

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FED MAIL OPERATIONS CENTER 2002 OCT 23 A 9 39

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 EAST 42ND STREET SUITE 5010 NEW YORK NY 10016

2. FEC IDENTIFICATION NUMBER C 000329318 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 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TR)

5. Covering Period 10/01/2002 through 10/16/2002

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 William J. Frost Signature of Treasurer [Signature] Date 10/21/2002

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

EDO CORPORATION PAC

Report Covering the Period: From: **10** / **01** / **2002** To: **10** / **16** / **2002**

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, 2002		37,787.20
(b) Cash on Hand at Beginning of Reporting Period	3,092,750	
(c) Total Receipts (from Line 19)	56850	1,611,575
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	4,049,600	5,390,305
7. Total Disbursements (from Line 30)	1,000,000	1,440,705
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	39,496.00	3,949,600
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		

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

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

EDO CORPORATION PAC

Report Covering the Period: From: 10 01 2002 To: 10 16 2002

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)
(ii) Unitemized
(ii) TOTAL (add Lines 11(a)(i) and (ii))

2,260.00
3,425.00
5,685.00

1,193.075

- (b) Political Party Committees
(c) Other Political Committees (such as PACs)
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4)

5,685.00

1,193.075

12. Transfers From Affiliated/Other Party Committees

4,185.00

4,185.00

13. All Loans Received

14. Loan Repayments Received

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees

17. Other Federal Receipts (Dividends, Interest, etc.)

18. Transfers from Nonfederal Account for Joint Activity

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)

5,685.00

1,611.575

20. Total Federal Receipts (subtract Line 18 from Line 19)

5,685.00

1,611.575

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 28X (Revised 1/01)

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			
(ii) Non-Federal Share			4 2 0 5
(b) Other Federal Operating Expenditures			4 2 0 5
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))			
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees	1 0 0 0 0 0		1 4 3 6 5 0 0
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees			
(b) Political Party Committees			
(c) Other Political Committees (such as PACs)			
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))			
29. Other Disbursements			
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 28, 27, 28(d), and 29)	1 0 0 0 0 0		1 4 4 0 7 0 5
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	1 0 0 0 0 0		1 4 4 0 7 0 5
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from Line 11(d), page 3)	5 6 8 5 0		7 1 9 3 0 7 5
33. Total Contribution Refunds (from Line 28(d))			
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	5 6 8 5 0		7 1 9 3 0 7 5
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))			4 2 0 5
36. Offsets to Operating Expenditures (from Line 15, page 3)			
37. Net Operating Expenditures (subtract Line 36 from Line 35)			4 2 0 5

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

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

FOR LINE NUMBER: (check only one)	PAGE 1 OF 4
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be 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

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

Mailing Address
4 CEDAR ROAD

City **WADING RIVER** State **NY** Zip Code **11792**

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

Name of Employer: **EDO CORPORATION** Occupation: **EXECUTIVE V.P.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
840.00

PAYROLL DEDUCTION

Date of Receipt: [] / [] / []

Amount of Each Receipt this Period
40.00
(\$20.00 Weekly)

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

Mailing Address
713 DOWNINGTON DRIVE

City **CHESAPEAKE** State **VA** Zip Code **23320**

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

Name of Employer: **EDO CORPORATION** Occupation: **GROUP V.P.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
820.00

PAYROLL DEDUCTION

Date of Receipt: [] / [] / []

Amount of Each Receipt this Period
40.00
(\$20.00 Weekly)

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

Mailing Address
35 ARROWHEAD COURT

City **NORTH HILLS** State **NY** Zip Code **11030**

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

Name of Employer: **EDO CORPORATION** Occupation: **PRESIDENT/CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

PAYROLL DEDUCTION

Date of Receipt: [] / [] / []

Amount of Each Receipt this Period
20.00
(\$10.00 Weekly)

SUBTOTAL of Receipts This Page (optional) **100.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 2 OF 4

(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"/> 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)

A. WOOD, DANIEL S.

Mailing Address

5309 ROSAER PLACE

City

VIRGINIA BEACH

State

VA

Zip Code

23464

FEC ID number of contributing federal political committee.

C

Name of Employer

EDO CORPORATION

Occupation

GROUP CONTROLLER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

PAYROLL DEDUCTION

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

20.00
(\$10.00 Weekly)

Full Name (Last, First, Middle Initial)

B. ANDERSON, JON A.

Mailing Address

5023 N. WASHINGTON BOULEVARD

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing federal political committee.

C

Name of Employer

EDO CORPORATION

Occupation

V.P./WASH OPS

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

PAYROLL DEDUCTION

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

12.00
(\$6.00 Weekly)

Full Name (Last, First, Middle Initial)

C. ARNOLD, WILLIAM G.

Mailing Address

316 NORTH COLUMBUS STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing federal political committee.

C

Name of Employer

EDO CORPORATION

Occupation

DIR. DEFENSE RELATIONS

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

PAYROLL DEDUCTION

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

14.00
(\$7.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

46.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 3 OF 4	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 18

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NAME OF COMMITTEE (in Full)
EDO CORPORATION PAC

A. Full Name (Last, First, Middle Initial)
REED, DARRELL L.

Mailing Address
P.O. BOX 564

City **DEER PARK** State **NY** Zip Code **11729**

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

Name of Employer: **EDO CORPORATION** Occupation: **V.P./CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

PAYROLL DEDUCTION
Date of Receipt

Amount of Each Receipt this Period
20.00
(\$10.00 Weekly)

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

Mailing Address
6 SWIRL LANE

City **LEVITOWN** State **NY** Zip Code **11756**

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

Name of Employer: **EDO CORPORATION** Occupation: **GENERAL MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
580.00

PAYROLL DEDUCTION
Date of Receipt

Amount of Each Receipt this Period
20.00
(\$10.00 Weekly)

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

Mailing Address
824 WILTHEURST LANDING ROAD

City **VIRGINIA BEACH** State **VA** Zip Code **23464**

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

Name of Employer: **EDO CORPORATION** Occupation: **GENERAL MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

PAYROLL DEDUCTION
Date of Receipt

Amount of Each Receipt this Period
20.00
(\$10.00 Weekly)

SUBTOTAL of Receipts This Page (optional) **60.00**

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 17

PAGE 4 OF 4

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NAME OF COMMITTEE (In Full)
EDC CORPORATION PAC

A. HANCOCK, DENNIS D.
Full Name (Last, First, Middle Initial)
Mailing Address
1120 ANBERDALE DRIVE
City **CHESAPEAKE** State **VA** Zip Code **23322**
FEC ID number of contributing federal political committee: **C**
Name of Employer: **EDC CORPORATION** Occupation: **ENGINEER**
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: **205.00**

PAYROLL DEDUCTION
Date of Receipt: [] [] [] [] [] []
Amount of Each Receipt this Period: **10.00**
(\$5.00 Weekly)

B. OTIS, TERRELL, R
Full Name (Last, First, Middle Initial)
Mailing Address
5001 36TH STREET
City **ARLINGTON** State **VA** Zip Code **22207**
FEC ID number of contributing federal political committee: **C**
Name of Employer: **EDC CORPORATION** Occupation: **PROGRAMS**
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: **205.00**

PAYROLL DEDUCTION
Date of Receipt: [] [] [] [] [] []
Amount of Each Receipt this Period: **10.00**
(\$5.00 Weekly)

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee: **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date:

Date of Receipt: [] [] [] [] [] []
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) **20.00**
TOTAL This Period (total page this line number only) **226.00**

**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 1 OF 1

<input type="checkbox"/> 21a	<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"/> 29

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NAME OF COMMITTEE (to Full)

EDO CORPORATION PAC

Full Name (Last, First, Middle Initial)

A.

GALLEGLY FOR CONGRESS

Mailing Address

2427 RAYBURN HOUSE OFFICE BUILDING

City **WASHINGTON**

State **DC**

Zip Code **20515**

Purpose of Disbursement

REELECTION FUNDRAISER

011

Category/Type

Candidate Name

ELTON GALLEGLY

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **CA**

District: **23**

Date of Disbursement:

10 / 07 / 2002

Amount of Each Disbursement this Period

1,000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement:

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement:

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1,000.00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>10-23-02</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>SL</i> PREPARER	<i>10-23-02</i> DATE PREPARED