

**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 OR 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 10 01 2003 through 12 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 01 30 2004

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} 1 0 ^{D D} 0 1 ^{Y Y Y Y} 2 0 0 3 To: ^{V M} 1 2 ^{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)).....	92375.00	399669.83
(b) Total Contribution Refunds (from Line 20(d)).....	.00	.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	92375.00	399669.83
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	34691.32	222596.83
(b) Total Offsets to Operating Expenditures (from Line 14).....	20.51	765.90
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	34670.81	221830.93
8. Cash on Hand at Close of Reporting Period (from Line 27).....	240974.72	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	150.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	322.59	

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} 1 0 ^{D J} 0 1 ^{Y Y Y Y} 2 0 0 3 To: ^{M M} 1 2 ^{D J} 3 1 ^{Y Y Y 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).....	9250.00	
(ii) Unitemized.....	2025.00	
(iii) TOTAL of contributions	11275.00	132125.00
from individuals..... ▶	.00	411.50
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACS).....	81100.00	267133.33
(d) The Candidate.....	.00	.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	92375.00	399669.83
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.).....	20.51	765.90
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	.00	3500.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	92395.51	403935.73

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.....	34691.32	222596.83
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	.00	.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	.00	.00
(b) Of all Other Loans.....	.00	4496.50
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	.00	4496.50
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.....	5160.00	30277.99
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) [>]	39851.32	257371.32
<hr/>		
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....		188430.53
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....		92395.51
25. SUBTOTAL (add Line 23 and Line 24).....		280826.04
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....		39851.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....		240974.72

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)

Name of Candidate William Shuster		Candidate ID Number H2PA09035
Name of Principal Campaign Committee Bill Shuster for Congress		Committee ID Number C C00364935
Committee Address PO Box 27		
City Hollidaysburg	State PA	ZIP 16848
Report Covering Period (check one) <input type="checkbox"/> through June 30, or <input checked="" type="checkbox"/> through December 31 of the year preceding the year of the general election		
	Primary	General
1. Gross receipts of authorized committees	391935.73	12000.00
2. Aggregate amount of contributions from personal funds of the candidate00	.00
3. Gross receipts minus the candidate's personal contributions	391935.73	12000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 74	
	(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. John Q Shuster		Date of Receipt M / D / Y 12 / 02 / 2003
Mailing Address 102 Blair Street		Transaction ID: SA11Ai-CN3079
City Martinsburg	State PA	Zip Code 16662
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Appleton Papers	Occupation Plant Manager	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 ▼ 1100.00	

Full Name (Last, First, Middle Initial) B. Daniel R Lawruk		Date of Receipt M / D / Y 12 / 02 / 2003
Mailing Address 41 Majestic Circle		Transaction ID: SA11Ai-CN3100
City Hollidaysburg	State PA	Zip Code 16648
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Lawruk Builders Inc.	Occupation Executive/Construction	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 ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Jr. P Joseph Lehman		Date of Receipt M / D / Y 12 / 02 / 2003
Mailing Address RR 2 Box 351 Windswept		Transaction ID: SA11Ai-CN3085
City Hollidaysburg	State PA	Zip Code 16648
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer P Joseph Lehman Inc Engineers	Occupation Manager/Partner	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 ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	300.00
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 / 74	
	(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 10 / 02 / 2003
Mailing Address 111 D Water Pointe Lane		Transaction ID: SA11Ai-CN3038
City Reston	State VA	Zip Code 20184
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
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 ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Fred K Khalouf		Date of Receipt M / D / Y 10 / 17 / 2003
Mailing Address 101 Mark Drive		Transaction ID: SA11Ai-CN3053
City Holidaysburg	State PA	Zip Code 16648
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Health South	Occupation Physician Pain Management	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. Patricia L. Raugh		Date of Receipt M / D / Y 12 / 02 / 2003
Mailing Address 715 Lexington Ave PO Box 1802		Transaction ID: SA11Ai-CN3095
City Altoona	State PA	Zip Code 16601
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer State Farm Insurance	Occupation Insurance Agent	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)	▶	650.00
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 / 74	
	(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. Heidi Jo Sroka		Date of Receipt M / D / Y 12 / 02 / 2003
Mailing Address 292 Golden Ridge Drive		Transaction ID: SA11Ai-CN3076
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 none	Occupation housewife	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 ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Bud Shuster		Date of Receipt M / D / Y 12 / 19 / 2003
Mailing Address RR 3 Box 234C		Transaction ID: SA11Ai-CN3122
City Everett	State PA	Zip Code 15537
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Self Employed	Occupation Visiting Professor/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 ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Patricia Shuster		Date of Receipt M / D / Y 12 / 19 / 2003
Mailing Address RR 3 Box 234C		Transaction ID: SA11Ai-CN3121
City Everett	State PA	Zip Code 15537
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer none	Occupation Homemaker	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 ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	4200.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 74	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Dr. Richard Crawford		Date of Receipt M / D / Y 12 / 02 / 2003
Mailing Address 219 Bonnie Lane		Transaction ID: SA11Ai-CN3080
City Holidaysburg	State PA	Zip Code 16648
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer St Francis College	Occupation College Administrator	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 ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Dr. Ferdinand L. Soisson, Jr.		Date of Receipt M / D / Y 12 / 02 / 2003
Mailing Address 383 Red Oak Road Box 42505		Transaction ID: SA11Ai-CN3102
City Elinton	State PA	Zip Code 16640
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Cambria County	Occupation County Commissioner	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 ▼ 700.00	

Full Name (Last, First, Middle Initial) C. M.L.R.		Date of Receipt M / D / Y 10 / 22 / 2003
Mailing Address 5506 Sixth Avenue Rear		Transaction ID: SA11Ai-CN3057
City Altoona	State PA	Zip Code 16602
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
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 ▼ 2000.00	

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 / 74	
	(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. Imler Poutry		Date of Receipt M / D / Y 12 / 08 / 2003
Mailing Address 3421 Beale Avenue		Transaction ID: SA11Ai-CN3106
City Altoona	State PA	Zip Code 16801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
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 ▼ 200.00	

Full Name (Last, First, Middle Initial) B. II FredN Imler		Date of Receipt M / D / Y 12 / 08 / 2003
Mailing Address 3421 Beale Avenue		Transaction ID: SA11Ai-CN3107
City Altoona	State PA	Zip Code 16801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period .00
Name of Employer Imlers Poultry LLP	Occupation Executive	Partnership contribution- Imler Poultry Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) [MEMO ITEM]
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) C. III RobertD Sweet		Date of Receipt M / D / Y 12 / 02 / 2003
Mailing Address 502 Ridgewood Drive		Transaction ID: SA11Ai-CN3088
City New Paris	State PA	Zip Code 15554
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	

SUBTOTAL of Receipts This Page (optional)	▶	300.00
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 11 / 74

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. 17th Street		Date of Receipt M / D / Y 12 / 22 / 2003
Mailing Address PD Box 1252		Transaction ID: SA11Ai-CN3131
City	State	Zip Code
Altoona	PA	16603
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00
Name of Employer none	Occupation none	Dr Osgood contribution
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
		2800.00

Full Name (Last, First, Middle Initial) B. Dr. Carol P Osgood		Date of Receipt M / D / Y 12 / 22 / 2003
Mailing Address Rd 4 Box 153		Transaction ID: SA11Ai-CN3132
City	State	Zip Code
Holidaysburg	PA	16648
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period .00
Name of Employer Allghary Brain and Spine Surgeons	Occupation Neurosurgeon	Partnership contribution- 17th Street
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) [MEMO ITEM]
		1000.00

Full Name (Last, First, Middle Initial) C. Arthur Lifson		Date of Receipt M / D / Y 10 / 02 / 2003
Mailing Address 581B Linden Square Ct		Transaction ID: SA11Ai-CN3035
City	State	Zip Code
Rockville	MD	20852
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer CIGNA	Occupation Vice President 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)	▶	1050.00
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 12 / 74	
	(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. John D Mihe		Date of Receipt M / D / Y 10 / 02 / 2003
Mailing Address PD Box 45		Transaction ID: SA11Ai-CN3042
City Farina	State IL	Zip Code 62838
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Perennial Strategy Group	Occupation Partner	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. Neil Volz		Date of Receipt M / D / Y 11 / 24 / 2003
Mailing Address 3907 Northhampton Street		Transaction ID: SA11Ai-CN3069
City Washington	State DC	Zip Code 20015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
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 ▼ 500.00	

Full Name (Last, First, Middle Initial) C. David Kaufman		Date of Receipt M / D / Y 12 / 02 / 2003
Mailing Address 4807 Penn Wood Drive		Transaction ID: SA11Ai-CN3077
City Altoona	State PA	Zip Code 16802
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Kaufman & Sons Department Store	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 ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	1050.00
TOTAL This Period (last page this line number only)	9250.00

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 13 / 74	
	<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. TOM		Date of Receipt M / D / Y 12 / 12 / 2003
Mailing Address Po Box 16488		Transaction ID: SA11C-CN3112
City Arlington	State VA	Zip Code 22215
FEC ID number of contributing federal political committee. C C00364174		Amount of Each Receipt this Period 5000.00
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 ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. American Maritime Officers Voluntary		Date of Receipt M / D / Y 10 / 08 / 2003
Mailing Address 650 Fourth Avenue		Transaction ID: SA11C-CN3046
City Brooklyn	State NY	Zip Code 11232
FEC ID number of contributing federal political committee. C CD0027532		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 ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. American Maritime Officers Voluntary		Date of Receipt M / D / Y 10 / 21 / 2003
Mailing Address 650 Fourth Avenue		Transaction ID: SA11C-CN3056
City Brooklyn	State NY	Zip Code 11232
FEC ID number of contributing federal political committee. C CD0027532		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 ▼ 3000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 / 74	
	<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. Pricewaterhousecoopers		Date of Receipt M / D / Y 12 / 12 / 2003
Mailing Address 1900 K Street NW		Transaction ID: SA11C-CN3114
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee. C C00107235		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) B. ACRE		Date of Receipt M / D / Y 10 / 16 / 2003
Mailing Address 4301 Wilson Boulevard		Transaction ID: SA11C-CN3049
City	State	Zip Code
Arlington	VA	22203
FEC ID number of contributing federal political committee. C CD0002872		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 ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. People With Hart		Date of Receipt M / D / Y 12 / 24 / 2003
Mailing Address PO Box 435 10875 Parry Hwy		Transaction ID: SA11C-CN3130
City	State	Zip Code
Wexford	PA	15060
FEC ID number of contributing federal political committee. C CD0346114		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	

SUBTOTAL of Receipts This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 / 74	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. United Parcel Service Inc		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 55 Glenlake Parkway NE		Transaction ID: SA11C-CN3118
City Atlanta	State GA	Zip Code 30328
FEC ID number of contributing federal political committee. C C00064766		Amount of Each Receipt this Period 500.00
Name of Employer none	Occupation none	General 2004
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
		5500.00

Full Name (Last, First, Middle Initial) B. United Parcel Service Inc		Date of Receipt M / D / Y 12 / 31 / 2003
Mailing Address 55 Glenlake Parkway NE		Transaction ID: SA11C-CN3136
City Atlanta	State GA	Zip Code 30328
FEC ID number of contributing federal political committee. C C00064768		Amount of Each Receipt this Period -500.00
Name of Employer none	Occupation none	Returned Check-Void Date
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
		5000.00

Full Name (Last, First, Middle Initial) C. Americans For A Republican Majority		Date of Receipt M / D / Y 12 / 31 / 2003
Mailing Address 1155 21st Street, NW-Suite 300		Transaction ID: SA11C-CN3134
City Washington	State DC	Zip Code 20038
FEC ID number of contributing federal political committee. C C00292948		Amount of Each Receipt this Period 5000.00
Name of Employer none	Occupation none	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼	
		10000.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 / 74	
	<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. Aircraft Owners Pilots Association		Date of Receipt M / D / Y 10 / 14 / 2003
Mailing Address 421 Aviation Way		Transaction ID: SA11C-CN3055
City Frederick	State MD	Zip Code 21701
FEC ID number of contributing federal political committee. C C00131185		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)(4)(1a)-1)
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Walmart Stores Inc.		Date of Receipt M / D / Y 12 / 12 / 2003
Mailing Address 702 SW Eighth Street		Transaction ID: SA11C-CN3116
City Bentonville	State AR	Zip Code 72716
FEC ID number of contributing federal political committee. C C00093054		Amount of Each Receipt this Period 5000.00
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 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) C. Sheetz		Date of Receipt M / D / Y 12 / 02 / 2003
Mailing Address 5700 Sixth Avenue		Transaction ID: SA11C-CN3094
City Altoona	State PA	Zip Code 16802
FEC ID number of contributing federal political committee. C C00219121		Amount of Each Receipt this Period 100.00
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 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1100.00	

SUBTOTAL of Receipts This Page (optional)	▶	6100.00
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 17 / 74	
	<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. Quinn For Congress		Date of Receipt M / D / Y 12 / 09 / 2003
Mailing Address Po Box 14		Transaction ID: SA11C-CN3109
City Buffalo	State NY	Zip Code 14205
FEC ID number of contributing federal political committee. C C00271171		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 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. National Federation of Independent Business		Date of Receipt M / D / Y 12 / 18 / 2003
Mailing Address 1201 F Street NW Suite 200		Transaction ID: SA11C-CN3119
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C CD0101105		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 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. National Restaurant Assoc		Date of Receipt M / D / Y 10 / 31 / 2003
Mailing Address 1200 17th Street NW		Transaction ID: SA11C-CN3063
City Washington	State DC	Zip Code 20038
FEC ID number of contributing federal political committee. C CD0003784		Amount of Each Receipt this Period 2000.00
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 ▼ 3500.00	

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 18 / 74	
	<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 10 / 08 / 2008
Mailing Address 805 Fifteenth Street NW Suite 430		Transaction ID: SA11C-CN3047
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 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Associated Builders/Contractors		Date of Receipt M / D / Y 12 / 12 / 2008
Mailing Address 1300 North 17th Street		Transaction ID: SA11C-CN3115
City Rosslyn	State VA	Zip Code 22209
FEC ID number of contributing federal political committee. C CD0010421		Amount of Each Receipt this Period 5000.00
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 ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. American Hospital Association		Date of Receipt M / D / Y 10 / 06 / 2008
Mailing Address 325 Seventh Street NW		Transaction ID: SA11C-CN3043
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C CD0106148		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 ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	6500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 / 74	
	<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. FirstEnergy		Date of Receipt M / D / Y 12 / 23 / 2003
Mailing Address 78 S Main Street		Transaction ID: SA11C-CN3124
City Akron	State OH	Zip Code 44308
FEC ID number of contributing federal political committee. C C00140855		Amount of Each Receipt this Period 2000.00
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 ▼ 3500.00	

Full Name (Last, First, Middle Initial) B. Committee For The Preservation Of Capitalism		Date of Receipt M / D / Y 12 / 24 / 2003
Mailing Address P.O. Box 22814		Transaction ID: SA11C-CN3126
City Alexandria	State VA	Zip Code 22304
FEC ID number of contributing federal political committee. C C00328488		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. Norfolk Southern Corp Good Govt Fund		Date of Receipt M / D / Y 12 / 02 / 2003
Mailing Address Three Commerical Place		Transaction ID: SA11C-CN3099
City Norfolk	State VA	Zip Code 23510
FEC ID number of contributing federal political committee. C C00009282		Amount of Each Receipt this Period 4000.00
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 ▼ 5000.00	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 / 74	
	<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. NACS		Date of Receipt M / D / Y 10 / 31 / 2003
Mailing Address 1600 Duke Street		Transaction ID: SA11C-CN3062
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C C00126763		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 ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. NRA-Political Victory Fund		Date of Receipt M / D / Y 11 / 17 / 2003
Mailing Address 11250 Waples Mill Road		Transaction ID: SA11C-CN3067
City Fairfax	State VA	Zip Code 22030
FEC ID number of contributing federal political committee. C C00053553		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 ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Realtors		Date of Receipt M / D / Y 12 / 02 / 2003
Mailing Address 430 North Michigan Avenue		Transaction ID: SA11C-CN3096
City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C C00030718		Amount of Each Receipt this Period 3500.00
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 ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	5500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 / 74	
	<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. Transportation Political Education League		Date of Receipt M / D / Y 12 / 24 / 2003
Mailing Address 14800 Detroit Avenue		Transaction ID: SA11C-CN3128
City Lakewood	State OH	Zip Code 44107
FEC ID number of contributing federal political committee. C C00001636		Amount of Each Receipt this Period 3000.00
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 ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. GAMA		Date of Receipt M / D / Y 10 / 02 / 2003
Mailing Address 1400 K Street NW Suite B01		Transaction ID: SA11C-CN3037
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C CD0014878		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 ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. General Dynamics Voluntary		Date of Receipt M / D / Y 10 / 02 / 2003
Mailing Address 3180 Fairview Park Drive		Transaction ID: SA11C-CN3040
City Falls Church	State VA	Zip Code 22042
FEC ID number of contributing federal political committee. C CD0078451		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	

SUBTOTAL of Receipts This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 / 74	
	<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. Midnight Sun		Date of Receipt M / D / Y 10 / 20 / 2003
Mailing Address 203 Maryland Ave NE		Transaction ID: SA11C-CN3054
City	State	Zip Code
Washington	DC	20002
FEC ID number of contributing federal political committee. C C00345199		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. Dairy Educational		Date of Receipt M / D / Y 10 / 02 / 2003
Mailing Address 10220 N Executive Hills Blvd		Transaction ID: SA11C-CN3041
City	State	Zip Code
Kansas City	MO	65153
FEC ID number of contributing federal political committee. C CD0001388		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. AgriMark Legislation/Ed.		Date of Receipt M / D / Y 10 / 09 / 2003
Mailing Address P.O. Box 5800		Transaction ID: SA11C-CN3048
City	State	Zip Code
Lawrence	MA	01842
FEC ID number of contributing federal political committee. C CD0141242		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 ▼ 1000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 / 74	
	<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. Concrete		Date of Receipt M / D / Y 11 / 11 / 2003
Mailing Address 900 Spring Street		Transaction ID: SA11C-CN3095
City State Zip Code Silver Spring MD 20910	FEC ID number of contributing federal political committee. C C00114025	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 Liberty		Date of Receipt M / D / Y 11 / 03 / 2003
Mailing Address PO Box 77222		Transaction ID: SA11C-CN3064
City State Zip Code Washington DC 20013	FEC ID number of contributing federal political committee. C CD0366120	Amount of Each Receipt this Period 1500.00
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. Promoting Rep You Can Elect Project		Date of Receipt M / D / Y 12 / 23 / 2003
Mailing Address 1155 21st Street, NW Suite 300		Transaction ID: SA11C-CN3133
City State Zip Code Washington DC 20038	FEC ID number of contributing federal political committee. C CD0330068	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	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 / 74	
	<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. NSSGA Rack		Date of Receipt M / D / Y 12 / 09 / 2003
Mailing Address 2101 Wilson Blvd - Suite 100		Transaction ID: SA11C-CN3110
City Arlington	State VA	Zip Code 22201
FEC ID number of contributing federal political committee. C C00089458		Amount of Each Receipt this Period 2000.00
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 ▼ 4000.00	

Full Name (Last, First, Middle Initial) B. Air Products Political Alliance		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address P.O. Box 441		Transaction ID: SA11C-CN3117
City Trexlerstown	State PA	Zip Code 18087
FEC ID number of contributing federal political committee. C CD0127258		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 ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. MeadWestvaco		Date of Receipt M / D / Y 10 / 02 / 2003
Mailing Address One High Ridge Park		Transaction ID: SA11C-CN3039
City Stamford	State CT	Zip Code 06505
FEC ID number of contributing federal political committee. C CD0065987		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	

SUBTOTAL of Receipts This Page (optional)	▶	3500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 / 74	
	<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. Manitowac Company		Date of Receipt M / D / Y 10 / 28 / 2003
Mailing Address Po Box 1101		Transaction ID: SA11C-CN3059
City Marinette	State WI	Zip Code 54143
FEC ID number of contributing federal political committee. C C00287847		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 ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Every Republican is Crucial		Date of Receipt M / D / Y 12 / 24 / 2003
Mailing Address 4914 Fitzhugh Avenue Suite 200		Transaction ID: SA11C-CN3125
City Richmond	State VA	Zip Code 23230
FEC ID number of contributing federal political committee. C CD0384701		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 ▼ 3500.00	

Full Name (Last, First, Middle Initial) C. OldCastle Materials Inc		Date of Receipt M / D / Y 10 / 08 / 2003
Mailing Address 101 Constitution Avenue NW Suite 600W		Transaction ID: SA11C-CN3045
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C CD0346353		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	

SUBTOTAL of Receipts This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 / 74	
	<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. Employees of Northrup Grumman Corp		Date of Receipt M / D / Y 10 / 16 / 2003
Mailing Address 520 S. Grand Avenue Suite 700		Transaction ID: SA11C-CN3050
City Los Angeles	State CA	Zip Code 90071
FEC ID number of contributing federal political committee. C C00088591		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. American Federation of Govt Employees		Date of Receipt M / D / Y 11 / 17 / 2003
Mailing Address 80 F Street, NW		Transaction ID: SA11C-CN3066
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C C00009838		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) C. John Sullivan for Congress		Date of Receipt M / D / Y 11 / 24 / 2003
Mailing Address PO Box 470840		Transaction ID: SA11C-CN3068
City Tulsa	State OK	Zip Code 74147
FEC ID number of contributing federal political committee. C C00366773		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	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 / 74	
	<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. ANDER		Date of Receipt M / D / Y 11 / 24 / 2003
Mailing Address PD Box 523383		Transaction ID: SA11C-CN3070
City Springfield	State VA	Zip Code 22152
FEC ID number of contributing federal political committee. C C00375378		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. Deloitte & Touche Federal		Date of Receipt M / D / Y 11 / 25 / 2003
Mailing Address PD Box 385		Transaction ID: SA11C-CN3071
City Washington	State DC	Zip Code 20044
FEC ID number of contributing federal political committee. C CD0211318		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. Friends of Ray LaHood		Date of Receipt M / D / Y 11 / 25 / 2003
Mailing Address 423B N. Knoxville Avenue		Transaction ID: SA11C-CN3072
City Peoria	State IL	Zip Code 61614
FEC ID number of contributing federal political committee. C CD0284901		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	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 / 74	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial) RFW		Date of Receipt M / D / Y 12 / 01 / 2003
Mailing Address PD Box 198		Transaction ID: SA11C-CN3074
City Tupelo	State MS	Zip Code 38802
FEC ID number of contributing federal political committee. C C00368696		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	

B. Full Name (Last, First, Middle Initial) Davin Nunes for Congress		Date of Receipt M / D / Y 12 / 02 / 2003
Mailing Address PD Box 891		Transaction ID: SA11C-CN3097
City Pixley	State CA	Zip Code 93256
FEC ID number of contributing federal political committee. C CD0334488		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	

C. Full Name (Last, First, Middle Initial) Texans for Henry Borilla		Date of Receipt M / D / Y 12 / 02 / 2003
Mailing Address 3905 Tattnall		Transaction ID: SA11C-CN3098
City Schertz	State TX	Zip Code 78154
FEC ID number of contributing federal political committee. C CD0257402		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	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 / 74	
	<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. Team Emerson for Jo Ann Emerson		Date of Receipt M / D / Y 12 / 08 / 2008
Mailing Address PD Box B22		Transaction ID: SA11C-CN3105
City Cape Girardeau	State MO	Zip Code 63702
FEC ID number of contributing federal political committee. C C00320457		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)(4)(1a)-1)
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Boozman for Congress		Date of Receipt M / D / Y 12 / 12 / 2008
Mailing Address PD Box 671		Transaction ID: SA11C-CN3111
City Rogers	State AR	Zip Code 72757
FEC ID number of contributing federal political committee. C CD0367879		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)(4)(1a)-1)
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Rahberg for Congress		Date of Receipt M / D / Y 12 / 12 / 2008
Mailing Address PD Box 1597		Transaction ID: SA11C-CN3113
City Helena	State MT	Zip Code 59624
FEC ID number of contributing federal political committee. C CD0349431		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)(4)(1a)-1)
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 / 74	
	<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. America's Majority Trust		Date of Receipt M / D / Y 12 / 23 / 2003
Mailing Address 1155 21st Street NW Suite 300		Transaction ID: SA11C-CN3123
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C C00370668		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)(4)(1a)-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) B. Moran for Congress		Date of Receipt M / D / Y 12 / 24 / 2003
Mailing Address PO Box 280		Transaction ID: SA11C-CN3127
City La Crosse	State KS	Zip Code 67548
FEC ID number of contributing federal political committee. C CD0312090		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)(4)(1a)-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. Rieh		Date of Receipt M / D / Y 12 / 24 / 2003
Mailing Address 1155 21st Street NW Suite 300		Transaction ID: SA11C-CN3129
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C CD0387670		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)(4)(1a)-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)	▶	4500.00
TOTAL This Period (last page this line number only)	▶	81100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 31 / 74
	<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. Patricia Manning		Transaction ID: SB17-EX2339 Date of Disbursement 10 / 06 / 2003	
Mailing Address 610 Garber Street			
City Holidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 97.38 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) ▼	Administrative/Salary/Ove- rhead Expenses Campaign Workers' Salaries	
State: District			

Full Name (Last, First, Middle Initial) B. Amy Hanna		Transaction ID: SB17-EX2340 Date of Disbursement 10 / 06 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 308.66 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) ▼	Administrative/Salary/Ove- rhead Expenses Campaign Workers' Salaries	
State: District			

Full Name (Last, First, Middle Initial) C. M and T Bank		Transaction ID: SB17-EX2341 Date of Disbursement 10 / 09 / 2003	
Mailing Address 301 West Plank Road			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 205.48 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) ▼	Administrative/Salary/Ove- rhead Expenses Payroll Ta- xes	
State: District			

SUBTOTAL of Disbursements This Page (optional)	611.52
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 / 74
	<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-EX2342 Date of Disbursement 10 / 09 / 2003
Mailing Address PO Box 8585		Amount of Each Disbursement this Period 154.12 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Administrative/Salary/Overhead Expenses 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. Deborah Irwin		Transaction ID: SB17-EX2343 Date of Disbursement 10 / 09 / 2003
Mailing Address RD 1 Box 284B		Amount of Each Disbursement this Period 315.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Solicitation and Fundraising Expenses Fundraising
City Latrobe	State PA Zip Code 15650	
Purpose of Disbursement Expenditure	Candidate Name	
Office Sought: House Senate President		
State: District		

Full Name (Last, First, Middle Initial) C. Deborah Irwin		Transaction ID: SB17-EX2344 Date of Disbursement 10 / 09 / 2003
Mailing Address RD 1 Box 284B		Amount of Each Disbursement this Period 228.28 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Administrative/Salary/Overhead Expenses Postage
City Latrobe	State PA Zip Code 15650	
Purpose of Disbursement Expenditure	Candidate Name	
Office Sought: House Senate President		
State: District		

SUBTOTAL of Disbursements This Page (optional)	▶	697.41
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 / 74
	<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-EX2346 Date of Disbursement 10 / 09 / 2003		
Mailing Address 25452 Brickell Drive		Amount of Each Disbursement this Period 2000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Solicitation and Fundraising Expenses Campaign Consultant		
City Chantilly	State VA			Zip Code 20152
Purpose of Disbursement Expenditure Candidate Name				003 Category/ Type
Office Sought: House Senate President	State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Campaign Resource Strategies		Transaction ID: SB17-EX2346 Date of Disbursement 10 / 09 / 2003		
Mailing Address 25452 Brickell Drive		Amount of Each Disbursement this Period 1040.61 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Solicitation and Fundraising Expenses Fundraising		
City Chantilly	State VA			Zip Code 20152
Purpose of Disbursement Expenditure Candidate Name				003 Category/ Type
Office Sought: House Senate President	State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mark and Rebecca Schaffer		Transaction ID: SB17-EX2346 Date of Disbursement 10 / 15 / 2003		
Mailing Address 1501 Bass Lake Road		Amount of Each Disbursement this Period 400.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Administrative/Salary/Overhead Expenses Rent		
City Holly Springs	State NC			Zip Code 27540
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) ▼		

SUBTOTAL of Disbursements This Page (optional)	3440.61
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 34 / 74
	<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. Patricia Manning		Transaction ID: SB17-EX2351 Date of Disbursement 10 / 20 / 2003	
Mailing Address 610 Garber Street		Amount of Each Disbursement this Period 59.12	
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 Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Campaign Workers' Salaries	
State: District			

Full Name (Last, First, Middle Initial) B. Amy Hanna		Transaction ID: SB17-EX2352 Date of Disbursement 10 / 20 / 2003	
Mailing Address 2917 Fifth Avenue		Amount of Each Disbursement this Period 310.87	
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 Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Campaign Workers' Salaries	
State: District			

Full Name (Last, First, Middle Initial) C. M and T Bank		Transaction ID: SB17-EX2353 Date of Disbursement 10 / 20 / 2003	
Mailing Address 301 West Plank Road		Amount of Each Disbursement this Period 25.02	
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 Candidate Name		001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Payroll Ta- xes	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	389.01
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 / 74
	<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 UC Fund		Transaction ID: SB17-EX2354 Date of Disbursement 10 / 20 / 2003	
Mailing Address PO Box 60190			
City Harrisburg	State PA	Zip Code 17106	Amount of Each Disbursement this Period 58.97 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 General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Payroll Ta- xes	
State: District			

Full Name (Last, First, Middle Initial) B. PA Department Of Revenue		Transaction ID: SB17-EX2355 Date of Disbursement 10 / 20 / 2003	
Mailing Address DEPT 280414			
City Harrisburg	State PA	Zip Code 17126	Amount of Each Disbursement this Period 87.58 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 General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Payroll Ta- xes	
State: District			

Full Name (Last, First, Middle Initial) C. Altoona Area School District		Transaction ID: SB17-EX2356 Date of Disbursement 10 / 20 / 2003	
Mailing Address Stevens Building 200 E Crawford Avenue, Rear			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 26.96 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 General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Payroll Ta- xes	
State: District			

SUBTOTAL of Disbursements This Page (optional)	173.51
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 36 / 74
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Hollidaysburg Area School Dist		Transaction ID: SB17-EX2357 Date of Disbursement 10 / 20 / 2003	
Mailing Address 201 Jackson Street			
City Hollidaysburg State PA Zip Code 16848			Amount of Each Disbursement this Period 8.21
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 X Primary General Other (specify) ▼		
			Administrative/Salary/Ove- rhead Expenses Payroll Ta- xes

Full Name (Last, First, Middle Initial) B. AT/T Wireless Services		Transaction ID: SB17-EX2358 Date of Disbursement 10 / 22 / 2003	
Mailing Address PO 944039			
City Maitland State FL Zip Code 32704			Amount of Each Disbursement this Period 227.40
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 X Primary General Other (specify) ▼		
			Administrative/Salary/Ove- rhead Expenses Telephone

Full Name (Last, First, Middle Initial) C. Charter Communications VI LLC		Transaction ID: SB17-EX2360 Date of Disbursement 10 / 22 / 2003	
Mailing Address 2200 Beale Avenue			
City Altoona State PA Zip Code 16801			Amount of Each Disbursement this Period 58.95
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 X Primary General Other (specify) ▼		
			Administrative/Salary/Ove- rhead Expenses Utilities

SUBTOTAL of Disbursements This Page (optional) ▶	295.65
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 37 / 74
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Blair Concert Chorale		Transaction ID: SB17-EX2361 Date of Disbursement 10 / 22 / 2003	
Mailing Address PO Box 722			
City Altoona	State PA	Zip Code 16603	Amount of Each Disbursement this Period 125.00 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	Advertising Expenses Print Ads
State: District			

Full Name (Last, First, Middle Initial) B. Ciocca Benton And Company		Transaction ID: SB17-EX2362 Date of Disbursement 10 / 22 / 2003	
Mailing Address PO Box 1473			
City Altoona	State PA	Zip Code 16603	Amount of Each Disbursement this Period 14.21 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	Administrative/Salary/Overhead Expenses Postage
State: District			

Full Name (Last, First, Middle Initial) C. Amy Hanna		Transaction ID: SB17-EX2364 Date of Disbursement 10 / 22 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 2.12 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	Administrative/Salary/Overhead Expenses Office Expenses
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	141.33
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 38 / 74
	<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. Amy Hanna		Transaction ID: SB17-EX2365 Date of Disbursement 10 / 22 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 13.76
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 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Travel Expenses Meals
State: District			

Full Name (Last, First, Middle Initial) B. US Postal Service		Transaction ID: SB17-EX2367 Date of Disbursement 10 / 22 / 2003	
Mailing Address 525 Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 150.00
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) ▼		Administrative/Salary/Ove- rhead Expenses Postage
State: District			

Full Name (Last, First, Middle Initial) C. CTI/PAdotNET		Transaction ID: SB17-EX2369 Date of Disbursement 10 / 28 / 2003	
Mailing Address 5170 E. Trindle Road			
City Mechanicsburg	State PA	Zip Code 17050	Amount of Each Disbursement this Period 31.00
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) ▼		Administrative/Salary/Ove- rhead Expenses Office Exp- enses
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	194.76
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)

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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. Mark and Rebecca Schaffer		Transaction ID: SB17-EX2370 Date of Disbursement 10 / 28 / 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 Administrative/Salary/Ove- rhead Expenses Rent
Purpose of Disbursement Expenditure Candidate Name		001 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Bobby Van's Steakhouse		Transaction ID: SB17-EX2375 Date of Disbursement 10 / 30 / 2003	
Mailing Address 809 15th Street NW			
City Washington	State DC	Zip Code 20005	Amount of Each Disbursement this Period 1800.68 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Solicitation and Fundrais- ing Expenses Fundraising
Purpose of Disbursement Expenditure Candidate Name		003 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Campaign Resource Strategies		Transaction ID: SB17-EX2376 Date of Disbursement 11 / 01 / 2003	
Mailing Address 25452 Brickell Drive			
City Chantilly	State VA	Zip Code 20152	Amount of Each Disbursement this Period 2000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Solicitation and Fundrais- ing Expenses Campaign Con- sultant
Purpose of Disbursement Expenditure Candidate Name		003 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4000.68
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 40 / 74
	<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. Patricia Manning		Transaction ID: SB17-EX2377 Date of Disbursement 11 / 03 / 2003	
Mailing Address 610 Garber Street			
City Holidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 106.24 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) ▼	Administrative/Salary/Ove- rhead Expenses Campaign Workers' Salaries	
State: District			

Full Name (Last, First, Middle Initial) B. Amy Hanna		Transaction ID: SB17-EX2378 Date of Disbursement 11 / 03 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 310.87 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) ▼	Administrative/Salary/Ove- rhead Expenses Campaign Workers' Salaries	
State: District			

Full Name (Last, First, Middle Initial) C. Patricia Manning		Transaction ID: SB17-EX2379 Date of Disbursement 11 / 03 / 2003	
Mailing Address 610 Garber Street			
City Holidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 18.32 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) ▼	Administrative/Salary/Ove- rhead Expenses Petty Cash	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	436.43
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 41 / 74
	<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. Ciocca Benton And Company		Transaction ID: SB17-EX2380 Date of Disbursement 11 / 06 / 2003	
Mailing Address PO Box 1473			
City Altoona	State PA	Zip Code 16803	Amount of Each Disbursement this Period 44.30 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 General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Postage	
State: District			

Full Name (Last, First, Middle Initial) B. VA Department Of Taxation		Transaction ID: SB17-EX2381 Date of Disbursement 11 / 06 / 2003	
Mailing Address PO Box 27264			
City Richmond	State VA	Zip Code 23218	Amount of Each Disbursement this Period 20.68 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 General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Payroll Ta- xes	
State: District			

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: SB17-EX2382 Date of Disbursement 11 / 13 / 2003	
Mailing Address PO Box 8585			
City Philadelphia	State PA	Zip Code 19173	Amount of Each Disbursement this Period 151.13 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 General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Telephone	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	216.11
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 42 / 74
	<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. Patricia Manning		Transaction ID: SB17-EX2383 Date of Disbursement 11 / 17 / 2003	
Mailing Address 610 Garber Street			
City Hollidaysburg State PA Zip Code 16648	Amount of Each Disbursement this Period 123.94		
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 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Amy Hanna		Transaction ID: SB17-EX2384 Date of Disbursement 11 / 17 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona State PA Zip Code 16602	Amount of Each Disbursement this Period 310.87		
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 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mark and Rebecca Schaffer		Transaction ID: SB17-EX2385 Date of Disbursement 11 / 17 / 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 State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	634.81
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 / 74
	<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. Sam And Harrys		Transaction ID: SB17-EX2386 Date of Disbursement 10 / 22 / 2003	
Mailing Address 1200 19th Street NW		Amount of Each Disbursement this Period 231.00	
City Washington	State DC	Zip Code 20036	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name		Travel Expenses Meals	
Office Sought: House Senate President	Disbursement For: X Primary Other (specify) ▼	2004 General	
State: District			

Full Name (Last, First, Middle Initial) B. Antrim House Family		Transaction ID: SB17-EX2387 Date of Disbursement 10 / 22 / 2003	
Mailing Address 104 E Baltimore Street		Amount of Each Disbursement this Period 15.64	
City Greencastle	State PA	Zip Code 17225	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name		Travel Expenses Meals	
Office Sought: House Senate President	Disbursement For: X Primary Other (specify) ▼	2004 General	
State: District			

Full Name (Last, First, Middle Initial) C. La Scalia Restaurant		Transaction ID: SB17-EX2388 Date of Disbursement 10 / 22 / 2003	
Mailing Address RD 3 Box 121		Amount of Each Disbursement this Period 50.00	
City Tyrone	State PA	Zip Code 16886	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name		Travel Expenses Meals	
Office Sought: House Senate President	Disbursement For: X Primary Other (specify) ▼	2004 General	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	296.64
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 44 / 74
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Staples-291		Transaction ID: SB17-EX2389 Date of Disbursement 10 / 22 / 2003	
Mailing Address Plank Road/Orchard Plaza		Amount of Each Disbursement this Period 9.53 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
City Altoona	State PA		Zip Code 16802
Purpose of Disbursement Expenditure			001 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. All Occasion Florist		Transaction ID: SB17-EX2390 Date of Disbursement 10 / 22 / 2003	
Mailing Address 120 South Main Street		Amount of Each Disbursement this Period 53.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
City Chambersburg	State PA		Zip Code 17201
Purpose of Disbursement Expenditure			001 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Carter's Riverside		Transaction ID: SB17-EX2391 Date of Disbursement 10 / 22 / 2003	
Mailing Address		Amount of Each Disbursement this Period 33.52 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Travel Expenses Meals	
City Lemoyne	State PA		Zip Code 17043
Purpose of Disbursement Expenditure			002 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	96.05
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 / 74
	<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. Weaver The Florist		Transaction ID: SB17-EX2392 Date of Disbursement 10 / 22 / 2003	
Mailing Address 216 Fifth Street			
City Huntingdon	State PA	Zip Code 16652	Amount of Each Disbursement this Period 37.10
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	Administrative/Salary/Ove- rhead Expenses Office Exp- enses
State: District			

Full Name (Last, First, Middle Initial) B. Postal Express		Transaction ID: SB17-EX2393 Date of Disbursement 10 / 22 / 2003	
Mailing Address 301 Union Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 6.48
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	Administrative/Salary/Ove- rhead Expenses Office Exp- enses
State: District			

Full Name (Last, First, Middle Initial) C. Cracker Barrel		Transaction ID: SB17-EX2394 Date of Disbursement 10 / 22 / 2003	
Mailing Address 100 Charlotte Drive			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 25.16
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	Travel Expenses Meals
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	70.74
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 / 74
	<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 Congressional Institute		Transaction ID: SB17-EX2395 Date of Disbursement 10 / 22 / 2003	
Mailing Address 316 Pennsylvania Avenue SE Suite 403			
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 150.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name		Travel Expenses Lodging	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Kurtz		Transaction ID: SB17-EX2396 Date of Disbursement 11 / 13 / 2003	
Mailing Address 303 Laurel Street			
City Bellwood	State PA	Zip Code 16617	Amount of Each Disbursement this Period 61.87 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		Administrative/Salary/Ove- rhead Expenses 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. Wal Mart Supercenter		Transaction ID: SB17-EX2397 Date of Disbursement 11 / 13 / 2003	
Mailing Address WalMart Plaza			
City Altoona	State PA	Zip Code 16801	Amount of Each Disbursement this Period 5.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		Administrative/Salary/Ove- rhead Expenses 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)	▶	216.87
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 47 / 74
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Dollar General Store		Transaction ID: SB17-EX2398 Date of Disbursement 11 / 13 / 2003	
Mailing Address 502 Third Avenue			
City Duncansville	State PA	Zip Code 16835	Amount of Each Disbursement this Period 4.10 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) ▼	Administrative/Salary/Ove- rhead Expenses Petty Cash	
State: District			

Full Name (Last, First, Middle Initial) B. US Postal Service		Transaction ID: SB17-EX2398 Date of Disbursement 11 / 13 / 2003	
Mailing Address 525 Allegheny Street			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 37.00 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) ▼	Administrative/Salary/Ove- rhead Expenses Petty Cash	
State: District			

Full Name (Last, First, Middle Initial) C. Parker		Transaction ID: SB17-EX2400 Date of Disbursement 11 / 18 / 2003	
Mailing Address 7988 Lincoln Way West Saint Thomas, PA			
City Saint Thomas	State PA	Zip Code 17252	Amount of Each Disbursement this Period 88.20 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) ▼	Administrative/Salary/Ove- rhead Expenses Vehicle Ex- penses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	110.30
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 48 / 74
	<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. Frederick Lock & Key, Inc		Transaction ID: SB17-EX2401 Date of Disbursement 11 / 18 / 2003	
Mailing Address 1022 Sixth Avenue			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 65.25
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) ▼		Administrative/Salary/Ove- rhead Expenses Office Exp- enses
State: District			

Full Name (Last, First, Middle Initial) B. Advantage Inc		Transaction ID: SB17-EX2402 Date of Disbursement 11 / 21 / 2003	
Mailing Address 1611 N Kent Street Suite 905			
City Arlington	State VA	Zip Code 22208	Amount of Each Disbursement this Period 2648.96
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) ▼		Advertising Expenses Media
State: District			

Full Name (Last, First, Middle Initial) C. Amy Hanna		Transaction ID: SB17-EX2404 Date of Disbursement 11 / 21 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 122.38
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 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Travel Expenses Meals
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	2836.60
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 48 / 74
	<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. Amy Hanna		Transaction ID: SB17-EX2405 Date of Disbursement 11 / 21 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 3.51
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 General Other (specify) ▼		Administrative/Salary/Ove- rhead Expenses Office Exp- enses
State: District			

Full Name (Last, First, Middle Initial) B. Amy Hanna		Transaction ID: SB17-EX2405 Date of Disbursement 11 / 21 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 30.00
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) ▼		Dues Dues
State: District			

Full Name (Last, First, Middle Initial) C. Penn Woods Council		Transaction ID: SB17-EX2407 Date of Disbursement 11 / 21 / 2003	
Mailing Address PO Box 352			
City Tire Hill	State PA	Zip Code 15959	Amount of Each Disbursement this Period 342.25
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 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Administrative/Salary/Ove- rhead Expenses Postage
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	375.76
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 50 / 74
	<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-EX2408 Date of Disbursement 11 / 21 / 2003	
Mailing Address PO 944039			
City Maitland	State FL	Zip Code 32794	Amount of Each Disbursement this Period 238.45
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 General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Telephone	
State: District			

Full Name (Last, First, Middle Initial) B. Charter Communications VI LLC		Transaction ID: SB17-EX2408 Date of Disbursement 11 / 21 / 2003	
Mailing Address 2200 Beale Avenue			
City Altoona	State PA	Zip Code 16601	Amount of Each Disbursement this Period 59.95
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 General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Utilities	
State: District			

Full Name (Last, First, Middle Initial) C. Rebecca Shuster		Transaction ID: SB17-EX2410 Date of Disbursement 11 / 25 / 2003	
Mailing Address B Overlook Drive Hollidaysburg, PA			
City Hollidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 157.28
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 X Primary General Other (specify) ▼	Travel Expenses Meals	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	455.68
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 51 / 74
	<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. Trail Blazer Campaign Services, Inc.		Transaction ID: SB17-EX2411 Date of Disbursement 12 / 01 / 2003	
Mailing Address 5115 Excelsior Blvd Suite 103		Amount of Each Disbursement this Period 4441.00	
City Minneapolis	State MN	Zip Code 55416	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name		Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Patricia Manning		Transaction ID: SB17-EX2412 Date of Disbursement 12 / 01 / 2003	
Mailing Address 610 Garber Street		Amount of Each Disbursement this Period 106.24	
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		Administrative/Salary/Ove- rhead Expenses Campaign Workers' Salaries	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Amy Hanna		Transaction ID: SB17-EX2413 Date of Disbursement 12 / 01 / 2003	
Mailing Address 2917 Fifth Avenue		Amount of Each Disbursement this Period 310.87	
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		Administrative/Salary/Ove- rhead Expenses Campaign Workers' Salaries	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	4858.11
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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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. Thomas Kopriva		Transaction ID: SB17-EX2414 Date of Disbursement 12 / 02 / 2003	
Mailing Address			
City Altoona		State PA	Zip Code
Purpose of Disbursement Expenditure		001	Amount of Each Disbursement this Period 250.00
Candidate Name		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 General Other (specify) ▼	Administrative/Salary/Overhead Expenses Office Expenses	
State: District			

Full Name (Last, First, Middle Initial) B. Campaign Resource Strategies		Transaction ID: SB17-EX2415 Date of Disbursement 12 / 03 / 2003	
Mailing Address 25452 Brickell Drive			
City Chantilly		State VA	Zip Code 20152
Purpose of Disbursement Expenditure		003	Amount of Each Disbursement this Period 2000.00
Candidate Name		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 General Other (specify) ▼	Solicitation and Fundraising Expenses Campaign Consultant	
State: District			

Full Name (Last, First, Middle Initial) C. Campaign Resource Strategies		Transaction ID: SB17-EX2416 Date of Disbursement 12 / 03 / 2003	
Mailing Address 25452 Brickell Drive			
City Chantilly		State VA	Zip Code 20152
Purpose of Disbursement Expenditure		002	Amount of Each Disbursement this Period 56.67
Candidate Name		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 General Other (specify) ▼	Travel Expenses Meals	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	2306.67
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 / 74
	<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 Co. Republican Comm		Transaction ID: SB17-EX2417 Date of Disbursement 12 / 03 / 2003	
Mailing Address 366 Lohr Road			
City Schellsburg	State PA	Zip Code 15559	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 Candidate Name		004 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Advertising Expenses Print Ads	
State: District			

Full Name (Last, First, Middle Initial) B. Amy Hanna		Transaction ID: SB17-EX2418 Date of Disbursement 12 / 11 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 600.30 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) ▼	Administrative/Salary/Overhead Expenses Vehicle Expenses	
State: District			

Full Name (Last, First, Middle Initial) C. Greener And Hook		Transaction ID: SB17-EX2419 Date of Disbursement 12 / 11 / 2003	
Mailing Address 1875 Eye Street NW Suite 540			
City Washington	State DC	Zip Code 20008	Amount of Each Disbursement this Period 178.28 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 X Primary General Other (specify) ▼	Advertising Expenses Media	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	853.59
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 54 / 74
	<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 Barash Group		Transaction ID: SB17-EX2420 Date of Disbursement 12 / 11 / 2003	
Mailing Address PO Box 77			
City State College	State PA	Zip Code 16804	Amount of Each Disbursement this Period 2448.80 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) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

Full Name (Last, First, Middle Initial) B. Ciocca Benton And Company		Transaction ID: SB17-EX2421 Date of Disbursement 12 / 11 / 2003	
Mailing Address PO Box 1473			
City Altoona	State PA	Zip Code 16803	Amount of Each Disbursement this Period 46.18 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) ▼	Administrative/Salary/Ove- rhead Expenses Postage	
State: District			

Full Name (Last, First, Middle Initial) C. M and T Bank		Transaction ID: SB17-EX2422 Date of Disbursement 12 / 15 / 2003	
Mailing Address 301 West Plank Road			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 418.81 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) ▼	Administrative/Salary/Ove- rhead Expenses Payroll Ta- xes	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	2914.39
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 / 74
	<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. Patricia Manning		Transaction ID: SB17-EX2423 Date of Disbursement 12 / 15 / 2003	
Mailing Address 610 Garber Street			
City Holidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 128.37 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) ▼	Administrative/Salary/Ove- rhead Expenses Campaign Workers' Salaries	
State: District			

Full Name (Last, First, Middle Initial) B. Amy Hanna		Transaction ID: SB17-EX2424 Date of Disbursement 12 / 15 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 310.87 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) ▼	Administrative/Salary/Ove- rhead Expenses Campaign Workers' Salaries	
State: District			

Full Name (Last, First, Middle Initial) C. Ciocca Benton And Company		Transaction ID: SB17-EX2425 Date of Disbursement 12 / 15 / 2003	
Mailing Address PO Box 1473			
City Altoona	State PA	Zip Code 16603	Amount of Each Disbursement this Period 3725.00 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 X Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Profession- al Services	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	4164.24
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 / 74
	<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. Accurate Word LLC		Transaction ID: SB17-EX2426 Date of Disbursement 12 / 15 / 2003	
Mailing Address PO Box 1765-White Plains Lane			
City White Plains	State MD	Zip Code 20695	Amount of Each Disbursement this Period 349.00
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) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: SB17-EX2427 Date of Disbursement 12 / 15 / 2003	
Mailing Address PO Box 8585			
City Philadelphia	State PA	Zip Code 19173	Amount of Each Disbursement this Period 154.69
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) ▼	Administrative/Salary/Ove- rhead Expenses Telephone	
State: District			

Full Name (Last, First, Middle Initial) C. Altoona Mirror		Transaction ID: SB17-EX2428 Date of Disbursement 12 / 15 / 2003	
Mailing Address PO Box 2008			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 45.00
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) ▼	Advertising Expenses Print Ads	
State: District			

SUBTOTAL of Disbursements This Page (optional)	548.69
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 57 / 74
	<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 Gazette		Transaction ID: SB17-EX2429 Date of Disbursement 12 / 15 / 2003	
Mailing Address PO Box 671			
City Bedford	State PA	Zip Code 15522	Amount of Each Disbursement this Period 81.90 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	Advertising Expenses Print Ads
State: District			

Full Name (Last, First, Middle Initial) B. Blair Co Republican Committee		Transaction ID: SB17-EX2430 Date of Disbursement 12 / 16 / 2003	
Mailing Address 1810 23rd Avenue			
City Altoona	State PA	Zip Code 16601	Amount of Each Disbursement this Period 300.00 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	Advertising Expenses Print Ads
State: District			

Full Name (Last, First, Middle Initial) C. Shuster William		Transaction ID: SB17-EX2432 Date of Disbursement 12 / 16 / 2003	
Mailing Address B Overlook Drive			
City Hollidaysburg	State PA	Zip Code 16848	Amount of Each Disbursement this Period 44.20 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	Travel Expenses Meals
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	426.10
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)				PAGE 58 / 74
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Blair Candy Company, Inc.		Transaction ID: SB17-EX2433	
Mailing Address 1215 Seventh Avenue		Date of Disbursement 12 / 19 / 2003	
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 330.00
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

Full Name (Last, First, Middle Initial) B. Network Associates Inc		Transaction ID: SB17-EX2434	
Mailing Address PO Box 250249		Date of Disbursement 11 / 21 / 2003	
City Plano	State TX	Zip Code 75025	Amount of Each Disbursement this Period 29.95
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

Full Name (Last, First, Middle Initial) C. Sheetz Inc		Transaction ID: SB17-EX2435	
Mailing Address 5700 Sixth Avenue		Date of Disbursement 11 / 21 / 2003	
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 28.80
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Administrative/Salary/Ove- rhead Expenses Vehicle Exp- enses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	388.55
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 / 74
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Sheetz Inc		Transaction ID: SB17-EX2436 Date of Disbursement 11 / 21 / 2003	
Mailing Address 5700 Sixth Avenue			
City Altoona	State PA	Zip Code 16602	Amount of Each Disbursement this Period 8.96
Purpose of Disbursement Expenditure		OD1 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) ▼		Administrative/Salary/Ove- rhead Expenses Office Exp- enses
State: District			

Full Name (Last, First, Middle Initial) B. RGS Amoco McDonalds		Transaction ID: SB17-EX2437 Date of Disbursement 11 / 21 / 2003	
Mailing Address RD #2 Box 12C			
City Bedford	State PA	Zip Code 15522	Amount of Each Disbursement this Period 26.05
Purpose of Disbursement Expenditure		OD1 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) ▼		Administrative/Salary/Ove- rhead Expenses Vehicle Ex- penses
State: District			

Full Name (Last, First, Middle Initial) C. All Occasion Florist		Transaction ID: SB17-EX2438 Date of Disbursement 11 / 21 / 2003	
Mailing Address 120 South Main Street			
City Chambersburg	State PA	Zip Code 17201	Amount of Each Disbursement this Period 42.40
Purpose of Disbursement Expenditure		OD1 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) ▼		Administrative/Salary/Ove- rhead Expenses Office Exp- enses
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	77.41
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 60 / 74
	<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 Capital Grille		Transaction ID: SB17-EX2439 Date of Disbursement 11 / 21 / 2003	
Mailing Address 601 Pennsylvania Avenue, NW		Amount of Each Disbursement this Period 253.89 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Travel Expenses Meals	
City Washington	State DC		Zip Code 20004
Purpose of Disbursement Expenditure			002 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	State: District	

Full Name (Last, First, Middle Initial) B. Capitol Lounge		Transaction ID: SB17-EX2440 Date of Disbursement 11 / 21 / 2003	
Mailing Address 229-231 Pennsylvania Ave SE		Amount of Each Disbursement this Period 32.98 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Travel Expenses Meals	
City Washington	State DC		Zip Code 20003
Purpose of Disbursement Expenditure			002 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	State: District	

Full Name (Last, First, Middle Initial) C. Haute on the Hill		Transaction ID: SB17-EX2441 Date of Disbursement 11 / 21 / 2003	
Mailing Address		Amount of Each Disbursement this Period 488.88 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Travel Expenses Meals	
City Washington	State DC		Zip Code
Purpose of Disbursement Expenditure			002 Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼	State: District	

SUBTOTAL of Disbursements This Page (optional)	▶	775.56
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 61 / 74
	<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. Capitol Hill Club		Transaction ID: SB17-EX2442	
Mailing Address 300 First Street SE		Date of Disbursement 11 / 21 / 2003	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 350.00
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Travel Expenses Meals	
State: District			

Full Name (Last, First, Middle Initial) B. Creekside Inn		Transaction ID: SB17-EX2443	
Mailing Address Bedford Street		Date of Disbursement 11 / 21 / 2003	
City East Freedom	State PA	Zip Code 16637	Amount of Each Disbursement this Period 33.80
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Travel Expenses Meals	
State: District			

Full Name (Last, First, Middle Initial) C. The Orchard		Transaction ID: SB17-EX2444	
Mailing Address 1580 Orchard Drive		Date of Disbursement 11 / 21 / 2003	
City Chambersburg	State PA	Zip Code 17201	Amount of Each Disbursement this Period 26.80
Purpose of Disbursement Expenditure		002 Category/ Type	
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Travel Expenses Meals	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	410.49
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 62 / 74
	<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. Cracker Barrel		Transaction ID: SB17-EX2446 Date of Disbursement 11 / 21 / 2003	
Mailing Address 100 Charlotte Drive			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 22.80
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 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Travel Expenses Meals	
State: District			

Full Name (Last, First, Middle Initial) B. F. Tambellini's Restaurant		Transaction ID: SB17-EX2446 Date of Disbursement 11 / 21 / 2003	
Mailing Address 139 Seventh Street			
City Pittsburgh	State PA	Zip Code 15222	Amount of Each Disbursement this Period 24.17
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 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Travel Expenses Meals	
State: District			

Full Name (Last, First, Middle Initial) C. F. Tambellini's Restaurant		Transaction ID: SB17-EX2447 Date of Disbursement 11 / 21 / 2003	
Mailing Address 139 Seventh Street			
City Pittsburgh	State PA	Zip Code 15222	Amount of Each Disbursement this Period 23.18
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 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Travel Expenses Meals	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	69.95
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 63 / 74
	<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. Omni William Penn Hotel		Transaction ID: SB17-EX2448 Date of Disbursement 11 / 21 / 2003
Mailing Address 530 William Penn Place		Amount of Each Disbursement this Period 205.66 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Travel Expenses Lodging
City Pittsburgh	State PA Zip Code 15219	
Purpose of Disbursement Expenditure	002 Category/ Type	
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Omni William Penn Hotel		Transaction ID: SB17-EX2448 Date of Disbursement 11 / 21 / 2003
Mailing Address 530 William Penn Place		Amount of Each Disbursement this Period 183.66 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Travel Expenses Lodging
City Pittsburgh	State PA Zip Code 15219	
Purpose of Disbursement Expenditure	002 Category/ Type	
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Eckerd Drug		Transaction ID: SB17-EX2450 Date of Disbursement 11 / 21 / 2003
Mailing Address 3331 Pleasant Valley		Amount of Each Disbursement this Period 22.87 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Administrative/Salary/Overhead Expenses Office Expenses
City Altoona	State PA Zip Code 16802	
Purpose of Disbursement Expenditure	001 Category/ Type	
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	412.19
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)

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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 Alexandria Sports Authority		Transaction ID: SB17-EX2451	
Mailing Address 3701 Jefferson Davis Hwy		Date of Disbursement 11 / 21 / 2003	
City Arlington	State VA	Zip Code 22201	Amount of Each Disbursement this Period 16.16
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			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) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: SB17-EX2452	
Mailing Address 6198 M Little River Tpk		Date of Disbursement 11 / 21 / 2003	
City Alexandria	State VA	Zip Code 22312	Amount of Each Disbursement this Period 10.44
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			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) ▼	Administrative/Salary/Ove- rhead Expenses Telephone	
State: District			

Full Name (Last, First, Middle Initial) C. Trover Shop 1		Transaction ID: SB17-EX2453	
Mailing Address 221 Pennsylvania Avenue SE		Date of Disbursement 12 / 15 / 2003	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 28.50
Purpose of Disbursement Expenditure		001 Category/ Type	
Candidate Name			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) ▼	Administrative/Salary/Ove- rhead Expenses Office Exp- enses	
State: District			

SUBTOTAL of Disbursements This Page (optional)	55.10
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)				PAGE 65 / 74
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Holiday Inn Express		Transaction ID: SB17-EX2454 Date of Disbursement 12 / 15 / 2003	
Mailing Address 16503 Lincoln Highway		Amount of Each Disbursement this Period 85.00	
City Breezewood	State PA	Zip Code 15533	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Expenditure		003 Category/Type	
Candidate Name		Sollicitation and Fundraising Expenses Fundraising	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Patricia Manning		Transaction ID: SB17-EX2455 Date of Disbursement 12 / 29 / 2003	
Mailing Address 610 Garber Street		Amount of Each Disbursement this Period 53.12	
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		Administrative/Salary/Overhead Expenses Campaign Workers' Salaries	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Amy Hanna		Transaction ID: SB17-EX2456 Date of Disbursement 12 / 29 / 2003	
Mailing Address 2917 Fifth Avenue		Amount of Each Disbursement this Period 310.87	
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		Administrative/Salary/Overhead Expenses Campaign Workers' Salaries	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	448.99
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 66 / 74
	<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-EX2457 Date of Disbursement 12 / 29 / 2003		
Mailing Address PO 644039		Amount of Each Disbursement this Period 90.82 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Administrative/Salary/Overhead Expenses Telephone		
City Maitland	State FL			Zip Code 32794
Purpose of Disbursement Expenditure Candidate Name				DD1 Category/ Type
Office Sought: House Senate President	State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mark and Rebecca Schaffer		Transaction ID: SB17-EX2458 Date of Disbursement 12 / 29 / 2003		
Mailing Address 1501 Bass Lake Road		Amount of Each Disbursement this Period 200.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Administrative/Salary/Overhead Expenses Rent		
City Holly Springs	State NC			Zip Code 27540
Purpose of Disbursement Expenditure Candidate Name				DD1 Category/ Type
Office Sought: House Senate President	State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	290.82
TOTAL This Period (last page this line number only)	▶	34691.32

**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 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. Republican State Committee		Transaction ID: SB17-EX2347 Date of Disbursement 10 / 10 / 2003	
Mailing Address 112 State Street		Amount of Each Disbursement this Period 2000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Political Contributions Political Contributions	
City Harrisburg	State PA		Zip Code 17101
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. Committee to Elect Steven Howsare		Transaction ID: SB17-EX2348 Date of Disbursement 10 / 16 / 2003	
Mailing Address		Amount of Each Disbursement this Period 200.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Political Contributions Political Contributions	
City Holly Springs	State NC		Zip Code
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. Committee to Elect John L. Stevens Sheriff		Transaction ID: SB17-EX2350 Date of Disbursement 10 / 16 / 2003	
Mailing Address		Amount of Each Disbursement this Period 200.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Political Contributions Political Contributions	
City Holly Springs	State NC		Zip Code
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)	2400.00
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. Friends of Barclay and Eichelberger		Transaction ID: SB17-EX2358 Date of Disbursement 10 / 22 / 2003	
Mailing Address 507 N. York Street			
City Mechanicsburg	State PA	Zip Code 17055	Amount of Each Disbursement this Period 200.00
Purpose of Disbursement Expenditure Candidate Name		011 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 General Other (specify) ▼		Political Contributions Political Contributions
State: District			

Full Name (Last, First, Middle Initial) B. Shuster William		Transaction ID: SB17-EX2363 Date of Disbursement 10 / 22 / 2003	
Mailing Address 8 Overlook Drive			
City Hollidaysburg	State PA	Zip Code 16648	Amount of Each Disbursement this Period 30.00
Purpose of Disbursement Expenditure Candidate Name		012 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 General Other (specify) ▼		Donations Promotional Tickets
State: District			

Full Name (Last, First, Middle Initial) C. Amy Hanna		Transaction ID: SB17-EX2366 Date of Disbursement 10 / 22 / 2003	
Mailing Address 2917 Fifth Avenue			
City Altoona	State PA	Zip Code 16802	Amount of Each Disbursement this Period 5.00
Purpose of Disbursement Expenditure Candidate Name		012 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 General Other (specify) ▼		Donations Promotional Tickets
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	235.00
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 69 / 74
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
 Bill Shuster for Congress

Full Name (Last, First, Middle Initial) A. Morrison Cove Memorial Park	Transaction ID: SB17-EX2368 Date of Disbursement 10 / 23 / 2003
Mailing Address 201 South Walnut Street	
City Martinsburg State PA Zip Code 16602	Amount of Each Disbursement this Period 25.00
Purpose of Disbursement Expenditure Candidate Name	012 Category/ Type
Office Sought: House Senate President State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Donations Promotional Tickets	

Full Name (Last, First, Middle Initial) B. Friends of Bruce Kelley	Transaction ID: SB17-EX2371 Date of Disbursement 10 / 30 / 2003
Mailing Address 43 Seneca Avenue	
City Altoona State PA Zip Code 16602	Amount of Each Disbursement this Period 250.00
Purpose of Disbursement Expenditure Candidate Name	011 Category/ Type
Office Sought: House Senate President State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Political Contributions Political Contributions	

Full Name (Last, First, Middle Initial) C. Kentucky 08 General Election Fund	Transaction ID: SB17-EX2372 Date of Disbursement 10 / 30 / 2003
Mailing Address PO Box 1721	
City Washington State DC Zip Code 20013	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Expenditure Candidate Name	011 Category/ Type
Office Sought: House Senate President State: District	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Political Contributions Political Contributions	

SUBTOTAL of Disbursements This Page (optional) ▶	1275.00
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 70 / 74
	<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. Wright for Commissioner		Transaction ID: SB17-EX2373 Date of Disbursement 10 / 30 / 2003	
Mailing Address 3901 Fourth Avenue		Amount of Each Disbursement this Period 500.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Political Contributions Political Contributions	
City Altoona	State PA		Zip Code 16802
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. Committee to Elect Bill Higgins		Transaction ID: SB17-EX2374 Date of Disbursement 10 / 30 / 2003	
Mailing Address PO Box 217		Amount of Each Disbursement this Period 200.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Political Contributions Political Contributions	
City Bedford	State PA		Zip Code 15622
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. Morrison Cove Republican Club		Transaction ID: SB17-EX2403 Date of Disbursement 11 / 21 / 2003	
Mailing Address RD 1 Box 426 Meadowside Acres		Amount of Each Disbursement this Period 400.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Donations Donations	
City Martinsburg	State PA		Zip Code 16062
Purpose of Disbursement Expenditure			012 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)	▶	1100.00
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 71 / 74

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

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NAME OF COMMITTEE (In Full)
 Blair Shuster for Congress

Full Name (Last, First, Middle Initial) A. Blair Co Republican Committee		Transaction ID: SB17-EX2431 Date of Disbursement 12 / 16 / 2003	
Mailing Address 1810 23rd Avenue		Amount of Each Disbursement this Period 150.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Donations Donations	
City Altoona	State PA		
Purpose of Disbursement Expenditure		012 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)	▶	150.00
TOTAL This Period (last page this line number only)	▶	5160.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Bill Shuster for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Congressional Institute

Nature of Debt (Purpose):
Invoice: Seminar Travel Expenses

Mailing Address 316 Pennsylvania Avenue SE
Suite 403

City State ZIP Code
Washington DC 20003

Outstanding Balance Beginning This Period

Transaction ID: SD9-INV2315

.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

.00

150.00

150.00

1) SUBTOTALS This Period This Page (optional)	▶	150.00
2) TOTALS This Period (last page this line number only)	▶	150.00
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)

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

FOR LINE NUMBER: 9
 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 Charter Communications VI LLC		Nature of Debt (Purpose): Invoice: 12/21 to 1/20 B3-35 20 042 00240	
Mailing Address 2200 Beale Avenue			
City Altoona	State PA	ZIP Code 16801	
Outstanding Balance Beginning This Period .00		Transaction ID: SD10-INV2382	
Amount Incurred This Period 59.95	Payment This Period .00	Outstanding Balance at Close of This Period 59.95	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon		Nature of Debt (Purpose): Invoice: 814 898 0225 60B 28 Y Administr	
Mailing Address PO Box 8585			
City Philadelphia	State PA	ZIP Code 19173	
Outstanding Balance Beginning This Period .00		Transaction ID: SD10-INV2385	
Amount Incurred This Period 166.44	Payment This Period .00	Outstanding Balance at Close of This Period 166.44	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Altoona Mirror		Nature of Debt (Purpose): Invoice: Holiday Ad Advertising Expenses	
Mailing Address PO Box 200B			
City Altoona	State PA	ZIP Code 16802	
Outstanding Balance Beginning This Period .00		Transaction ID: SD10-INV2386	
Amount Incurred This Period 96.20	Payment This Period .00	Outstanding Balance at Close of This Period 96.20	

1) SUBTOTALS This Period This Page (optional)	▶	322.59
2) TOTALS This Period (last page this line number only)	▶	322.59
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)	▶	

The accompanying Report of Receipts and Disbursements from October 1, 2003 through December 31, 2003 for the Bill Shuster for Congress Committee included in the prescribed form have been prepared by Frederick A. Clocca, CPA. I have prepared such financial statements in my capacity as treasurer of the Bill Shuster for Congress Committee.