

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 Philadelphia PA 19107 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00355388 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report(Q1) (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 2006 through 03 31 2006

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 JOSEPH A. AUTERI

Signature of Treasurer Electronically Filed by JOSEPH A. AUTERI Date 04 15 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**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:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		56916.31
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	56916.31									
(c) Total Receipts (from Line 19)	70903.00	70903.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	127819.31	127819.31								
7. Total Disbursements (from Line 31)	55408.85	55408.85								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	72410.46	72410.46								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
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**

Write or Type Committee Name
National Italian American Political Action Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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)	54003.00	54003.00
(ii) Unitemized	7000.00	7000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	61003.00	61003.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	9900.00	9900.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	70903.00	70903.00
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))	70903.00	70903.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	70903.00	70903.00

DETAILED SUMMARY PAGE
of Disbursements

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.....	54408.85	54408.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	54408.85	54408.85
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	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.....	1000.00	1000.00
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))..	55408.85	55408.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	55408.85	55408.85

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	70903.00	70903.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	70903.00	70903.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	54408.85	54408.85
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	54408.85	54408.85

**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 / 50
	<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	

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. CHRISTY ADAMS		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006	
Mailing Address 264 S. 4TH STREET		Transaction ID: SA11A1.6508	
City State Zip Code PHILADELPHIA PA 19106		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C			
Name of Employer SELF Occupation ATTORNEY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. JAMES J. ANDERSON		Date of Receipt M M / D D / Y Y Y Y 01 / 13 / 2006	
Mailing Address 205 LURGAN ROAD		Transaction ID: SA11A1.6509	
City State Zip Code NEW HOPE PA 18938		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer JAMES J. ANDERSON CONSTRUCTION CO., IN Occupation EXECUTIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. JAMES J. ANDERSON		Date of Receipt M M / D D / Y Y Y Y 01 / 13 / 2006	
Mailing Address 205 LURGAN ROAD		Transaction ID: SA11A1.6510	
City State Zip Code NEW HOPE PA 18938		Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C			
Name of Employer JAMES J. ANDERSON CONSTRUCTION CO., IN Occupation EXECUTIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional) ▶	725.00
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 7 / 50
	<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)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
ANGELO AUTERI

Mailing Address 315 RICHFIELD RD.

City DREXEL HILL State PA Zip Code 19082

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

Name of Employer SELF EMPLOYED Occupation HARDWARE ADMIN.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 1 7 / 2 0 0 6

Transaction ID: SA11A1.6512

Amount of Each Receipt this Period
 350.00

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

Mailing Address 555 E. CITY LINE AVE.

City BALA CYNWYD State PA Zip Code 19004

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

Name of Employer BERARDI & ASSOC. Occupation FINANCIAL ADVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 553.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 1 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.6515

Amount of Each Receipt this Period
 428.00

C. Full Name (Last, First, Middle Initial)
JOSEPH A. AUTERI

Mailing Address 555 E. CITY LINE AVE.

City BALA CYNWYD State PA Zip Code 19004

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

Name of Employer BERARDI & ASSOC. Occupation FINANCIAL ADVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 653.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.6514

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)	▶	878.00
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 / 50
	<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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. MILDRED L. BANKS		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6	
Mailing Address 1518 N. 61ST STREET		Transaction ID: SA11A1.6518	
City State Zip Code PHILADELPHIA PA 19151		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. MILDRED L. BANKS		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6	
Mailing Address 1518 N. 61ST STREET		Transaction ID: SA11A1.6519	
City State Zip Code PHILADELPHIA PA 19151		Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 475.00	

Full Name (Last, First, Middle Initial) C. Kenneth L. Baritz		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 6	
Mailing Address 1218 Chestnut St. Suite 1005		Transaction ID: SA11A1.6522	
City State Zip Code Philadelphia PA 19107		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Kenneth L. Baritz, Esq. Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1025.00	

SUBTOTAL of Receipts This Page (optional) ▶	1475.00
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 / 50
	<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. Kenneth P. Barrow		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006	
Mailing Address 1489 Baltimore Pike		Transaction ID: SA11A1.6524	
City State Zip Code Springfield PA 19064		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed Occupation Realtor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Amato Berardi		Date of Receipt M M / D D / Y Y Y Y 01 / 20 / 2006	
Mailing Address 555 City Line Ave, Suite 770		Transaction ID: SA11A1.6527	
City State Zip Code Bala Cynwyd PA 19004		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Berardi, Auteri & Assoc Occupation Partner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Amato Berardi		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2006	
Mailing Address 555 City Line Ave, Suite 770		Transaction ID: SA11A1.6528	
City State Zip Code Bala Cynwyd PA 19004		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Berardi, Auteri & Assoc Occupation Partner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	700.00
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 / 50
	<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. BOB BRADY FOR CONGRESS		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006	
Mailing Address 1827 South Broad Street		Transaction ID: SA11A1.6531	
City State Zip Code PHILADELPHIA PA 19148		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C C00333740			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Sammy A. Braccia		Date of Receipt M M / D D / Y Y Y Y 02 / 17 / 2006	
Mailing Address 201 Pine Ave.		Transaction ID: SA11A1.6537	
City State Zip Code Horsham PA 19044-2422		Amount of Each Receipt this Period 725.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation S. Braccia Builders & Developers Homebuilder			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 725.00	

Full Name (Last, First, Middle Initial) C. Ill Lewis J. Brandolini		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2006	
Mailing Address 2219 Grubbs Mill Rd.		Transaction ID: SA11A1.6539	
City State Zip Code Berwyn PA 19312		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Brandolini Companies Investor/Developer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	2075.00
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 / 50
	<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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. Ill Lewis J. Brandolini		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address 2219 Grubbs Mill Rd.		Transaction ID: SA11A1.6540
City State Zip Code Berwyn PA 19312	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Brandolini Companies	Occupation Investor/Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	

Full Name (Last, First, Middle Initial) B. Emil F. Bucceroni		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 6
Mailing Address 3425A Lawrence St.		Transaction ID: SA11A1.6542
City State Zip Code Philadelphia PA 19148	Amount of Each Receipt this Period 1850.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Food Distribution Center	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1850.00	

Full Name (Last, First, Middle Initial) C. Raymond S. Bucceroni		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 2020 Walnut Street, Apt 31F		Transaction ID: SA11A1.6544
City State Zip Code Philadelphia PA 19103	Amount of Each Receipt this Period 1850.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Raymond S. Bucceroni Real Estate	Occupation Realtor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1850.00	

SUBTOTAL of Receipts This Page (optional) ▶	4100.00
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 / 50
	<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. Barbara Capozzi		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2006
Mailing Address 3320 S. 20th Street		Transaction ID: SA11A1.6551
City Philadelphia State PA Zip Code 19145	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Real Estate/ Insurance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	

Full Name (Last, First, Middle Initial) B. Capozzi Real Estate/Insurance Ltd.		Date of Receipt M M / D D / Y Y Y Y Y 02 / 10 / 2006
Mailing Address 3320 South 20th St.		Transaction ID: SA11A1.6550
City Philadelphia State PA Zip Code 19145	Amount of Each Receipt this Period 1025.00	
FEC ID number of contributing federal political committee. C		Attribute to Barbara Capozzi
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1025.00	

Full Name (Last, First, Middle Initial) C. Barbara Capozzi		Date of Receipt M M / D D / Y Y Y Y Y 02 / 10 / 2006
Mailing Address 3320 S. 20th Street		Transaction ID: SA11A1.6550.0
City Philadelphia State PA Zip Code 19145	Amount of Each Receipt this Period 1025.00	
FEC ID number of contributing federal political committee. C		Attributed from Capozzi Real Estate
Name of Employer Self Employed	Occupation Real Estate/ Insurance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1025.00	

SUBTOTAL of Receipts This Page (optional) ▶	1125.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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 / 50
	<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)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jr. Peter Ciarrocci

Mailing Address PO Box 11193

City Philadelphia State PA Zip Code 19136-6193

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

Name of Employer Chickie's & Pete's Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 0 / 2 0 0 6

Transaction ID: SA11A1.6555

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Jr. Peter Ciarrocci

Mailing Address PO Box 11193

City Philadelphia State PA Zip Code 19136-6193

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

Name of Employer Chickie's & Pete's Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 0 / 2 0 0 6

Transaction ID: SA11A1.6556

Amount of Each Receipt this Period
 150.00

C. Full Name (Last, First, Middle Initial)
Jessica R. Conley

Mailing Address 716 Eaton Rd.

City Drexel Hill State PA Zip Code 19026-1507

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

Name of Employer District Attorney's Office of Delaware Occupation Asst. District Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.6562

Amount of Each Receipt this Period
 375.00

SUBTOTAL of Receipts This Page (optional) ▶ **775.00**

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 14 / 50		
	<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

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

Full Name (Last, First, Middle Initial) A. Peter J. Cordua		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 53 Wimbledon Way		Transaction ID: SA11A1.6567	
City State Zip Code Marlton NJ 08053	Amount of Each Receipt this Period 175.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Cordua & Company, PC	Occupation CPA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) B. Sr. Guido DiCicco		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6	
Mailing Address 37 Summer Place		Transaction ID: SA11A1.6577	
City State Zip Code Huntingdon Valley PA 19006	Amount of Each Receipt this Period 1225.00		
FEC ID number of contributing federal political committee. C			
Name of Employer DiCicco, Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1225.00		

Full Name (Last, First, Middle Initial) C. Michael G. Eckstein		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 6	
Mailing Address PO Box 1043		Transaction ID: SA11A1.6584	
City State Zip Code Bryn Mawr PA 19010	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C			
Name of Employer MTRZP	Occupation Information Requested-Best Efforts		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	1800.00
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 15 / 50
	<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

A. Full Name (Last, First, Middle Initial)
Nicholas V. Falcone

Mailing Address 282 Forest Road

City State Zip Code
Merion Station PA 19066

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

Name of Employer: Falcone Printing & General Contracting
Occupation: Contractor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 03 / 2006

Transaction ID: SA11A1.6586

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
Jr. Lawrence M. Farnese

Mailing Address Academy House Apt. 29D

City State Zip Code
Philadelphia PA 19102

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

Name of Employer: Klett, Rooney
Occupation: Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 17 / 2006

Transaction ID: SA11A1.6589

Amount of Each Receipt this Period
175.00

C. Full Name (Last, First, Middle Initial)
ROCCO FIORENTINO

Mailing Address 48 DOWNING LANE

City State Zip Code
VOORHEES NJ 08043

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

Name of Employer: FREEDOM RINGS, LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 17 / 2006

Transaction ID: SA11A1.6591

Amount of Each Receipt this Period
375.00

SUBTOTAL of Receipts This Page (optional)	▶	900.00
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 16 / 50
	<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)
National Italian American Political Action Committee

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

Mailing Address 105 BURGUNDY CIRCLE

City State Zip Code
BLUE BELL PA 19422

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

Name of Employer Occupation
SELF INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
MM / DD / YYYY
02 / 17 / 2006

Transaction ID: SA11A1.6592

Amount of Each Receipt this Period
1750.00

B. Full Name (Last, First, Middle Initial)
Steven H. Freiberg

Mailing Address 74 Appletree Lane
Washington Township

City State Zip Code
Sewell NJ 08080

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

Name of Employer Occupation
Information Requested-Best Efforts Information Requested-Best Efforts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: SA11A1.6594

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Gary Barbera Dodgeland

Mailing Address 6719 Ridge Ave.

City State Zip Code
Philadelphia PA 19128

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2006

Transaction ID: SA11A1.6603

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
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 17 / 50
	<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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. Joseph Gatta		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006	
Mailing Address 144 Windsor Ave.		Transaction ID: SA11A1.6605	
City Haddonfield	State NJ	Zip Code 08033	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Joseph Gatta & Sons	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. VINCENT GENOVESE		Date of Receipt M M / D D / Y Y Y Y 01 / 27 / 2006	
Mailing Address 3050 RED LION RD.		Transaction ID: SA11A1.6607	
City PHILADELPHIA	State PA	Zip Code 19114	Amount of Each Receipt this Period 1850.00
FEC ID number of contributing federal political committee. C			
Name of Employer AUGUSTA AEROSPACE	Occupation EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1850.00		

Full Name (Last, First, Middle Initial) C. VINCENT GENOVESE		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2006	
Mailing Address 3050 RED LION RD.		Transaction ID: SA11A1.6606	
City PHILADELPHIA	State PA	Zip Code 19114	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AUGUSTA AEROSPACE	Occupation EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1950.00		

SUBTOTAL of Receipts This Page (optional) ▶	2450.00
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 18 / 50
	<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)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
John P. Hagan

Mailing Address 2323 Fairway Rd.

City State Zip Code
Huntingdon Valley PA 19006

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

Name of Employer US Financial Mortgage Service
Occupation Trustee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.6615

Amount of Each Receipt this Period
700.00

B. Full Name (Last, First, Middle Initial)
William A. Harvey

Mailing Address 260 S. Broad St.

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Klehr Harrison Harvey Brandburg & Elle
Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.6618

Amount of Each Receipt this Period
700.00

C. Full Name (Last, First, Middle Initial)
Jeanine Jewell

Mailing Address 1100 Baily Dr.

City State Zip Code
Phoenixville PA 19460

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

Name of Employer NEXUS Payments
Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 0 / 2 0 0 6

Transaction ID: SA11A1.6620

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
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 19 / 50
	<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)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
Law Offices of Vincent B. Mancini & Associates

Mailing Address 414 E. Baltimore Ave.

City State Zip Code
Media PA 19063

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 03 / 2006

Transaction ID: SA11A1.6628

Amount of Each Receipt this Period
1000.00

Attributed to Vincent Mancini

B. Full Name (Last, First, Middle Initial)
VINCENT MANCINI

Mailing Address 414 E. BALTIMORE PIKE

City State Zip Code
MEDIA PA 19063

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

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 03 / 2006

Transaction ID: SA11A1.6628.0

Amount of Each Receipt this Period
1000.00

Attributed from Law Offices

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Law Offices of Vincent B. Mancini & Associates

Mailing Address 414 E. Baltimore Ave.

City State Zip Code
Media PA 19063

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 03 / 2006

Transaction ID: SA11A1.6629

Amount of Each Receipt this Period
350.00

Attributed to Vincent Mancini

SUBTOTAL of Receipts This Page (optional)	▶	1350.00
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 20 / 50
	<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)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
VINCENT MANCINI

Mailing Address 414 E. BALTIMORE PIKE

City MEDIA State PA Zip Code 19063

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
03 / 03 / 2006

Transaction ID: SA11A1.6629.0

Amount of Each Receipt this Period
350.00

Attributed from Law Offices

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Marco P. Lentini

Mailing Address 157 W. Browning Rd.

City Bellmawr State NJ Zip Code 08031

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

Name of Employer Avanti Food Corp. Occupation Information Requested-Best Efforts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
02 / 24 / 2006

Transaction ID: SA11A1.6630

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
Vincent Mallardi

Mailing Address The Drake
1512 Spruce Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer Information Requested-Best Efforts Occupation Canadian Consulate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
03 / 03 / 2006

Transaction ID: SA11A1.6639

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)	700.00
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 21 / 50
	<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)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ill Anthony V. Mannino

Mailing Address 1420 Locust Street, Unit 207

City Philadelphia State PA Zip Code 19102

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

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

Transaction ID: SA11A1.6643

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
STEPHEN L. MARMER

Mailing Address 504 ADDISON CT.

City PHILADELPHIA State PA Zip Code 19147

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

Name of Employer Occupation
E. FRANK HOPKINS CO. EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	0	/	2	0	0	6

Transaction ID: SA11A1.6644

Amount of Each Receipt this Period
1850.00

C. Full Name (Last, First, Middle Initial)
Donna Massanova

Mailing Address 2022 Shunk St.

City Philadelphia State PA Zip Code 19145

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

Name of Employer Occupation
Parente Randolph, LLC CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	0	/	2	0	0	6

Transaction ID: SA11A1.6646

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)	▶	2550.00
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 22 / 50		
	<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

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

A. Full Name (Last, First, Middle Initial)
Donna Massanova

Mailing Address 2022 Shunk St.

City Philadelphia State PA Zip Code 19145

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

Name of Employer Parente Randolph, LLC Occupation CPA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2006

Transaction ID: SA11A1.6647

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Anthony F. Naccarato

Mailing Address 4514 Princeton Ave.

City Philadelphia State PA Zip Code 19135-1842

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

Name of Employer O'Donnell & Naccarato Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2150.00

Date of Receipt
MM / DD / YYYY
02 / 17 / 2006

Transaction ID: SA11A1.6655

Amount of Each Receipt this Period
2150.00

C. Full Name (Last, First, Middle Initial)
Kathleen J. O'Leary

Mailing Address 2223 S. Broad St.

City Philadelphia State PA Zip Code 19148

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

Name of Employer O'Leary Funeral Home Occupation Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2006

Transaction ID: SA11A1.6659

Amount of Each Receipt this Period
700.00

SUBTOTAL of Receipts This Page (optional)	▶	3050.00
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 23 / 50
	<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. Kathleen J. O'Leary		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 2223 S. Broad St.		Transaction ID: SA11A1.6660	
City Philadelphia	State PA	Zip Code 19148	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer O'Leary Funeral Home	Occupation Funeral Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) B. SANDRA PALERMO		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6	
Mailing Address 1443 REVELATION RD.		Transaction ID: SA11A1.6663	
City MEADOWBROOK	State PA	Zip Code 19046	Amount of Each Receipt this Period 2545.00
FEC ID number of contributing federal political committee. C			
Name of Employer MULLER, INC.	Occupation EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2545.00		

Full Name (Last, First, Middle Initial) C. C. John Palumbo		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 120 Riverside Dr.		Transaction ID: SA11A1.6665	
City Elkton	State MD	Zip Code 21921	Amount of Each Receipt this Period 1750.00
FEC ID number of contributing federal political committee. C			
Name of Employer Palumbo's Car Care	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00		

SUBTOTAL of Receipts This Page (optional) ▶	4495.00
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 24 / 50
	<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)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
Pendino Construction, LLC

Mailing Address PO Box 674

City State Zip Code
Haddonfield NJ 08033

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2006

Transaction ID: SA11A1.6673

Amount of Each Receipt this Period
550.00

B. Full Name (Last, First, Middle Initial)
Robert Pendino

Mailing Address P.O. Box 674

City State Zip Code
Haddonfield NE 08033

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

Name of Employer Occupation
Pendino Construction, LLC Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2005

Transaction ID: SA11A1.6673.0

Amount of Each Receipt this Period
550.00

Attributed

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Annamarie Phillips

Mailing Address 240 Park Place

City State Zip Code
Media PA 19063

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

Name of Employer Occupation
Information Requested-Best Efforts Information Requested-Best Efforts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 03 / 2006

Transaction ID: SA11A1.6679

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)	▶	900.00
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 25 / 50
	<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. Dominic A. Pileggi		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006	
Mailing Address 18 West 2nd Street		Transaction ID: SA11A1.6681	
City State Zip Code Media PA 19063	Amount of Each Receipt this Period 575.00		
FEC ID number of contributing federal political committee. C			
Name of Employer D. Pileggi & Sons	Occupation Builder		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00		

Full Name (Last, First, Middle Initial) B. Francis X. Pileggi		Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2006	
Mailing Address 5 Fox Chase Rd.		Transaction ID: SA11A1.6686	
City State Zip Code Malvern PA 19355	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Fox Rothschild, LLP	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Jr. Joseph P. Possenti		Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2006	
Mailing Address 601 Tryens Rd.		Transaction ID: SA11A1.6688	
City State Zip Code Aston PA 19014	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Joseph P. Possenti, PC	Occupation Accountant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

SUBTOTAL of Receipts This Page (optional) ▶	1775.00
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 26 / 50
	<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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. Joseph M. Procacci		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 6	
Mailing Address 1103 Golf Rd.		Transaction ID: SA11A1.6690	
City Riverton	State NJ	Zip Code 08077-2204	Amount of Each Receipt this Period 2250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Procacci Brothers	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00		

Full Name (Last, First, Middle Initial) B. Anthony R. Radwanski		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6	
Mailing Address 5040 Grant Ave.		Transaction ID: SA11A1.6693	
City Philadelphia	State PA	Zip Code 19114	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. C			
Name of Employer City of Philadelphia	Occupation Communications Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00		

Full Name (Last, First, Middle Initial) C. Alex A. Rigolizzo		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6	
Mailing Address 781 Fawnhill Rd.		Transaction ID: SA11A1.6700	
City Broomall	State PA	Zip Code 19008	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Toews Corporation	Occupation COO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	2700.00
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 27 / 50
	<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

A. Full Name (Last, First, Middle Initial)
William J. Santora

Mailing Address 1018 Childs Ave.

City State Zip Code
Drexel Hill PA 19026

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

Name of Employer Occupation
A & E Construction Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 03 / 2006

Transaction ID: SA11A1.6703

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
MARIA SANTORO

Mailing Address 991 N. GRANGE AVE

City State Zip Code
COLLEGEVILLE PA 19426

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

Name of Employer Occupation
SANTORO TILE & MARBLE EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 17 / 2006

Transaction ID: SA11A1.6704

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
MARIA SANTORO

Mailing Address 991 N. GRANGE AVE

City State Zip Code
COLLEGEVILLE PA 19426

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

Name of Employer Occupation
SANTORO TILE & MARBLE EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 17 / 2006

Transaction ID: SA11A1.6705

Amount of Each Receipt this Period
50.00

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: (check only one)	PAGE 28 / 50
	<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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. MARIA SANTORO		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 6
Mailing Address 991 N. GRANGE AVE		Transaction ID: SA11A1.6706
City State Zip Code COLLEGEVILLE PA 19426	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation SANTORO TILE & MARBLE EXECUTIVE		
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. Jennifer Schalleur		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 6
Mailing Address 201 Summerwind Lane		Transaction ID: SA11A1.6708
City State Zip Code Harleysville PA 19438	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Christo Consulting, LLC IT Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. ANDREW J. SCUTTI		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 6
Mailing Address 1348 ARTHUR RD.		Transaction ID: SA11A1.6713
City State Zip Code MAPLE GLEN PA 19002	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation DALE CORPORATION DIRECTOR OF SAFETY & HEALTH		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

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 29 / 50
	<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)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
ANDREW J. SCUTTI

Mailing Address 1348 ARTHUR RD.

City State Zip Code
MAPLE GLEN PA 19002

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

Name of Employer Occupation
DALE CORPORATION DIRECTOR OF SAFETY & HEALTH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2006

Transaction ID: SA11A1.6711

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
Frederick A. Stampone

Mailing Address 1017 Herkness Dr.

City State Zip Code
Meadowbrook PA 19046

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

Name of Employer Occupation
Pep Boys Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1850.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 17 / 2006

Transaction ID: SA11A1.6715

Amount of Each Receipt this Period
1850.00

C. Full Name (Last, First, Middle Initial)
Joseph P. Stampone

Mailing Address 1390 Tanglewood Drive

City State Zip Code
North Wales PA 19454

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

Name of Employer Occupation
Stampone, D'Angelo & Renzi Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3150.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 03 / 2006

Transaction ID: SA11A1.6717

Amount of Each Receipt this Period
3150.00

SUBTOTAL of Receipts This Page (optional)	▶	5075.00
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 30 / 50
	<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 P. Stampone		Date of Receipt M M / D D / Y Y Y Y Y 03 / 03 / 2006
Mailing Address 1390 Tanglewood Drive		Transaction ID: SA11A1.6718
City State Zip Code North Wales PA 19454	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00
Name of Employer Stampone, D'Angelo & Renzi	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3250.00	

Full Name (Last, First, Middle Initial) B. J. Brett Studner		Date of Receipt M M / D D / Y Y Y Y Y 02 / 20 / 2006
Mailing Address 2 W. Lafayette St.		Transaction ID: SA11A1.6723
City State Zip Code Norristown PA 19401	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer Citizens Clair Insurance Group	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. J. Brett Studner		Date of Receipt M M / D D / Y Y Y Y Y 02 / 27 / 2006
Mailing Address 2 W. Lafayette St.		Transaction ID: SA11A1.6722
City State Zip Code Norristown PA 19401	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer Citizens Clair Insurance Group	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1350.00
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 31 / 50
	<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)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
Carol Tamburino

Mailing Address 3 Sea Side Ct.

City Margate State NJ Zip Code 08402

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

Name of Employer Turner Construction Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2006

Transaction ID: SA11A1.6724

Amount of Each Receipt this Period
200.00

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

Mailing Address 700 W. GERMANTOWN PIKE

City E. NORRITON State PA Zip Code 19403

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

Name of Employer CONTINENTAL REALTY Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2006

Transaction ID: SA11A1.6726

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JOSEPH TARANTINO

Mailing Address 700 W. GERMANTOWN PIKE

City E. NORRITON State PA Zip Code 19403

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

Name of Employer CONTINENTAL REALTY Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 09 / 2006

Transaction ID: SA11A1.6727

Amount of Each Receipt this Period
100.00

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 32 / 50
	<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)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial) Fred Tropea Mailing Address PO Box 31 City State Zip Code Glen Mills PA 19342 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 6 Transaction ID: SA11A1.6731 Amount of Each Receipt this Period 1050.00
Name of Employer: Ruggiero Construction Development LLC Occupation: VP of Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1050.00		

B. Full Name (Last, First, Middle Initial) Fred Tropea Mailing Address PO Box 31 City State Zip Code Glen Mills PA 19342 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6 Transaction ID: SA11A1.6732 Amount of Each Receipt this Period 25.00
Name of Employer: Ruggiero Construction Development LLC Occupation: VP of Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1075.00		

C. Full Name (Last, First, Middle Initial) Kenneth R. Vennera Mailing Address 133 Discovery Court City State Zip Code Norristown PA 19401 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6 Transaction ID: SA11A1.6738 Amount of Each Receipt this Period 1750.00
Name of Employer: Eidentify Inc. Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1950.00		

SUBTOTAL of Receipts This Page (optional)	2825.00
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 33 / 50
	(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)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kenneth R. Vennera

Mailing Address 133 Discovery Court

City State Zip Code
Norristown PA 19401

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

Name of Employer Occupation
Edentify Inc. Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1980.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 09 / 2006

Transaction ID: SA11A1.6736

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Anthony D. Zingarelli

Mailing Address 2506 S. 22nd St.

City State Zip Code
Philadelphia PA 19145

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

Name of Employer Occupation
ZAC Management Group, LLC Healthcare

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3700.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 24 / 2006

Transaction ID: SA11A1.6744

Amount of Each Receipt this Period
3700.00

SUBTOTAL of Receipts This Page (optional)	▶	3730.00
TOTAL This Period (last page this line number only)	▶	54003.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 50
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

A. Full Name (Last, First, Middle Initial)
Cement Masons Local #592 PAC

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 ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	0		2	0	0	6

Transaction ID: SA11C.6553

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Committee to Elect Mayor Joseph DiGirolamo

Mailing Address 3982 Grace Ave.

City State Zip Code
Bensalem PA 19020

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

Name of Employer Bensalem Township Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	0	6

Transaction ID: SA11C.6560

Amount of Each Receipt this Period
325.00

C. Full Name (Last, First, Middle Initial)
Friends of Mario Civera

Mailing Address PO Box 682

City State Zip Code
Pilgrim Gardens PA 19026

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	0	6

Transaction ID: SA11C.6596

Amount of Each Receipt this Period
1225.00

SUBTOTAL of Receipts This Page (optional)	▶	2050.00
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 35 / 50
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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. Friends to Elect Christine M. Tartaglione		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 6	
Mailing Address 1407 Vankirk St.		Transaction ID: SA11C.6598	
City Philadelphia	State PA	Amount of Each Receipt this Period 200.00	
Zip Code 19149-3327			
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Fumo for Senate		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6	
Mailing Address 1208 Tasker Street, 2nd Floor		Transaction ID: SA11C.6601	
City Philadelphia	State PA	Amount of Each Receipt this Period 2050.00	
Zip Code 19148			
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2050.00	

Full Name (Last, First, Middle Initial) C. Local 98 IBEW Committee on Political Education		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6	
Mailing Address 1719 Spring Garden St.		Transaction ID: SA11C.6634	
City Philadelphia	State PA	Amount of Each Receipt this Period 3000.00	
Zip Code 19130			
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3150.00	

SUBTOTAL of Receipts This Page (optional) ▶	5250.00
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 36 / 50
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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. PECO PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 2301 Market St. PO Box 8699		Transaction ID: SA11C.6669	
City Philadelphia State PA Zip Code 19101-8699	Amount of Each Receipt this Period 550.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

Full Name (Last, First, Middle Initial) B. Reinforced Iron Workers Riggers & Machinery Movers		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address Local Union #45 2433 Reed St.		Transaction ID: SA11C.6695	
City Philadelphia State PA Zip Code 19146	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Responsible Citizens		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 7 / 2 0 0 6	
Mailing Address PO Box 12090		Transaction ID: SA11C.6697	
City Harrisburg State PA Zip Code 17108-2090	Amount of Each Receipt this Period 1350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00		

SUBTOTAL of Receipts This Page (optional) ▶	2200.00
TOTAL This Period (last page this line number only) ▶	9500.00

**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 37 / 50

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial)

A. AUDIO VISUAL COMMUNICATIONS

Mailing Address 435 CROOKED LANE

City KING OF PRUSSIA State PA Zip Code 19406

Purpose of Disbursement
EVENT COSTS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6496

Date of Disbursement

03 / 17 / 2006

Amount of Each Disbursement this Period

765.00

B. BANKCARD/FIRST PENN BANK

Mailing Address 1835 MARKET ST

City PHILADELPHIA State PA Zip Code 19103

Purpose of Disbursement
CREDIT CARD FEES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6461

Date of Disbursement

02 / 02 / 2006

Amount of Each Disbursement this Period

99.27

C. BANKCARD/FIRST PENN BANK

Mailing Address 1835 MARKET ST

City PHILADELPHIA State PA Zip Code 19103

Purpose of Disbursement
CREDIT CARD FEES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6464

Date of Disbursement

02 / 23 / 2006

Amount of Each Disbursement this Period

2354.13

SUBTOTAL of Disbursements This Page (optional) ►

3218.40

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 38 / 50

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. BANKCARD/FIRST PENN BANK		Transaction ID: SB21B.6465 Date of Disbursement																					
Mailing Address 1835 MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		2	3		2	0	0	6														
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD FEES		Category/ Type	154.13																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) B. BANKCARD/FIRST PENN BANK		Transaction ID: SB21B.6479 Date of Disbursement																					
Mailing Address 1835 MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		2	8		2	0	0	6														
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD FEES		Category/ Type	37.26																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) C. BANKCARD/FIRST PENN BANK		Transaction ID: SB21B.6480 Date of Disbursement																					
Mailing Address 1835 MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		0	2		2	0	0	6														
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD FEES		Category/ Type	4.48																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	▶	195.87
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 39 / 50

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial)		Transaction ID: SB21B.6481																					
A. BANKCARD/FIRST PENN BANK		Date of Disbursement																					
Mailing Address 1835 MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		0	2		2	0	0	6														
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD FEES		Category/ Type	1.25																				
Candidate Name																							
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

Full Name (Last, First, Middle Initial)		Transaction ID: SB21B.6482																					
B. BANKCARD/FIRST PENN BANK		Date of Disbursement																					
Mailing Address 1835 MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		0	2		2	0	0	6														
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK SERVICE CHARGES		Category/ Type	15.00																				
Candidate Name																							
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

Full Name (Last, First, Middle Initial)		Transaction ID: SB21B.6485																					
C. BANKCARD/FIRST PENN BANK		Date of Disbursement																					
Mailing Address 1835 MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		0	2		2	0	0	6														
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD FEES		Category/ Type	95.26																				
Candidate Name																							
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

SUBTOTAL of Disbursements This Page (optional)	▶	111.51
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 40 / 50

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. BANKCARD/FIRST PENN BANK		Transaction ID: SB21B.6487	
Mailing Address 1835 MARKET ST		Date of Disbursement MM / DD / YYYY 03 / 06 / 2006	
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period 66.38
Purpose of Disbursement CREDIT CARD FEES		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. BANKCARD/FIRST PENN BANK		Transaction ID: SB21B.6488	
Mailing Address 1835 MARKET ST		Date of Disbursement MM / DD / YYYY 03 / 10 / 2006	
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period 0.16
Purpose of Disbursement CREDIT CARD FEES		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. BANKCARD/FIRST PENN BANK		Transaction ID: SB21B.6489	
Mailing Address 1835 MARKET ST		Date of Disbursement MM / DD / YYYY 03 / 10 / 2006	
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period 8.44
Purpose of Disbursement CREDIT CARD FEES		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	74.98
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 41 / 50

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. BANKCARD/FIRST PENN BANK		Transaction ID: SB21B.6490	
Mailing Address 1835 MARKET ST		Date of Disbursement MM / DD / YYYY 03 / 10 / 2006	
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period 26.51
Purpose of Disbursement CREDIT CARD FEES		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. BANKCARD/FIRST PENN BANK		Transaction ID: SB21B.6495	
Mailing Address 1835 MARKET ST		Date of Disbursement MM / DD / YYYY 03 / 13 / 2006	
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period 0.26
Purpose of Disbursement CREDIT CARD FEES		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. BANKCARD/FIRST PENN BANK		Transaction ID: SB21B.6498	
Mailing Address 1835 MARKET ST		Date of Disbursement MM / DD / YYYY 03 / 17 / 2006	
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period 10.00
Purpose of Disbursement BANK SERVICE CHARGES		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	▶	36.77
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 42 / 50

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. BANKCARD/FIRST PENN BANK		Transaction ID: SB21B.6499 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 6
Mailing Address 1835 MARKET ST		Amount of Each Disbursement this Period 0.26
City PHILADELPHIA State PA Zip Code 19103	Purpose of Disbursement CREDIT CARD FEES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. CHRISTO CONSULTING		Transaction ID: SB21B.6456 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 6
Mailing Address		Amount of Each Disbursement this Period 294.75
City State Zip Code	Purpose of Disbursement WEBSITE DESIGN & MAINTENANCE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. DAVE PASCAL		Transaction ID: SB21B.6477 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 6
Mailing Address 7 MADISON DR.		Amount of Each Disbursement this Period 320.00
City WILLOW GROVE State PA Zip Code 19090	Purpose of Disbursement EVENT COSTS Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	615.01
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. FRANK MARCO		Transaction ID: SB21B.6466 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 6
Mailing Address 7 MADISON RD.		Amount of Each Disbursement this Period 320.00
City WILLOW GROVE	State PA	
Zip Code 19090	Purpose of Disbursement EVENT COSTS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. KEVIN ROSENBERG		Transaction ID: SB21B.6500 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 526 N. FRANKLIN ST.		Amount of Each Disbursement this Period 325.00
City POTTSTOWN	State PA	
Zip Code 19464	Purpose of Disbursement EVENT COSTS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. LA COLLINA		Transaction ID: SB21B.6445 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 6
Mailing Address 37-41 ASHLAND AVE.		Amount of Each Disbursement this Period 330.71
City BELMONT HILLS	State PA	
Zip Code 19004	Purpose of Disbursement Board Meeting Expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	975.71
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 44 / 50

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. LUIGI & GIOVANNI CATERERS		Transaction ID: SB21B.6486 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address 3601 CHAPEL ROAD		Amount of Each Disbursement this Period 4413.50
City NEWTOWN SQUARE State PA Zip Code 19073	Purpose of Disbursement EVENT COSTS	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. MARTIN BENEDETTI		Transaction ID: SB21B.6474 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 6
Mailing Address 7 MADISON RD.		Amount of Each Disbursement this Period 320.00
City WILLOW GROVE State PA Zip Code 19090	Purpose of Disbursement EVENT COSTS	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. MIKE ELIA		Transaction ID: SB21B.6470 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 6
Mailing Address 7 MADISON RD.		Amount of Each Disbursement this Period 320.00
City WILLOW GROVE State PA Zip Code 19090	Purpose of Disbursement EVENT COSTS	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5053.50
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 45 / 50

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. MIKE MOUNTAIN PHOTOGRAPHY		Transaction ID: SB21B.6502	
Mailing Address 737 N. EASTON RD.		Date of Disbursement MM / DD / YYYY 03 / 31 / 2006	
City GLENSIDE	State PA	Zip Code 19038	Amount of Each Disbursement this Period 465.40
Purpose of Disbursement EVENT COSTS		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Philadelphia Public Record		Transaction ID: SB21B.6440	
Mailing Address 1330 W. Ritner St.		Date of Disbursement MM / DD / YYYY 01 / 09 / 2006	
City Philadelphia	State PA	Zip Code 19148	Amount of Each Disbursement this Period 235.00
Purpose of Disbursement Advertising		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. PRIESTLY PRINTERS		Transaction ID: SB21B.6504	
Mailing Address 233-45 N. JUNIPER ST		Date of Disbursement MM / DD / YYYY 03 / 31 / 2006	
City PHILADELPHIA	State PA	Zip Code 19107	Amount of Each Disbursement this Period 4274.65
Purpose of Disbursement PRINTING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	4975.05
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 46 / 50

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. PRIESTLY PRINTERS		Transaction ID: SB21B.6505 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 233-45 N. JUNIPER ST		Amount of Each Disbursement this Period 2394.80
City PHILADELPHIA State PA Zip Code 19107		
Purpose of Disbursement PRINTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. ROBERT TAYLOR		Transaction ID: SB21B.6472 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 6
Mailing Address 2456 ELDON AVE.		Amount of Each Disbursement this Period 320.00
City DREXEL HILL State PA Zip Code 19026		
Purpose of Disbursement EVENT COSTS	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. SHERATON SOCIETY HILL		Transaction ID: SB21B.6506 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address ONE DOCK ST.		Amount of Each Disbursement this Period 27588.88
City PHILADELPHIA State PA Zip Code 19106		
Purpose of Disbursement EVENT COSTS	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	30303.68
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
National Italian American Political Action Committee

Full Name (Last, First, Middle Initial) A. TINA KATSOS		Transaction ID: SB21B.6468 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 6	
Mailing Address 7 MADISON RD.		Amount of Each Disbursement this Period 320.00	
City WILLOW GROVE	State PA		Zip Code 19090
Purpose of Disbursement EVENT COSTS	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) B. UTA ASSOCIATES		Transaction ID: SB21B.6438 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 6	
Mailing Address 1205 LOCUST ST SUITE 100		Amount of Each Disbursement this Period 6518.21	
City PHILADELPHIA	State PA		Zip Code 19107
Purpose of Disbursement Fundraising Commissions	Category/ Type 003		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) C. UTA ASSOCIATES		Transaction ID: SB21B.6439 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 6	
Mailing Address 1205 LOCUST ST SUITE 100		Amount of Each Disbursement this Period 1250.00	
City PHILADELPHIA	State PA		Zip Code 19107
Purpose of Disbursement Fundraising Commission	Category/ Type 003		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

SUBTOTAL of Disbursements This Page (optional)	8088.21
TOTAL This Period (last page this line number only)	53648.69

**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 48 / 50

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<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. FRIENDS OF FARNESE

Mailing Address 1420 LOCUST STREET
SUITE 20R

City PHILADELPHIA State PA Zip Code 19102

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6463

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE C (FEC Form 3X)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 49 / 50 FOR LINE 13 OF FORM 3X
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LOANS

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:
M M 06 D D 15 Y Y Y Y 2001		% (apr)	<input type="checkbox"/> Yes <input checked="" 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: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional) ▶	<input style="width: 100%;" type="text" value="7500.00"/>
TOTALS This Period (last page in this line only) ▶	<input style="width: 100%;" type="text"/>
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 50 / 50 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 City Line Ave, Suite 770	
City Bala Cynwyd State PA ZIP Code 19004	

Original Amount of Loan <input style="width: 90%;" type="text" value="2500.00"/>	Cumulative Payment To Date <input style="width: 90%;" type="text" value="0.00"/>	Balance Outstanding at Close of This Period <input style="width: 90%;" type="text" value="2500.00"/>
---	---	---

TERMS

Date Incurred <input style="width: 100%;" type="text" value="MM 03 DD 17 YYYY 2001"/>	Date Due <input style="width: 90%;" type="text"/>	Interest Rate <input style="width: 90%;" type="text"/> % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" 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: <input style="width: 90%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 90%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 90%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 90%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 90%;" type="text" value="2500.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 90%;" type="text" value="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.	