

**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)
	April 15 Quarterly Report(Q1)	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)	
	July 15 Quarterly Report(Q2)	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)	
	October 15 Quarterly Report(Q3)	(c) 12-Day PRE-Election Report for the:	Primary (12P)	General (12G)	Runoff (12R)	
	<input checked="" type="checkbox"/> January 31 Quarterly Report(YE)	Election on	Convention (12C)	Special (12G)		in the State of
	July 31 Mid-Year Report(Non-election Year Only) (MY)	(d) 30-Day Post -Election Report for the:	General (30G)	Runoff (30R)	Special (30S)	
	Termination Report (TER)	Election on				in the State of

5. Covering Period 10 01 2003 through 12 31 2003

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

Type or Print Name of Treasurer CPA, J.D. Anthony N. Mallace

Signature of Treasurer Electronically Filed by CPA, J.D. Anthony N. Mallace Date 02 02 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: ^M10 ^D01 ^Y2003 To: ^M12 ^D31 ^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	32147.33	
(c) Total Receipts (from Line 19)	9100.00	99251.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	41247.33	105974.22
<hr/>		
7. Total Disbursements (from Line 31)	0.00	64726.89
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	41247.33	41247.33
<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**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

National Italian American Political Action Committee

Report Covering the Period: From: ^M10 ^D01 ^Y2003 To: ^M12 ^D31 ^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)	7850.00	
(ii) Unitemized	1250.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	9100.00	94437.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	4625.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	9100.00	99062.50
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.)	0.00	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))	9100.00	99251.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	9100.00	99251.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	0.00	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))..	0.00	64726.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(i) from Line 31).....	0.00	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)	9100.00	99062.50
34. Total Contribution Refunds (from Line 28(d))	0.00	175.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9100.00	98887.50
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: (check only one)		PAGE 6 / 14	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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. RENEE AMOORE		Date of Receipt M / D / Y 10 / 28 / 2003
Mailing Address 521 PRINCETON DRIVE		Transaction ID: SA11A1.5422
City KING OF PRUSSIA	State PA	Zip Code 19466
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer THE AMOORE GROUP	Occupation EXECUTIVE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. LINDA BERARDI		Date of Receipt M / D / Y 10 / 28 / 2003
Mailing Address 2456 GREENLAND CT.		Transaction ID: SA11A1.5425
City BENSALEM	State PA	Zip Code 19020
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. JOHN D. BURTON, Sr.		Date of Receipt M / D / Y 10 / 06 / 2003
Mailing Address 1545 HUNTINGTON RD.		Transaction ID: SA11A1.5410
City ABINGTON	State PA	Zip Code 19001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00
Name of Employer SIDNEY SACK AGENCY	Occupation INSURANCE BROKER	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
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 / 14	
	(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"/> 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. ALEX CHIARO		Date of Receipt M / D / Y 10 / 06 / 2003
Mailing Address 218 S. MAIN ST		Transaction ID: SA11A1.5417
City SELLERSVILLE	State PA	Zip Code 18060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer CHIARO'S	Occupation OWNER	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2050.00	

Full Name (Last, First, Middle Initial) B. ANDREW DEL BEATO		Date of Receipt M / D / Y 12 / 23 / 2003
Mailing Address 37 STATE RD A-12		Transaction ID: SA11A1.5445
City MEDIA	State PA	Zip Code 19063
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer CREATIVE FINANCIAL GROUP	Occupation INVESTMENT ASSOCIATE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. JOSEPH DI GIROLAMO		Date of Receipt M / D / Y 12 / 12 / 2003
Mailing Address 2400 BYBERRY RD.		Transaction ID: SA11A1.5438
City BENSALEM	State PA	Zip Code 19020
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer TWP. OF BENSALEM	Occupation MAYOR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	950.00
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 8/14	
	<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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. ANTHONY M. DI LUCIA		Date of Receipt M / D / Y 10 / 28 / 2003
Mailing Address 100 JACOBS HALL AVE.		Transaction ID: SA11A1.5420
City LANSDALE	State PA	Zip Code 19446
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. ROMUALDO LAMBERTI		Date of Receipt M / D / Y 10 / 08 / 2003
Mailing Address 4 ARTISAN WAY		Transaction ID: SA11A1.5416
City CHERRY HILL	State NJ	Zip Code 08003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) C. ROMUALDO LAMBERTI		Date of Receipt M / D / Y 12 / 12 / 2003
Mailing Address 4 ARTISAN WAY		Transaction ID: SA11A1.5435
City CHERRY HILL	State NJ	Zip Code 08003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

SUBTOTAL of Receipts This Page (optional)	550.00
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 9 / 14	
	<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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. ERNESTO LEONE		Date of Receipt M / D / Y 12 / 12 / 2003
Mailing Address 525 NESHAMINY MALL		Transaction ID: SA11A1.5439
City	State	Zip Code
BENSALEM	PA	
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 ▼ 450.00	

Full Name (Last, First, Middle Initial) B. WILLIAM MACKRIDES		Date of Receipt M / D / Y 12 / 12 / 2003
Mailing Address 1020 BEVERLY LANE		Transaction ID: SA11A1.5436
City	State	Zip Code
NEWTOWN SQUARE	PA	19073
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. CARLO MASTROMARCO		Date of Receipt M / D / Y 12 / 12 / 2003
Mailing Address 948 ROSA AVENUE		Transaction ID: SA11A1.5440
City	State	Zip Code
CROYDON	PA	19021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer MATROMARCO BROS.	Occupation EXECUTIVE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	

SUBTOTAL of Receipts This Page (optional)	1450.00
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 10 / 14	
	<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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. JOSEPH MC GETTIGAN		Date of Receipt M / D / Y 10 / 28 / 2003
Mailing Address 237 LONG LANE		Transaction ID: SA11A1.5421
City	State	Zip Code
UPPER DARBY	PA	19082
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. ESAM M. SALAH		Date of Receipt M / D / Y 10 / 08 / 2003
Mailing Address 1545 HUNTINGDON RD.		Transaction ID: SA11A1.5413
City	State	Zip Code
ABINGTON	PA	19001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer PONZIO'S DINER	Occupation OWNER	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. ANDREW J. SCUTTI		Date of Receipt M / D / Y 11 / 25 / 2003
Mailing Address 134B ARTHUR RD.		Transaction ID: SA11A1.5429
City	State	Zip Code
MAPLE GLEN	PA	19002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer DALE CORPORATION	Occupation DIRECTOR OF SAFETY & HEALTH	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1025.00	

SUBTOTAL of Receipts This Page (optional)	1300.00
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 11 / 14	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. MICHAEL SEASONWEIN		Date of Receipt M / D / Y 12 / 12 / 2003
Mailing Address 21 MAGNOLIA CT.		Transaction ID: SA11A1.5443
City E. BRUNSWICK	State NJ	Zip Code 08816
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. JOSEPH P. STAMPONE, Esq.		Date of Receipt M / D / Y 10 / 28 / 2003
Mailing Address 139D TANGLEWOOD DRIVE		Transaction ID: SA11A1.5424
City NORTH WALES	State PA	Zip Code 19454
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer STAMPONE, D'ANGELO & RENZI	Occupation ATTORNEY	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2850.00	

Full Name (Last, First, Middle Initial) C. CAROL TAMBURINO		Date of Receipt M / D / Y 12 / 12 / 2003
Mailing Address 3 SEASIDE COURT		Transaction ID: SA11A1.5431
City MARGATE	State NJ	Zip Code 08402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer TURNER CONSTRUCTION CO.	Occupation CONSULTANT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	2300.00
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 12 / 14	
	(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. JOSEPH TARANTINO		Date of Receipt M / D / Y 10 / 28 / 2003
Mailing Address 700 W. GERMANTOWN PIKE		Transaction ID: SA11A1.5423
City E. NORRITON	State PA	Zip Code 19403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer CONTINENTAL REALTY	Occupation EXECUTIVE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. UNITEMIZED CONTRIBUTIONS		Date of Receipt M / D / Y 12 / 12 / 2003
Mailing Address		Transaction ID: SA11A1.5450
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 6557.50	

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	7850.00

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 13 / 14 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 14 / 14 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:
M M Y Y 03 17 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.