 27540	Amount of Each Disbursement this Period 200.00
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	March rent Rent
State: District			

Full Name (Last, First, Middle Initial) C. Sylvester Management Corp		Transaction ID: SB17-EX1876 Date of Disbursement 02 / 21 / 2003	
Mailing Address PO Box 986			
City Irma	State SC	Zip Code 29063	Amount of Each Disbursement this Period 385.00
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	FEC Conference Office Expenses
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	704.51
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 41 / 66
	<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. Custom Cuisine Caterer		Transaction ID: SB17-EX1877 Date of Disbursement 02 / 21 / 2003	
Mailing Address 1762 Old William Penn		Amount of Each Disbursement this Period 38.00	
City Blairsville	State PA	Zip Code 15717	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name		Meals	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Holiday Inn Express		Transaction ID: SB17-EX1878 Date of Disbursement 02 / 21 / 2003	
Mailing Address 2915 Pleasant Valley Blvd		Amount of Each Disbursement this Period 85.00	
City Altoona	State PA	Zip Code 16602	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		003 Category/ Type	
Candidate Name		Meeting room Fundraising	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Johnny On The Spot		Transaction ID: SB17-EX1879 Date of Disbursement 02 / 21 / 2003	
Mailing Address 2802 Pleasant Valley Blvd		Amount of Each Disbursement this Period 14.82	
City Altoona	State PA	Zip Code 16602	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		Campaign van Vehicle Expenses	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	137.82
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 42 / 66
	<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 Dream Restaurant		Transaction ID: SB17-EX1880 Date of Disbursement 02 / 21 / 2003	
Mailing Address 1500 Allegheny Street		Amount of Each Disbursement this Period 26.00	
City Holidaysburg	State PA	Zip Code 16648	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name		Meals	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Macneil Automotive		Transaction ID: SB17-EX1881 Date of Disbursement 02 / 21 / 2003	
Mailing Address Street Required		Amount of Each Disbursement this Period 58.95	
City Clarendon Hills	State IL	Zip Code 60514	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		Vehicle Expenses	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Galileo Ristorante		Transaction ID: SB17-EX1882 Date of Disbursement 02 / 21 / 2003	
Mailing Address 1110 21st Street NW		Amount of Each Disbursement this Period 322.00	
City Washington	State DC	Zip Code 20038	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name		Meals	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	406.95
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 43 / 66
	<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. Macneil Automotive		Transaction ID: SB17-EX1883 Date of Disbursement 02 / 21 / 2003	
Mailing Address Street Required		Amount of Each Disbursement this Period 40.00	
City Clarendon Hills	State IL	Zip Code 60514	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	vehicle expense Vehicle Expenses
State: District			

Full Name (Last, First, Middle Initial) B. Capital Hill Suites		Transaction ID: SB17-EX1884 Date of Disbursement 02 / 21 / 2003	
Mailing Address 200 C Street, SE		Amount of Each Disbursement this Period 226.70	
City Washington	State DC	Zip Code 20003	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Lodging
State: District			

Full Name (Last, First, Middle Initial) C. Nwl Golden Trott		Transaction ID: SB17-EX1885 Date of Disbursement 02 / 21 / 2003	
Mailing Address Street Required		Amount of Each Disbursement this Period 22.70	
City Farmington	State PA	Zip Code 15437	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Gift Office Expenses
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	289.40
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)

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17 20a 18 20b 19a 20c 19b 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Amazon.Com		Transaction ID: SB17-EX1886 Date of Disbursement 02 / 21 / 2003	
Mailing Address on-line			
City Farmington	State PA	Zip Code 00000	Amount of Each Disbursement this Period 10.98 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Gift Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) B. Sam And Harrys		Transaction ID: SB17-EX1887 Date of Disbursement 02 / 21 / 2003	
Mailing Address 1200 19th Street NW			
City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period 215.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Meals	
State: District			

Full Name (Last, First, Middle Initial) C. Capital Hill Suites		Transaction ID: SB17-EX1888 Date of Disbursement 02 / 21 / 2003	
Mailing Address 200 C Street, SE			
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 126.55 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Lodging	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	352.53
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 45 / 66
	<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. Splish Splash Auto Bath		Transaction ID: SB17-EX1889 Date of Disbursement 02 / 21 / 2003	
Mailing Address 2341 N Old Route 220			
City Duncansville	State PA	Zip Code 16835	Amount of Each Disbursement this Period 8.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 car wash Vehicle Expenses
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Tiffany And Co		Transaction ID: SB17-EX1890 Date of Disbursement 02 / 21 / 2003	
Mailing Address Street Required			
City Duncansville	State PA	Zip Code 00000	Amount of Each Disbursement this Period 125.28 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Office Expenses
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Harris Teeter		Transaction ID: SB17-EX1892 Date of Disbursement 02 / 21 / 2003	
Mailing Address Hyde Park Plaza 600 North Glebe Road			
City Arlington	State VA	Zip Code 22203	Amount of Each Disbursement this Period 90.05 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 party tray for meeting Meals
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	223.33
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 46 / 66
	<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. Lawsons Gourmet		Transaction ID: SB17-EX1893 Date of Disbursement 02 / 21 / 2003	
Mailing Address 1350 Connecticut Avenue NW			
City Washington	State DC	Zip Code 20002	Amount of Each Disbursement this Period 66.00
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			Gift Basket Office Expenses

Full Name (Last, First, Middle Initial) B. Bull Feathers		Transaction ID: SB17-EX1894 Date of Disbursement 02 / 21 / 2003	
Mailing Address 410 First Street SE			
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 113.76
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			Meals

Full Name (Last, First, Middle Initial) C. Celebration In A Box		Transaction ID: SB17-EX1895 Date of Disbursement 02 / 21 / 2003	
Mailing Address 1919 Old Pleasant Valley Road			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 28.00
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			Gift basket Office Expenses

SUBTOTAL of Disbursements This Page (optional)	▶	208.76
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 47 / 66
	<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. Campaign Resource Strategies		Transaction ID: SB17-EX1896 Date of Disbursement 03 / 04 / 2003
Mailing Address 606 North Imboden Street No. 301		Amount of Each Disbursement this Period 2500.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Consulting fee-March 2003 Campaign Consultant
City Alexandria	State VA Zip Code 22304	
Purpose of Disbursement Expenditure	Candidate Name	
Office Sought: House Senate President		
State: District		

Full Name (Last, First, Middle Initial) B. Campaign Resource Strategies		Transaction ID: SB17-EX1897 Date of Disbursement 03 / 04 / 2003
Mailing Address 606 North Imboden Street No. 301		Amount of Each Disbursement this Period 1604.25 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Feb 26 reception Fundraising
City Alexandria	State VA Zip Code 22304	
Purpose of Disbursement Expenditure	Candidate Name	
Office Sought: House Senate President		
State: District		

Full Name (Last, First, Middle Initial) C. Assoc General Contractors		Transaction ID: SB17-EX1898 Date of Disbursement 03 / 04 / 2003
Mailing Address 333 John Carlyle Street Suite 200		Amount of Each Disbursement this Period 75.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Townhouse rental for reception Fundraising
City Alexandria	State VA Zip Code 22314	
Purpose of Disbursement Expenditure	Candidate Name	
Office Sought: House Senate President		
State: District		

SUBTOTAL of Disbursements This Page (optional)	▶	4179.25
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)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. The March Of Dimes		Transaction ID: SB17-EX1899 Date of Disbursement 03 / 04 / 2003	
Mailing Address JLG Industries 45D Sunnyside Road		Amount of Each Disbursement this Period 50.00	
City Bedford	State PA	Zip Code 15522	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		004 Category/ Type	
Candidate Name		1/2 page ad Print Ads	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. M and T Bank		Transaction ID: SB17-EX1900 Date of Disbursement 03 / 06 / 2003	
Mailing Address 301 W Plank Road		Amount of Each Disbursement this Period 63.54	
City Altoona	State PA	Zip Code 16602	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		941 1st quarter 2003 Pay- roll Taxes	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Manning		Transaction ID: SB17-EX1901 Date of Disbursement 03 / 10 / 2003	
Mailing Address 610 Garber Street		Amount of Each Disbursement this Period 121.72	
City Hollidaysburg	State PA	Zip Code 16848	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		2/23 to 3/8/2003 Campaign Workers' Salaries	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	235.26
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 49 / 66
	<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. Manning		Transaction ID: SB17-EX1902 Date of Disbursement 03 / 10 / 2003	
Mailing Address 610 Garber Street			
City Hollidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 19.32
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	mileage reimbursement Veh- icle Expenses
State: District			

Full Name (Last, First, Middle Initial) B. HAMPA		Transaction ID: SB17-EX1903 Date of Disbursement 03 / 10 / 2003	
Mailing Address PO Box 736			
City Hollidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement Expenditure Candidate Name		004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Ad in Music program bookl- et Print Ads
State: District			

Full Name (Last, First, Middle Initial) C. Frankhauser		Transaction ID: SB17-EX1907 Date of Disbursement 03 / 14 / 2003	
Mailing Address 2324 Fourth Street			
City Altoona	State PA	Zip Code 16801	Amount of Each Disbursement this Period 38.08
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Meals Meals
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	108.40
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 50 / 66
	<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. Frankhauser		Transaction ID: SB17-EX1905	
Full Name (Last, First, Middle Initial)		Date of Disbursement	
Mailing Address 2324 Fourth Street		03 / 14 / 2003	
City Altoona	State PA	Zip Code 16801	Amount of Each Disbursement this Period
Purpose of Disbursement Expenditure			
Candidate Name			118.15
Office Sought: House Senate President			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2004			
State: District			mileage & parking Vehicle Expenses
<input checked="" type="checkbox"/> Primary General Other (specify) ▼			

B. Verizon		Transaction ID: SB17-EX1923	
Full Name (Last, First, Middle Initial)		Date of Disbursement	
Mailing Address PO Box 8585		03 / 17 / 2003	
City Philadelphia	State PA	Zip Code 19173	Amount of Each Disbursement this Period
Purpose of Disbursement Expenditure			
Candidate Name			262.64
Office Sought: House Senate President			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2004			
State: District			814 696-0225-608 26Y 2/28 to 3/27 Telephone
<input checked="" type="checkbox"/> Primary General Other (specify) ▼			

C. Mt. Union Fire Company		Transaction ID: SB17-EX1925	
Full Name (Last, First, Middle Initial)		Date of Disbursement	
Mailing Address RR 2 Box 431		03 / 17 / 2003	
City Mount Union	State PA	Zip Code 17068	Amount of Each Disbursement this Period
Purpose of Disbursement Expenditure			
Candidate Name			100.00
Office Sought: House Senate President			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2004			
State: District			Full page ad Print Ads
<input checked="" type="checkbox"/> Primary General Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional)	▶	480.79
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 51 / 66
	<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. Full Name (Last, First, Middle Initial) Franklin Co Republican Comm		Transaction ID: SB17-EX1926 Date of Disbursement 03 / 17 / 2003	
Mailing Address Suite 293 South Gate Mall			
City Chambersburg	State PA	Zip Code 17201	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Expenditure		004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		full page ad in Lincoln Day book Print Ads
State: District			

B. Full Name (Last, First, Middle Initial) AT/T Wireless Services		Transaction ID: SB17-EX1927 Date of Disbursement 03 / 18 / 2003	
Mailing Address PO 944039			
City Maitland	State FL	Zip Code 32704	Amount of Each Disbursement this Period 187.17
Purpose of Disbursement Expenditure		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		2202375986 1/9 to 2/8 Telephone
State: District			

C. Full Name (Last, First, Middle Initial) Jaffa Circus Advertising		Transaction ID: SB17-EX1928 Date of Disbursement 03 / 18 / 2003	
Mailing Address PO Box 1984			
City Altoona	State PA	Zip Code 16803	Amount of Each Disbursement this Period 175.00
Purpose of Disbursement Expenditure		004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		full page ad Print Ads
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	862.17
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 52 / 66
	<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. Bedford County Library		Transaction ID: SB17-EX1929 Date of Disbursement 03 / 19 / 2003	
Mailing Address 240 S. Wood Street			
City Bedford	State PA	Zip Code 15522	Amount of Each Disbursement this Period 50.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	In lieu of flowers-Thompson funeral Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) B. Manning		Transaction ID: SB17-EX1930 Date of Disbursement 03 / 24 / 2003	
Mailing Address 610 Garber Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 110.66 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	3/9 to 3/22/2003 Campaign Workers' Salaries	
State: District			

Full Name (Last, First, Middle Initial) C. Schaffer		Transaction ID: SB17-EX1931 Date of Disbursement 03 / 26 / 2003	
Mailing Address 1501 Bass Lake Road			
City Holly Springs	State NC	Zip Code 27540	Amount of Each Disbursement this Period 200.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	April rent Rent	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	360.66
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 53 / 66
	<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. Cafe Atlantico		Transaction ID: SB17-EX1932	
Mailing Address 405 Eighth Street NW		Date of Disbursement 03 / 26 / 2003	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 133.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Campaign reform meeting Meals
State: District			

Full Name (Last, First, Middle Initial) B. 1st Books Web		Transaction ID: SB17-EX1933	
Mailing Address Street Required		Date of Disbursement 03 / 26 / 2003	
City Washington	State DC	Zip Code 00000	Amount of Each Disbursement this Period 66.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Supplies Office Expenses
State: District			

Full Name (Last, First, Middle Initial) C. Luigis Ristorante		Transaction ID: SB17-EX1934	
Mailing Address Street Required		Date of Disbursement 03 / 26 / 2003	
City Clymer	State PA	Zip Code 15728	Amount of Each Disbursement this Period 63.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	General	Meals
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	262.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Jethros		Transaction ID: SB17-EX1936 Date of Disbursement 03 / 26 / 2003	
Mailing Address 417 Parkview Lane			
City Altoona State PA Zip Code 16801	Amount of Each Disbursement this Period 50.00		
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: District			
Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Hanna Donaldson meeting Meals	

Full Name (Last, First, Middle Initial) B. Bull Feathers		Transaction ID: SB17-EX1936 Date of Disbursement 03 / 26 / 2003	
Mailing Address 410 First Street SE			
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 86.27		
Purpose of Disbursement Expenditure Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: District			
Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Meals	

Full Name (Last, First, Middle Initial) C. Hudson Trail Outfitters		Transaction ID: SB17-EX1937 Date of Disbursement 03 / 26 / 2003	
Mailing Address Street Required			
City Arlington State VA Zip Code 22201	Amount of Each Disbursement this Period 47.03		
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: District			
Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Gift Office Expenses	

SUBTOTAL of Disbursements This Page (optional)	183.30
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 55 / 66
	<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. Capital Screen Print		Transaction ID: SB17-EX1938 Date of Disbursement 03 / 26 / 2003	
Mailing Address Street Required			
City Newington	State VA	Zip Code 22122	Amount of Each Disbursement this Period 179.74
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼	Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) B. Young		Transaction ID: SB17-EX1938 Date of Disbursement 03 / 28 / 2003	
Mailing Address 311 Stone Street			
City Osceola Mills	State PA	Zip Code 16666	Amount of Each Disbursement this Period 28.25
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼	Gasoline Vehicle Expenses	
State: District			

Full Name (Last, First, Middle Initial) C. AT/T Wireless Services		Transaction ID: SB17-EX1940 Date of Disbursement 03 / 28 / 2003	
Mailing Address PO 944039			
City Maitland	State FL	Zip Code 32794	Amount of Each Disbursement this Period 41.26
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 X Primary Other (specify) ▼	2002529863 2/8 to 3/8 Telephone	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	249.25
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 56 / 66
	<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. PA Fed Of Fraternal Clubs		Transaction ID: SB17-EX1941 Date of Disbursement 03 / 28 / 2003	
Mailing Address 105 Thunderbird Drive Lot 47		Amount of Each Disbursement this Period 60.00	
City Altoona	State PA	Zip Code 16801	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		004 Category/ Type	
Candidate Name		half page ad Print Ads	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. AT/T Wireless Services		Transaction ID: SB17-EX1943 Date of Disbursement 03 / 31 / 2003	
Mailing Address PO 944039		Amount of Each Disbursement this Period 203.50	
City Maitland	State FL	Zip Code 32704	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		2202375986 last before split Telephone	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Natl Republican Congressional		Transaction ID: SB17-CN2653 Date of Disbursement 01 / 07 / 2003	
Mailing Address 320 First Street SE		Amount of Each Disbursement this Period 203.88	
City Washington	State DC	Zip Code 20003	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement IN-KIND RECEIVED		Category/ Type	
Candidate Name		In-Kind Received Satellite Feed	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	467.19
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 57 / 66
	<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. Natl Republican Congressional		Transaction ID: SB17-CN2654 Date of Disbursement 02 / 17 / 2003	
Mailing Address 320 First Street SE			
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 196.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Purpose of Disbursement IN-KIND RECEIVED Candidate Name	Category/ Type		
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Natl Republican Congressional		Transaction ID: SB17-CN2655 Date of Disbursement 03 / 20 / 2003	
Mailing Address 320 First Street SE			
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 11.81 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Purpose of Disbursement IN-KIND RECEIVED Candidate Name	Category/ Type		
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	207.81
TOTAL This Period (last page this line number only)	▶	29396.65

**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 58 / 66
	<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. Blair Co Republican Committee		Transaction ID: SB17-EX1867 Date of Disbursement 02 / 17 / 2003	
Mailing Address 1810 23rd Avenue			
City Altoona	State PA	Zip Code 16801	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Expenditure		012 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Donations
State: District			

Full Name (Last, First, Middle Initial) B. The International Foundation		Transaction ID: SB17-EX1891 Date of Disbursement 02 / 21 / 2003	
Mailing Address PO Box 23813			
City Washington	State DC	Zip Code 20026	Amount of Each Disbursement this Period 200.00
Purpose of Disbursement Expenditure		012 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		National Prayer Breakfast Donations
State: District			

Full Name (Last, First, Middle Initial) C. Dwight Diehl For DA		Transaction ID: SB17-EX1908 Date of Disbursement 03 / 17 / 2003	
Mailing Address 117 South Juliana Street			
City Bedford	State PA	Zip Code 15522	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Expenditure		012 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Dinner tickets Promotional Tickets
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	800.00
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 59 / 66
	<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. Elliott For Commissioner		Transaction ID: SB17-EX1909 Date of Disbursement 03 / 17 / 2003	
Mailing Address 822 Shatzer Orchard Rd			
City Chambersburg	State PA	Zip Code 17201	Amount of Each Disbursement this Period 250.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Political Contributions
Purpose of Disbursement Expenditure		011 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	State: District	

Full Name (Last, First, Middle Initial) B. Bob Beauprez For Congress		Transaction ID: SB17-EX1910 Date of Disbursement 03 / 17 / 2003	
Mailing Address 14142 Denver W. Parkway Suite 270			
City Golden	State CO	Zip Code 80401	Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Bob Beauprez House 07 (CO) Political Contributions
Purpose of Disbursement Expenditure		011 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	State: District	

Full Name (Last, First, Middle Initial) C. Brown-Waite For Congress		Transaction ID: SB17-EX1911 Date of Disbursement 03 / 17 / 2003	
Mailing Address 704 Ponce de Leon Blvd			
City Brooksville	State FL	Zip Code 34601	Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Ginny Brown-Waite House 05 (FL) Political Contributions
Purpose of Disbursement Expenditure		011 Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	State: District	

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)

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17 20a 18 20b 19a 20c 19b 21

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Burns For Congress		Transaction ID: SB17-EX1912 Date of Disbursement 03 / 17 / 2003	
Mailing Address 121 North Main Street No. 2		Amount of Each Disbursement this Period 1000.00	
City Sylvania	State GA	Zip Code 30467	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		011 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Max Burns House 12 (GA) Political Contributions	
State: District			

Full Name (Last, First, Middle Initial) B. Chris Chocola Congress Inc.		Transaction ID: SB17-EX1915 Date of Disbursement 03 / 17 / 2003	
Mailing Address PO Box 6728		Amount of Each Disbursement this Period 1000.00	
City South Bend	State IN	Zip Code 46660	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		011 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Chris Chocola House 02 (I-N) Political Contributions	
State: District			

Full Name (Last, First, Middle Initial) C. Jim Gerlach For Congress Comm		Transaction ID: SB17-EX1916 Date of Disbursement 03 / 17 / 2003	
Mailing Address B11 Welsh Ayres Way		Amount of Each Disbursement this Period 1000.00	
City Downingtawn	State PA	Zip Code 19335	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure Candidate Name		011 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Jim Gerlach House 06 (PA) Political Contributions	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	3000.00
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 61 / 66
	<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. Gingrey For Congress		Transaction ID: SB17-EX1917 Date of Disbursement 03 / 17 / 2003	
Mailing Address PO Box U		Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Phil Gingrey House 11 (GA) Political Contributions	
City Marietta	State GA		Zip Code 30060
Purpose of Disbursement Expenditure Candidate Name			011 Category/ Type
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		State: District

Full Name (Last, First, Middle Initial) B. Pearce For Congress		Transaction ID: SB17-EX1918 Date of Disbursement 03 / 17 / 2003	
Mailing Address PO Box 2606		Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Steve Pearce House 02 (NM) Political Contributions	
City Hobbs	State NM		Zip Code 88241
Purpose of Disbursement Expenditure Candidate Name			011 Category/ Type
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		State: District

Full Name (Last, First, Middle Initial) C. Porter for Congress		Transaction ID: SB17-EX1919 Date of Disbursement 03 / 17 / 2003	
Mailing Address 5851 W. Charleston Blvd		Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 John Porter House 03 (NV) Political Contributions	
City Las Vegas	State NV		Zip Code 89146
Purpose of Disbursement Expenditure Candidate Name			011 Category/ Type
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		State: District

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 62 / 66
	<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. Renzi For Congress		Transaction ID: SB17-EX1920 Date of Disbursement 03 / 17 / 2003	
Mailing Address PO Box 219		Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Rick Renzi House 01 (AZ) Political Contributions	
City Flagstaff	State AZ		Zip Code 86002
Purpose of Disbursement Expenditure Candidate Name			011 Category/ Type
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		State: District

Full Name (Last, First, Middle Initial) B. Mike Rogers For Congress		Transaction ID: SB17-EX1921 Date of Disbursement 03 / 17 / 2003	
Mailing Address 123 East 13th Street		Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Mike Rogers House 03 (AL) Political Contributions	
City Anniston	State AL		Zip Code 36201
Purpose of Disbursement Expenditure Candidate Name			011 Category/ Type
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		State: District

Full Name (Last, First, Middle Initial) C. Indiana Council Of Rep Women		Transaction ID: SB17-EX1922 Date of Disbursement 03 / 17 / 2003	
Mailing Address 1250 Oak Street		Amount of Each Disbursement this Period 30.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Lincoln Day Dinner tickets Promotional Tickets	
City Indiana	State PA		Zip Code 15701
Purpose of Disbursement Expenditure Candidate Name			012 Category/ Type
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		State: District

SUBTOTAL of Disbursements This Page (optional)	2030.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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17 20a 18 20b 19a 20c 19b 21

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Huntingdon Co. Republican Comm		Transaction ID: SB17-EX1924 Date of Disbursement 03 / 17 / 2003	
Mailing Address PO Box 61			
City Huntingdon	State PA	Zip Code 16652	Amount of Each Disbursement this Period 200.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Lincoln Day Dinner-10 tickets Promotional Tickets
Purpose of Disbursement Expenditure Candidate Name		012 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Haberstroh For Judge Committee		Transaction ID: SB17-EX1924 Date of Disbursement 03 / 28 / 2003	
Mailing Address 3615 Burgoon Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Political Contributions
Purpose of Disbursement Expenditure Candidate Name		011 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	1200.00
TOTAL This Period (last page this line number only)	▶	12280.00

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 64 / 66
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 13a <input checked="" type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Transaction ID: SC10-LN7

LOAN SOURCE Full Name (Last, First, Middle Initial) First National Bank	Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 101 Lincoln Way West	
City Mc Connellsburg State PA ZIP Code 17233	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5577.50	1975.34	3602.16

TERMS

Date Incurred 06 th 14 th 2002	Date Due 20040614	Interest Rate 8.9970% (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
---------------------------------------------------------	----------------------	--------------------------------	---------------------------------------------------------------------------------

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	3602.16
TOTALS This Period (last page in this line only)	3602.16
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE D (FEC Form 3)

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

FOR LINE NUMBER: (check only one)

8
 10

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor State Farm Insurance		Nature of Debt (Purpose): Invoice: Workermens Compensation Adminis	
Mailing Address 715 Lexington Avenue			
City Altoona State PA ZIP Code 16801			
Outstanding Balance Beginning This Period -198.00		Transaction ID: SD9-INV127	
Amount Incurred This Period .00	Payment This Period .00	Outstanding Balance at Close of This Period 198.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Macneil Automotive		Nature of Debt (Purpose): Invoice: Administrative/Salary/Overhead	
Mailing Address Street Required			
City Clarendon Hills State IL ZIP Code 60514			
Outstanding Balance Beginning This Period .00		Transaction ID: SD9-INV1822	
Amount Incurred This Period 9.00	Payment This Period 58.95	Outstanding Balance at Close of This Period 49.95	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Macneil Automotive		Nature of Debt (Purpose): Invoice: vehicle expense Administrative/	
Mailing Address Street Required			
City Clarendon Hills State IL ZIP Code 60514			
Outstanding Balance Beginning This Period .00		Transaction ID: SD9-INV1824	
Amount Incurred This Period .00	Payment This Period 40.00	Outstanding Balance at Close of This Period 40.00	

1) SUBTOTALS This Period This Page (optional)	▶	285.95
2) TOTALS This Period (last page this line number only)	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
William Shuster

Nature of Debt (Purpose):
Invoice: GDP Retreat conference Administ

Mailing Address 9 Overlook Drive

City State ZIP Code
Hollidaysburg PA 16848

Outstanding Balance Beginning This Period

Transaction ID: SD9-INV1805

.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1018.00

1240.00

224.00

1) SUBTOTALS This Period This Page (optional)	▶	224.00
2) TOTALS This Period (last page this line number only)	▶	509.95
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	