

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than 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

EDO CORPORATION PAC

ADDRESS (number and street) 60 E 42ND STREET  
42nd FLOOR  
NEW YORK NY 10165

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00329318

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

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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:  Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
- Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
- Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12G)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day Post -Election Report for the:  General (30G)  Runoff (30R)  Special (30S)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2007 through 06 30 2007

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 EFFIE PAVLOU

Signature of Treasurer Electronically Filed by EFFIE PAVLOU Date 07 20 2007

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										
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
EDO CORPORATION PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		58403.68
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	58403.68									
(c) Total Receipts (from Line 19) .....	32753.63	32753.63								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	91157.31	91157.31								
7. Total Disbursements (from Line 31) .....	34500.00	34500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	56657.31	56657.31								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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**

Write or Type Committee Name  
EDO CORPORATION PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	19983.28	19983.28
(i) Itemized (use Schedule A) .....	12770.35	12770.35
(ii) Unitemized .....	32753.63	32753.63
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	32753.63	32753.63
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	32753.63	32753.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	32753.63	32753.63

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	34500.00	34500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	34500.00	34500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	34500.00	34500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	32753.63	32753.63
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	32753.63	32753.63
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)  
EDO CORPORATION PAC

**A.** Full Name (Last, First, Middle Initial)  
JON A. ANDERSON

Mailing Address 5023 N. Washington Blvd

City State Zip Code  
Arlington VA 22205

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

Name of Employer Occupation  
EDO Corporation VP Washington Operations

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2007

**Transaction ID:** SA11A1.5453

Amount of Each Receipt this Period  
650.00

Payroll Deduction-\$25 Weekly

**B.** Full Name (Last, First, Middle Initial)  
LAWRENCE BALASH

Mailing Address 1006 Cambria Avenue

City State Zip Code  
Windber PA 15963

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

Name of Employer Occupation  
EDO Corporation Business Dev. Specialist

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2007

**Transaction ID:** SA11A1.5471

Amount of Each Receipt this Period  
260.00

Payroll Deduction-\$10 Weekly

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

Mailing Address 910 Mesa Lane

City State Zip Code  
Collegeville PA 19426

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

Name of Employer Occupation  
EDO CORPORATION SECTOR V.P.

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2007

**Transaction ID:** SA11A1.5497

Amount of Each Receipt this Period  
520.00

Payroll Deduction-\$20 Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1430.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

**A.** Full Name (Last, First, Middle Initial)  
ALAN BENICE

Mailing Address 15 Hancock Court

City State Zip Code  
S. Setauket NY 11720

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

Name of Employer Occupation  
EDO Corporation Mgr - Finance

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2007

Transaction ID: SA11A1.5473

Amount of Each Receipt this Period  
260.00

Payroll Deduction-\$10 Weekly

**B.** Full Name (Last, First, Middle Initial)  
WILLIAM R. BIGAS

Mailing Address 20 Minoea Road

City State Zip Code  
Portola Valley CA 94028

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

Name of Employer Occupation  
EDO Corporation Director of Technology

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2007

Transaction ID: SA11A1.5520

Amount of Each Receipt this Period  
260.00

Payroll Deduction-\$10 weekly

**C.** Full Name (Last, First, Middle Initial)  
JAMES A. BRUNELLE

Mailing Address 624 Whitehurst Landing Road

City State Zip Code  
Virginia Beach VA 23464

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

Name of Employer Occupation  
EDO Corporation General Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2007

Transaction ID: SA11A1.5485

Amount of Each Receipt this Period  
260.00

Payroll Deduction-\$20 Bi-weekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	780.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. HERBERT BUCHANAN</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2007	
Mailing Address 2822 Berrylane Drive		<b>Transaction ID: SA11A1.5455</b>	
City State Zip Code Oakton VA 22124		Amount of Each Receipt this Period 520.00	
FEC ID number of contributing federal political committee. C		Payroll Deduction-\$20 Weekly	
Name of Employer Occupation EDO CORPORATION EW SECTOR VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>B. ROY BYRD</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2007	
Mailing Address 1111 QUAKER HILL COURT		<b>Transaction ID: SA11A1.5456</b>	
City State Zip Code ALEXANDRIA VA 22314		Amount of Each Receipt this Period 650.00	
FEC ID number of contributing federal political committee. C		Payroll Deduction-\$25 Weekly	
Name of Employer Occupation EDO Corporation VP - USMC Relations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) <b>C. JOSEPH CANGELOSI</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2007	
Mailing Address 6 Swirl Lane		<b>Transaction ID: SA11A1.5474</b>	
City State Zip Code Levittown NY 11756		Amount of Each Receipt this Period 364.00	
FEC ID number of contributing federal political committee. C		Payroll Deduction-\$14 Weekly	
Name of Employer Occupation EDO Corporation Group VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 364.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1534.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. PATRICIA COMISKEY</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7	
Mailing Address 5 New Street		<b>Transaction ID: SA11A1.5457</b>	
City State Zip Code Great River NY 11739	Amount of Each Receipt this Period 485.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction-\$25 Weekly		
Name of Employer Occupation EDO Corporation VP Human Resources	Aggregate Year-to-Date ▼ 485.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. JOHN COOKE</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7	
Mailing Address 13701 Primrose Court		<b>Transaction ID: SA11A1.5495</b>	
City State Zip Code Bowie MD 20715	Amount of Each Receipt this Period 260.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction-\$20 Bi-weekly		
Name of Employer Occupation EDO Corporation DIRECTOR, SECTOR BUS DEV	Aggregate Year-to-Date ▼ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. GLENN COURTRIGHT</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7	
Mailing Address 4565 West Elk Run Lane		<b>Transaction ID: SA11A1.5502</b>	
City State Zip Code West Jordan UT 84088	Amount of Each Receipt this Period 260.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction-\$20 Weekly		
Name of Employer Occupation EDO CORPORATION Mgr Electrical Engineering	Aggregate Year-to-Date ▼ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1005.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

**A.** Full Name (Last, First, Middle Initial)  
CAROL DARLING

Mailing Address 11 Millwood Court

City State Zip Code  
Mickleton NJ 08056

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

Name of Employer  
EDO CORPORATION

Occupation  
ADMN-MKTG

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2007

Transaction ID: SA11A1.5475

Amount of Each Receipt this Period  
260.00

Payroll Deduction-\$10 Weekly

**B.** Full Name (Last, First, Middle Initial)  
GEORGE P. FOX, Jr.

Mailing Address 8 East Gate Lane

City State Zip Code  
Old Field NY 11733

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

Name of Employer  
EDO Corporation

Occupation  
Sector VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
780.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2007

Transaction ID: SA11A1.5458

Amount of Each Receipt this Period  
780.00

Payroll Deduction-\$30 Weekly

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

Mailing Address 249 Spurwood Lane

City State Zip Code  
Simi Valley CA 93065

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

Name of Employer  
EDO Corporation

Occupation  
Sr. Program Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2007

Transaction ID: SA11A1.5519

Amount of Each Receipt this Period  
230.00

Payroll Deduction-\$10 Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1270.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

**A.** Full Name (Last, First, Middle Initial)  
MILO HYDE

Mailing Address 713 Donnington Drive

City State Zip Code  
Chesapeake VA 23320

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

Name of Employer Occupation  
EDO Corporation Group VP

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2007

Transaction ID: SA11A1.5459

Amount of Each Receipt this Period  
520.00

Payroll Deduction-\$20 Weekly

**B.** Full Name (Last, First, Middle Initial)  
FREDERIC LANES

Mailing Address 1206 Gates Court

City State Zip Code  
Morris Plains NJ 07950

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

Name of Employer Occupation  
EDO Corporation Corp Director of Business Operations

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 780.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2007

Transaction ID: SA11A1.5460

Amount of Each Receipt this Period  
780.00

Payroll Deduction-\$30 Weekly

**C.** Full Name (Last, First, Middle Initial)  
DANIEL LAROSE

Mailing Address 793 Melrose Terrace

City State Zip Code  
Newport News VA 23608

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

Name of Employer Occupation  
EDO Corporation Business Area Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2007

Transaction ID: SA11A1.5461

Amount of Each Receipt this Period  
260.00

Payroll Deduction-\$10 Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1560.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

**A.** Full Name (Last, First, Middle Initial)  
JOSEPH LEE

Mailing Address 35 Ralphs Way

City State Zip Code  
Hollister CA 95023

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

Name of Employer Occupation  
EDO Corporation Director Business Development

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2007

Transaction ID: SA11A1.5526

Amount of Each Receipt this Period  
520.00

Payroll Deduction-\$20 Weekly

**B.** Full Name (Last, First, Middle Initial)  
GAYLE LOMBARDI

Mailing Address 17 Westerly Rd

City State Zip Code  
Hampton Bays NY 11946

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

Name of Employer Occupation  
EDO Corporation Corporate Tax Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2007

Transaction ID: SA11A1.5462

Amount of Each Receipt this Period  
260.00

Payroll Deduction-\$10 Weekly

**C.** Full Name (Last, First, Middle Initial)  
BRUCE MACLEAN

Mailing Address 43 Rialto Drive

City State Zip Code  
Clayton CA 94517-1719

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

Name of Employer Occupation  
EDO Corporation Business Area Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2007

Transaction ID: SA11A1.5527

Amount of Each Receipt this Period  
260.00

Payroll Deduction-\$10 Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1040.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. ROBERT MAIERS</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7
Mailing Address 1241 Santa Clare Street		Transaction ID: SA11A1.5528
City State Zip Code Santa Clara CA 95050	Amount of Each Receipt this Period 260.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction-\$10 Weekly	
Name of Employer Occupation EDO CORPORATION DEPARTMENTAL DIRECTOR	Aggregate Year-to-Date 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. RICHARD D. MCINNIS</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7
Mailing Address 9503 Waterline Drive		Transaction ID: SA11A1.5464
City State Zip Code Burke VA 22015	Amount of Each Receipt this Period 520.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction-\$20 Weekly	
Name of Employer Occupation EDO Corporation Director Govt Relations	Aggregate Year-to-Date 520.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. DAVID R. MCINTIRE</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7
Mailing Address 4469 Faraone Court		Transaction ID: SA11A1.5529
City State Zip Code San Jose CA 95136	Amount of Each Receipt this Period 520.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction-\$20 Weekly	
Name of Employer Occupation EDO Corporation Director of Contracts	Aggregate Year-to-Date 520.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

**A.** Full Name (Last, First, Middle Initial)  
GARY MILLER

Mailing Address 12778 Chapparral Ave

City State Zip Code  
Saratoga CA 95070-3640

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

Name of Employer Occupation  
EDO Corporation Controller

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2007

Transaction ID: SA11A1.5531

Amount of Each Receipt this Period  
520.00

Payroll Deduction-\$20 Weekly

**B.** Full Name (Last, First, Middle Initial)  
MATHEW MILLER

Mailing Address 348 Fairway Blvd

City State Zip Code  
Panama City FL 32407

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

Name of Employer Occupation  
EDO Corporation Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2007

Transaction ID: SA11A1.5489

Amount of Each Receipt this Period  
520.00

Payroll Deduction-\$40 Bi-weekly

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

Mailing Address 696 Wimbledon Lane

City State Zip Code  
Hatfield PA 19440

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

Name of Employer Occupation  
EDO CORPORATION DIRECTOR OF OPERATIONS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2007

Transaction ID: SA11A1.5498

Amount of Each Receipt this Period  
390.00

Payroll Deduction-\$15 Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1430.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. BRIAN MURPHY</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7	
Mailing Address 18312 Solano Court		<b>Transaction ID: SA11A1.5532</b>	
City State Zip Code Morgan Hill CA 95037	Amount of Each Receipt this Period 1300.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction-\$50 Weekly		
Name of Employer Occupation EDO CORPORATION PROD MKTG MGMT	Aggregate Year-to-Date 1300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. LARRY D. NEWSOME</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7	
Mailing Address 18301 Tolusa Court		<b>Transaction ID: SA11A1.5533</b>	
City State Zip Code Morgan Hill CA 95037	Amount of Each Receipt this Period 692.28		
FEC ID number of contributing federal political committee. C	Payroll Deduction-\$38.46 Weekly		
Name of Employer Occupation EDO Corporation General Manager	Aggregate Year-to-Date 692.28		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. ROBERT OLIVA</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7	
Mailing Address 16 Hindes Court		<b>Transaction ID: SA11A1.5480</b>	
City State Zip Code Smithtown NY 11787	Amount of Each Receipt this Period 390.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction-\$15 Weekly		
Name of Employer Occupation EDO CORPORATION DIRECTOR ENGINEERING	Aggregate Year-to-Date 390.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2382.28
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

**A.** Full Name (Last, First, Middle Initial)  
FRANK W. OTTO

Mailing Address 4 Cedar Road

City State Zip Code  
Wading River NY 11792

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

Name of Employer Occupation  
EDO Corporation VP/COO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
06 / 30 / 2007

Transaction ID: SA11A1.5466

Amount of Each Receipt this Period  
520.00

Payroll Deduction-\$20 Weekly

**B.** Full Name (Last, First, Middle Initial)  
LISA PALUMBO

Mailing Address 10 Kennilworth Road

City State Zip Code  
Rye NY 10580

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

Name of Employer Occupation  
EDO Corporation VP/Corp Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
06 / 30 / 2007

Transaction ID: SA11A1.5467

Amount of Each Receipt this Period  
780.00

Payroll Deduction-\$30 Weekly

**C.** Full Name (Last, First, Middle Initial)  
DEAN PUZZO

Mailing Address 22 LAKEWOOD DR

City State Zip Code  
ALTON NH 03810

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

Name of Employer Occupation  
EDO Corporation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
06 / 30 / 2007

Transaction ID: SA11A1.5542

Amount of Each Receipt this Period  
350.00

Payroll Deduction-\$25 Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. TORGER REPPEN</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2007
Mailing Address 2615 E 39 Street		<b>Transaction ID: SA11A1.5490</b>
City Panama City	State FL	Zip Code 32405
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 260.00	
Name of Employer EDO CORPORATION	Occupation Program Manager	Payroll Deduction-\$20 Bi-weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. TERRANCE J. SCHMIDT</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2007
Mailing Address 104 Aurora Lane		<b>Transaction ID: SA11A1.5536</b>
City Los Gatos	State CA	Zip Code 95032
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 260.00	
Name of Employer EDO Corporation	Occupation Director Operations	Payroll Deduction-\$10 Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C. JAMES M. SMITH</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2007
Mailing Address 35 Arrowhead Court		<b>Transaction ID: SA11A1.5468</b>
City North Hills	State NY	Zip Code 11030
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 2600.00	
Name of Employer EDO Corporation	Occupation Chmn/Pres/CEO	Payroll Deduction-\$100 Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3120.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

**A.** Full Name (Last, First, Middle Initial)  
GARY D. SPRINGFIELD

Mailing Address 758 North 3500 West

City State Zip Code  
West Point UT 84015

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

Name of Employer Occupation  
EDO Corporation General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
06 / 30 / 2007

Transaction ID: SA11A1.5509

Amount of Each Receipt this Period  
260.00

Payroll Deduction-\$20 Weekly

**B.** Full Name (Last, First, Middle Initial)  
MICHAEL TUCKER

Mailing Address 709 Catamount Court

City State Zip Code  
Chesapeake VA 23322

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

Name of Employer Occupation  
EDO CORPORATION General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
06 / 30 / 2007

Transaction ID: SA11A1.5494

Amount of Each Receipt this Period  
260.00

Payroll Deduction-\$20 Bi-weekly

**C.** Full Name (Last, First, Middle Initial)  
JOHN VOLLMER

Mailing Address 14701 Westbury Road

City State Zip Code  
Rockville MD 20853

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

Name of Employer Occupation  
EDO CORPORATION SECTOR VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
06 / 30 / 2007

Transaction ID: SA11A1.5496

Amount of Each Receipt this Period  
650.00

Payroll Deduction-\$50 Bi-weekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1170.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 19 / 27	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

**A.** Full Name (Last, First, Middle Initial)  
WILLIAM A. WALKOWIAK

Mailing Address 171 Bogert Street

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Occupation  
EDO Corporation Director of Investor Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
312.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	7

Transaction ID: SA11A1.5470

Amount of Each Receipt this Period  
312.00

Payroll Deduction-\$12 Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	312.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	19983.28

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial)  
**A. ACKERMAN FOR CONGRESS**

**Transaction ID: SB23.5574**  
Date of Disbursement

Mailing Address PO BOX 15616  
SOUTHEAST STATION

/   /

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement  
FUNDRAISER

Category/  
Type

Candidate Name  
GARY L ACKERMAN

Office Sought:  House  
 Senate  
 President  
State: NY District: 6

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

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

**Transaction ID: SB23.5565**  
Date of Disbursement

Mailing Address P.O. Box 15703  
P.O. Box 15703

/   /

City Tallahassee State FL Zip Code 32317

Amount of Each Disbursement this Period

Purpose of Disbursement  
FUNDRAISER

Category/  
Type

Candidate Name  
F ALLEN JR BOYD

Office Sought:  House  
 Senate  
 President  
State: FL District: 02

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)  
**C. BOYD FOR CONGRESS**

**Transaction ID: SB23.5577**  
Date of Disbursement

Mailing Address P.O. Box 15703  
P.O. Box 15703

/   /

City Tallahassee State FL Zip Code 32317

Amount of Each Disbursement this Period

Purpose of Disbursement  
FUNDRAISER

Category/  
Type

Candidate Name  
F ALLEN JR BOYD

Office Sought:  House  
 Senate  
 President  
State: FL District: 02

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. BUCK MCKEON FOR CONGRESS</b>		<b>Transaction ID: SB23.5562</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address 24265 San Fernando Road		Amount of Each Disbursement this Period 1000.00
City Santa Clarita State CA Zip Code 91321	Category/ Type	
Purpose of Disbursement FUNDRAISER		
Candidate Name BUCK MCKEON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 25	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. COLLINS FOR SENATOR</b>		<b>Transaction ID: SB23.5568</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 2 / 2 0 0 7
Mailing Address PO BOX 1096		Amount of Each Disbursement this Period 1000.00
City BANGOR State ME Zip Code 04402	Category/ Type	
Purpose of Disbursement FUNDRAISER		
Candidate Name SUSAN M COLLINS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF BUD CRAMER</b>		<b>Transaction ID: SB23.5576</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 7
Mailing Address POST OFFICE BOX 2621		Amount of Each Disbursement this Period 2500.00
City Huntsville State AL Zip Code 35804	Category/ Type	
Purpose of Disbursement FUNDRAISER		
Candidate Name ROBERT E 'BUD' JR CRAMER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF CAROLYN MCCARTHY</b>		<b>Transaction ID: SB23.5561</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address 151 Linden Road		Amount of Each Disbursement this Period 1000.00
City Mineola State NY Zip Code 11501	Category/ Type	
Purpose of Disbursement FUNDRAISER		
Candidate Name CAROLYN MCCARTHY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. STEVE J ISRAEL</b>		<b>Transaction ID: SB23.5578</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 7
Mailing Address 66 DIX HIGHWAY		Amount of Each Disbursement this Period 1000.00
City DIX HILLS State NY Zip Code 11746	Category/ Type	
Purpose of Disbursement FUNDRAISER		
Candidate Name STEVE J ISRAEL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JIM MATHESON FOR CONGRESS</b>		<b>Transaction ID: SB23.5560</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address PO Box 636		Amount of Each Disbursement this Period 2500.00
City Annandale State VA Zip Code 22003	Category/ Type	
Purpose of Disbursement fundraiser		
Candidate Name JIM MR. MATHESON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. LOFGREN FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.5564 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address 50 W. San Fernando Ste. 350		Amount of Each Disbursement this Period 1000.00
City San Jose State CA Zip Code 95113	Category/ Type	
Purpose of Disbursement FUNDRAISER		
Candidate Name ZOE LOFGREN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 16	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. LOFGREN FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.5566 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 7
Mailing Address 50 W. San Fernando Ste. 350		Amount of Each Disbursement this Period 1500.00
City San Jose State CA Zip Code 95113	Category/ Type	
Purpose of Disbursement FUNDRAISER		
Candidate Name ZOE LOFGREN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 16	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JIM MR. MATHESON</b>		<b>Transaction ID:</b> SB23.5581 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 7
Mailing Address 923 South 2300 East		Amount of Each Disbursement this Period 2500.00
City Salt Lake City State UT Zip Code 84108	Category/ Type	
Purpose of Disbursement Fundraiser		
Candidate Name JIM MR. MATHESON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. CAROLYN MCCARTHY</b>		<b>Transaction ID: SB23.5579</b> Date of Disbursement 06 / 07 / 2007
Mailing Address P.O. Box 190		Amount of Each Disbursement this Period 1000.00
City Mineola State NY Zip Code 11501	Category/ Type	
Purpose of Disbursement fundraiser		
Candidate Name CAROLYN MCCARTHY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. JERRY MCNERNEY</b>		<b>Transaction ID: SB23.5580</b> Date of Disbursement 06 / 07 / 2007
Mailing Address 6769 MENLO CT		Amount of Each Disbursement this Period 1000.00
City PLEASANTON State CA Zip Code 94588	Category/ Type	
Purpose of Disbursement Fundraiser		
Candidate Name JERRY MCNERNEY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MCNERNEY FOR CONGRESS</b>		<b>Transaction ID: SB23.5569</b> Date of Disbursement 03 / 12 / 2007
Mailing Address 6520 Village Parkway Second Floor		Amount of Each Disbursement this Period 1000.00
City Dublin State CA Zip Code 94568	Category/ Type	
Purpose of Disbursement Fundraiser		
Candidate Name JERRY MCNERNEY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. MURTHA FOR CONGRESS</b>		Transaction ID: SB23.5549 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 7
Mailing Address Suite 220 551 Main Street BT FINANCIAL PLAZA SUITE 220		Amount of Each Disbursement this Period 5000.00
City JOHNSTOWN State PA Zip Code 15901	Purpose of Disbursement FUNDRAISER Candidate Name JOHN P MR. MURTHA Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. PATRICK MURPHY FOR CONGRESS</b>		Transaction ID: SB23.5559 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address P.O. Box 868		Amount of Each Disbursement this Period 2000.00
City Levittown State PA Zip Code 19058	Purpose of Disbursement FUNDRAISER Candidate Name PATRICK J MURPHY Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 8	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. PATRICK MURPHY FOR CONGRESS</b>		Transaction ID: SB23.5570 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address P.O. Box 868		Amount of Each Disbursement this Period 1000.00
City Levittown State PA Zip Code 19058	Purpose of Disbursement FUNDRAISER Candidate Name PATRICK J MURPHY Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 8	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. PATRICK MURPHY FOR CONGRESS</b>		<b>Transaction ID: SB23.5575</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address P.O. Box 868		Amount of Each Disbursement this Period 1000.00
City Levittown State PA Zip Code 19058	Category/ Type	
Purpose of Disbursement FUNDRAISER		
Candidate Name PATRICK J MURPHY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 8	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. STEVE ISRAEL FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.5548</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 7
Mailing Address PO Box 777		Amount of Each Disbursement this Period 2000.00
City Deer Park State NY Zip Code 11729	Category/ Type	
Purpose of Disbursement FUNDRAISER		
Candidate Name STEVE J ISRAEL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 02	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. STEVE ISRAEL FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.5557</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address PO Box 777		Amount of Each Disbursement this Period 1000.00
City Deer Park State NY Zip Code 11729	Category/ Type	
Purpose of Disbursement FUNDRAISER		
Candidate Name STEVE J ISRAEL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial)  
**A. STEVE ISRAEL FOR CONGRESS COMMITTEE**

Mailing Address PO Box 777

City Deer Park State NY Zip Code 11729

Purpose of Disbursement FUNDRAISER

Candidate Name STEVE J ISRAEL

Office Sought:  House  
 Senate  
 President

State: NY District: 02

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5572

Date of Disbursement  
M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 7

Amount of Each Disbursement this Period  
1000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	34500.00