

**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
National Italian American Political Action Committee

ADDRESS (number and street) 1205 Locust Street
Suite 100
Check if different than previously reported. (ACC) Philadelphia PA 19107

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00355388

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

4. TYPE OF REPORT (Choose One)	(a) Quarterly Reports:	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	<input checked="" type="checkbox"/> April 15 Quarterly Report(Q1) July 15 Quarterly Report(Q2) <input checked="" type="checkbox"/> October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) July 31 Mid-Year Report(Non-election Year Only) (MY) Termination Report (TER)	Mar 20 (M3) Apr 20 (M4)	Jun 20 (M6) Jul 20 (M7)	Sep 20 (M9) Oct 20 (M10)	Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)	
		(c) 12-Day PRE-Election Report for the:	Primary (12P) Convention (12C)	General (12G) Special (12G)	Runoff (12R) in the State of	
		(d) 30-Day Post -Election Report for the:	General (30G)	Runoff (30R)	Special (30S) in the State of	

5. Covering Period 07 01 2003 through 09 30 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 J.D. ANTHONY N. MALLACE CPA

Signature of Treasurer Electronically Filed by J.D. ANTHONY N. MALLACE CPA Date 01 11 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							
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SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

National Italian American Political Action Committee

Report Covering the Period: From: ^M07 ^D01 ^Y2003 To: ^M09 ^D30 ^Y2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2003 ^M ^D		6723.22
(b) Cash on Hand at Beginning of Reporting Period	26107.96	
(c) Total Receipts (from Line 19)	10759.45	90151.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	36867.41	96874.22
<hr/>		
7. Total Disbursements (from Line 31)	4720.08	64726.89
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	32147.33	32147.33
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
<hr/>		
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	10000.00	

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**

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Page 3

Write or Type Committee Name

National Italian American Political Action Committee

Report Covering the Period: From: ^M07 ^D01 ^Y2003 To: ^M09 ^D30 ^Y2003

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		
(i) Itemized (use Schedule A)	4350.00	
(ii) Unitemized	5970.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	10320.00	85337.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	400.00	4625.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	10720.00	89962.50
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.)	39.45	188.50
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))	10759.45	90151.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10759.45	90151.00

DETAILED SUMMARY PAGE

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	0.00	0.00
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	175.00
(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	175.00
29. Other Disbursements.....	4720.08	64551.89
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 ActMty (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))..	4720.08	64726.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	4720.08	64726.89

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

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)	10720.00	89962.50
34. Total Contribution Refunds (from Line 28(d))	0.00	175.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10720.00	89787.50
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: PAGE 6/10	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. MARIO AMIRATI		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address 2020 WALNUT STREET APT. 23J		Transaction ID: SA11A1.5371
City PHILADELPHIA	State PA	Zip Code 19103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. RENEE AMOORE		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 521 PRINCETON DRIVE		Transaction ID: SA11A1.5348
City KING OF PRUSSIA	State PA	Zip Code 19166
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer THE AMOORE GROUP	Occupation EXECUTIVE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. ROBERT E. BLUE, Jr.		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 1502 UNRUH LANE, BOX 170		Transaction ID: SA11A1.5358
City CEDARS	State PA	Zip Code 19423
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer ROBERT E. BLUE CONSULTING ENGINEERS	Occupation EXECUTIVE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	400.00
TOTAL 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 7 / 10	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. SILVIO CARBONE		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 309 PENN STREET		Transaction ID: SA11A1.5328
City NORRISTOWN	State PA	Zip Code 19401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer G N & B AUTO BODY	Occupation EXECUTIVE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. MICHAEL CARRON		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 316 8TH ST.		Transaction ID: SA11A1.5338
City BRIDGEPORT	State PA	Zip Code 19405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) C. ANTHONY L. CELENTANO		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 208 HIDDEN ACRES LN.		Transaction ID: SA11A1.5317
City MEDIA	State PA	Zip Code 19063
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer DEUTSCHE BANK	Occupation DIRECTOR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL 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 8/18	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. DOMINICK A. CIPOLLINI		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address P.O. BOX 222		Transaction ID: SA11A1.5308
City CHELtenham	State PA	Zip Code 19012-0202
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer KEYSTONE OUTDOOR ADVERTISING	Occupation OWNER	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2350.00	

Full Name (Last, First, Middle Initial) B. ROBERT D'ANJOLLELS		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 2 GREGORY LANE		Transaction ID: SA11A1.5321
City NEWTOWN SQUARE	State PA	Zip Code 19073
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer D'ANJOLELL MEMORIALS	Occupation SUPERVISOR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) C. ANDREW DEL BEATO		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address 37 STATE RD A-12		Transaction ID: SA11A1.5375
City MEDIA	State PA	Zip Code 19063
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer CREATIVE FINANCIAL GROUP	Occupation INVESTMENT ASSOCIATE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL 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 9 / 18	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. LOUISA A. DI GIACOMO		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 100 CITADEL CT.		Transaction ID: SA11A1.5355
City NORTH WALES	State PA	Zip Code 19454
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Full Name (Last, First, Middle Initial) B. ANTHONY M. DI LUCIA		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address 100 JACOBS HALL AVE.		Transaction ID: SA11A1.5376
City LANSDALE	State PA	Zip Code 19446
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. JOHN R. DIMINO		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 189B CHRISTOPHER LANE		Transaction ID: SA11A1.5324
City NORRISTOWN	State PA	Zip Code 19403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer	Occupation TO BE SUPPLIED	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	800.00
TOTAL 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 10 / 19	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. VINCENT GENOVESE		Date of Receipt M / D / Y 08 / 22 / 2008
Mailing Address 3050 RED LION RD.		Transaction ID: SA11A1.5297
City	State	Zip Code
PHILADELPHIA	PA	19114
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer AUGUSTA AEROSPACE	Occupation EXECUTIVE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1525.00	

Full Name (Last, First, Middle Initial) B. JOSEPH A. GIUNTA		Date of Receipt M / D / Y 09 / 26 / 2008
Mailing Address 813 MINE HILL ROAD		Transaction ID: SA11A1.5319
City	State	Zip Code
SCHWENKSVILLE	PA	19473
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer HARLEYSVILLE NAT'L BANK	Occupation EXECUTIVE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. PEGGY JACK		Date of Receipt M / D / Y 09 / 26 / 2008
Mailing Address 151 HERSCHEL ROAD		Transaction ID: SA11A1.5304
City	State	Zip Code
FEASTERVILLE	PA	19053
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer ANDY AFFANATO GEN'L CONTR- ACTOR	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	600.00
TOTAL 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 / 19	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. JEANINE JEWELL		Date of Receipt M / D / Y Y Y Y 09 / 26 / 2003
Mailing Address 933 PENN CIRCLE # B314		Transaction ID: SA11A1.5398
City KING OF PRUSSIA	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer CONTINENTAL REALTY	Occupation REALTOR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. JEANINE JEWELL		Date of Receipt M / D / Y Y Y Y 09 / 26 / 2003
Mailing Address 933 PENN CIRCLE # B314		Transaction ID: SA11A1.5398
City KING OF PRUSSIA	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer CONTINENTAL REALTY	Occupation REALTOR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. TED LE BLANG		Date of Receipt M / D / Y Y Y Y 09 / 26 / 2003
Mailing Address 235 E. AIRY ST.		Transaction ID: SA11A1.5318
City NORRISTOWN	State PA	Zip Code 19401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer BOROUGH OF NORRISTOWN	Occupation MAYOR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL 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 / 19	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. JOSEPH MC COLGAN		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address		Transaction ID: SA11A1.5395
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer TO BE SUPPLIED	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. SANDRA MULLER		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 1443 REVELATION RD.		Transaction ID: SA11A1.5349
City	State	Zip Code
MEADOWBROOK	PA	19046-1023
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer MULLER, INC.	Occupation EXECUTIVE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 7800.00	

Full Name (Last, First, Middle Initial) C. LENA PAGANO		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address 200 FAYETTE STREET		Transaction ID: SA11A1.5372
City	State	Zip Code
CONSHOHOCKEN	PA	19428
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer LA BELLA MODA	Occupation OWNER	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL 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 / 19	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. ANDREW J. SCUTTI		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 134B ARTHUR RD.		Transaction ID: SA11A1.5328
City MAPLE GLEN	State PA	Zip Code 19002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer DALE CORPORATION	Occupation DIRECTOR OF SAFETY & HEALTH	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 775.00	

Full Name (Last, First, Middle Initial) B. ANDREW J. SCUTTI		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 134B ARTHUR RD.		Transaction ID: SA11A1.5329
City MAPLE GLEN	State PA	Zip Code 19002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer DALE CORPORATION	Occupation DIRECTOR OF SAFETY & HEALTH	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	

Full Name (Last, First, Middle Initial) C. JOSEPH P. STAMPONE, Esq.		Date of Receipt M / D / Y 09 / 30 / 2003
Mailing Address 139D TANGLEWOOD DRIVE		Transaction ID: SA11A1.5377
City NORTH WALES	State PA	Zip Code 19454
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer STAMPONE, D'ANGELO & RENZI	Occupation ATTORNEY	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2800.00	

SUBTOTAL of Receipts This Page (optional)	▶	400.00
TOTAL This Period (last page this line number only)	▶	4350.00

**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 14 / 19	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input checked="" type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. NLdH PAC		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address FOUR SENTRY PARKWAY SUITE 300		Transaction ID: SA11C.5353
City BLUE BELL	State PA	Zip Code 19422
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. PSC H2D PAC		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 762 W. LANCASTER AVE		Transaction ID: SA11C.5308
City BRYN MAWR	State PA	Zip Code 19010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

SUBTOTAL of Receipts This Page (optional)	▶	400.00
TOTAL This Period (last page this line number only)	▶	400.00

**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 15 / 19	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input checked="" type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. JOHN COSTA		Transaction ID: SB29.5405 Date of Disbursement 09 / 26 / 2003	
Mailing Address		Amount of Each Disbursement this Period 150.00	
City State Zip Code			
Purpose of Disbursement EVENT PHOTOGRAPHY			
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		Category/ Type

Full Name (Last, First, Middle Initial) B. NICK DESIDERIO		Transaction ID: SB29.5406 Date of Disbursement 09 / 30 / 2003	
Mailing Address TO BE SUPPLIED		Amount of Each Disbursement this Period 300.00	
City State Zip Code			
Purpose of Disbursement EVENT EXPENSES			
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		Category/ Type

Full Name (Last, First, Middle Initial) C. MONTCO CHAMBER OF COMMERCE		Transaction ID: SB29.5403 Date of Disbursement 09 / 26 / 2003	
Mailing Address		Amount of Each Disbursement this Period 725.00	
City State Zip Code NORRISTOWN PA 19403			
Purpose of Disbursement EVENT EXPENSES			
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		Category/ Type

SUBTOTAL of Disbursements This Page (optional)	1175.00
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)				PAGE 16 / 19	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input checked="" type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. PRIESTLY PRINTERS		Transaction ID: SB29.5398 Date of Disbursement 07 / 30 / 2003
Mailing Address		Amount of Each Disbursement this Period 395.90
City State Zip Code		
Purpose of Disbursement		
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. PRIESTLY PRINTERS		Transaction ID: SB29.5401 Date of Disbursement 08 / 12 / 2003
Mailing Address		Amount of Each Disbursement this Period 500.00
City State Zip Code		
Purpose of Disbursement PRINTING		
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. SPECIALTY SALES		Transaction ID: SB29.5399 Date of Disbursement 07 / 30 / 2003
Mailing Address P.O. BOX 2288		Amount of Each Disbursement this Period 981.76
City State Zip Code CINNAMINSON NJ D8077		
Purpose of Disbursement BUSINESS CARDS		
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional)	1877.66
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)						PAGE 17 / 19
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. UTA ASSOCIATES		Transaction ID: SB29.5397 Date of Disbursement 07 / 30 / 2003
Mailing Address 1205 LOCUST ST SUITE 100		Amount of Each Disbursement this Period 552.34
City PHILADELPHIA	State PA Zip Code 19107	
Purpose of Disbursement		
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) B. UTA ASSOCIATES		Transaction ID: SB29.5402 Date of Disbursement 08 / 12 / 2003
Mailing Address 1205 LOCUST ST SUITE 100		Amount of Each Disbursement this Period 1115.08
City PHILADELPHIA	State PA Zip Code 19107	
Purpose of Disbursement COMMISSION		
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District		

SUBTOTAL of Disbursements This Page (optional)	▶	1667.42
TOTAL This Period (last page this line number only)	▶	4720.08

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 18 / 18 FOR LINE 13 OF FORM 3X
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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

Transaction ID: SC/10.4284

LOAN SOURCE Full Name (Last, First, Middle Initial) AMATO BERARDI	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 555 E. CITY LINA AVE.	
City BALA CYNWYD State PA ZIP Code 19004	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7500.00	0.00	7500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
06 ^M 15 ^D 2001 ^Y		% (apr)	<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional) ▶	7500.00
TOTALS This Period (last page in this line only) ▶	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 10 / 10 FOR LINE 13 OF FORM 3X
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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

Transaction ID: SC/10.4271

LOAN SOURCE Full Name (Last, First, Middle Initial) AMATO BERARDI	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 555 E. CITY LINE AVE	
City BALA CYNWYD State PA ZIP Code 19004	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2500.00	0.00	2500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
03 rd 17 th 2001		% (apr)	<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional) ▶	2500.00
TOTALS This Period (last page in this line only) ▶	10000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.