

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL ROOM
2002 FEB 25 P 1:10

Office Use Only

1. NAME OF COMMITTEE (in full) **EDC CORPORATION PAC** USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines. **12FE4M5**

ADDRESS (number and street) **60 E. 42nd Street Suite 5010**
 Check if different than previously reported. (ACC) **New York** **NY** **10165**

2. FEC IDENTIFICATION NUMBER **C 000329316** CITY STATE ZIP CODE

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

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

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on

/ /

in the State of

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

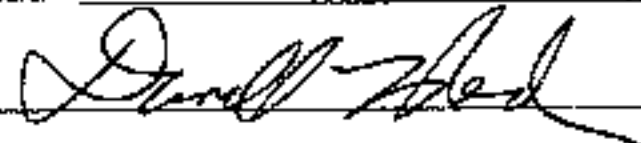
/ /

In the State of

5. Covering Period **07** / **01** / **2001** through **12** / **31** / **2001**

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 **DARRELL L. REED**

Signature of Treasurer 

Date **01** / **28** / **2002**

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

Office Use Only

FEC FORM 3X
(Revised 1/01)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name
EDO CORPORATION PAC

Report Covering the Period: From: 07 / 01 / 2001 To: 12 / 31 / 2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2001		26,574.35
(b) Cash on Hand at Beginning of Reporting Period	31,596.49	
(c) Total Receipts (from Line 19)	7,690.81	16,558.56
(d) Subtotal (add Lines B(b) and B(c) for Column A and Lines 6(a) and 6(c) for Column B)	39,287.30	43,132.91
7. Total Disbursements (from Line 30)	1,500.00	5,345.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	37,787.30	37,787.30
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	-	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	-	

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name

EDO CORPORATION PAC

Report Covering the Period:

From:

07 01 2001

To:

12 31 2001

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)	4,256.00	
(ii) Unitemized	3,429.75	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	7,685.75	16,553.50
(b) Political Party Committees	-	-
(c) Other Political Committees (such as PACs)	-	-
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4)	7,685.75	16,553.50
12. Transfers From Affiliated/Other Party Committees(C.O.D. 29,2953)	5.06	5.06
13. All Loans Received	-	-
14. Loan Repayments Received	-	-
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 86, page 4)	-	-
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	-	-
17. Other Federal Receipts (Dividends, Interest, etc.)	-	-
18. Transfers from Nonfederal Account for Joint Activity	-	-
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	7,690.81	16,558.56
20. Total Federal Receipts (subtract Line 18 from Line 19)	7,690.81	16,558.56

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/01)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	-	-
(ii) Non-Federal Share	-	-
(b) Other Federal Operating Expenditures	-	-
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	-	-
22. Transfers to Affiliated/Other Party Committees	-	-
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,500.00	5,345.61
24. Independent Expenditures (use Schedule E)	-	-
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)	-	-
26. Loan Repayments Made	-	-
27. Loans Made	-	-
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	-	-
(b) Political Party Committees	-	-
(c) Other Political Committees (such as PACs)	-	-
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	-	-
29. Other Disbursements	-	-
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	1,500.00	5,345.61
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	1,500.00	5,345.61

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans) (from Line 11(d), page 3)	7,685.75	16,553.50
33. Total Contribution Refunds (from Line 28(d))	-	-
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	7,685.75	16,553.50
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	-	-
36. Offsets to Operating Expenditures (from Line 15, page 3)	-	-
37. Net Operating Expenditures (subtract Line 36 from Line 35)	-	-

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

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

FOR LINE NUMBER: (check only one)		PAGE 1 OF 9	
<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)
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial) A. GENZER, MARVIN D.		Date of Receipt PAYROLL DEDUCTION [] / [] / []
Mailing Address 317 EDISTO COURT		Amount of Each Receipt this Period [] (\$20.00 WEEKLY)
City CHAPEL HILL	State NC	
FEC ID number of contributing federal political committee []		Amount of Each Receipt this Period [] (\$20.00 WEEKLY)
Name of Employer EDO CORPORATION	Occupation V.P. GENERAL COUNSEL/SEC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ [] 380.00	

Full Name (Last, First, Middle Initial) B. SMITH, JAMES M.		Date of Receipt PAYROLL DEDUCTION [] / [] / []
Mailing Address 35 ARROWHEAD COURT		Amount of Each Receipt this Period [] 250.00 (\$10.00 WEEKLY)
City NORTH HILLS	State NY	
FEC ID number of contributing federal political committee []		Amount of Each Receipt this Period [] 250.00 (\$10.00 WEEKLY)
Name of Employer EDO CORPORATION	Occupation PRESIDENT/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ [] 520.00	

Full Name (Last, First, Middle Initial) C. REED, DARRELL L.		Date of Receipt PAYROLL DEDUCTION [] / [] / []
Mailing Address P.O. BOX 564		Amount of Each Receipt this Period [] 250.00 (\$10.00 WEEKLY)
City DEER PARK	State NY	
FEC ID number of contributing federal political committee []		Amount of Each Receipt this Period [] 250.00 (\$10.00 WEEKLY)
Name of Employer EDO CORPORATION	Occupation V.P./CFO/TREASURER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ [] 520.00	

SUBTOTAL of Receipts This Page (optional).....▶	[] 500.00
TOTAL This Period (last page this line number only).....▶	[] 500.00

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

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

FOR LINE NUMBER: (check only one)		PAGE 2 OF 9	
<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	<input type="checkbox"/> 18	<input type="checkbox"/> 19	<input type="checkbox"/> 20

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NAME OF COMMITTEE (in Full)
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial) A. OTTO, FRANK W.		Date of Receipt PAYROLL DEDUCTION [] [] []	
Mailing Address 4 CEDAR ROAD		Amount of Each Receipt this Period 500.00 (\$20.00 WEEKLY)	
City WADING RIVER	State NY	Zip Code 11792	
FEC ID number of contributing federal political committee. C []			
Name of Employer EDO CORPORATION	Occupation GROUP V.P.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00		

Full Name (Last, First, Middle Initial) B. CANGELOSI, JOSEPH		Date of Receipt PAYROLL DEDUCTION [] [] []	
Mailing Address 6 SWIRL LANE		Amount of Each Receipt this Period 350.00 (\$10.00 WEEKLY)	
City LEVITTOWN	State NY	Zip Code 11756	
FEC ID number of contributing federal political committee. C []			
Name of Employer EDO CORPORATION	Occupation GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 692.00		

Full Name (Last, First, Middle Initial) C. HYDE, MILO		Date of Receipt PAYROLL DEDUCTION [] [] []	
Mailing Address 713 DONNINGTON DRIVE		Amount of Each Receipt this Period 520.00 (\$20.00 WEEKLY)	
City CHESAPEAKE	State VA	Zip Code 23320	
FEC ID number of contributing federal political committee. C []			
Name of Employer EDO CORPORATION	Occupation GROUP V.P.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00		

SUBTOTAL of Receipts This Page (optional) ▶

1370.00

TOTAL This Period (last page this line number only) ▶

[]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3 OF 9
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 12
	<input type="checkbox"/> 11b	<input type="checkbox"/> 13
	<input type="checkbox"/> 11c	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 18

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NAME OF COMMITTEE (In Full)
EDO CORPORATION PAC

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

Mailing Address
624 WHITEHURST LANDING ROAD

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt **PAYROLL DEDUCTION**
[] [] []

Amount of Each Receipt this Period
260.00
(\$10.00 WEEKLY)

B. Full Name (Last, First, Middle Initial)
WOOD, DANIEL S.

Mailing Address
5309 ROSAER PLACE

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

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

Name of Employer **EDO CORPORATION** Occupation **MARKETING**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt **PAYROLL DEDUCTION**
[] [] []

Amount of Each Receipt this Period
260.00
(\$10.00 WEEKLY)

C. Full Name (Last, First, Middle Initial)
KARL R. BLUMENBERG

Mailing Address
88 OPAL STREET

City **ELMONT** State **NY** Zip Code **11003**

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

Name of Employer **EDO CORPORATION** Occupation **PROGRAMS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt **PAYROLL DEDUCTION**
[] [] []

Amount of Each Receipt this Period
115.00
(\$5.00 WEEKLY)

SUBTOTAL of Receipts This Page (optional) ▶ **635.00**

TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 4 OF 9	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial) A. HARVEY N. KREISBERG		Date of Receipt PAYROLL DEDUCTION [] / [] / []
Mailing Address 93 TAHULAH LANE		Amount of Each Receipt this Period 100.00 (\$10.00 WEEKLY)
City WEST ISLIP	State NY Zip Code 11795	
FEC ID number of contributing federal political committee. C		
Name of Employer EDO CORPORATION	Occupation V.P. BUSINESS DEVELOPMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00	

Full Name (Last, First, Middle Initial) B. JON A. ANDERSON		Date of Receipt PAYROLL DEDUCTION [] / [] / []
Mailing Address 5023 N. WASHINGTON BLVD		Amount of Each Receipt this Period 150.00 (\$6.00 WEEKLY)
City ARLINGTON	State VA Zip Code 22205	
FEC ID number of contributing federal political committee. C		
Name of Employer EDO CORPORATION	Occupation V.P. / WASHINGTON OPS.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.00	

Full Name (Last, First, Middle Initial) C. KARL M. SYGALL		Date of Receipt PAYROLL DEDUCTION [] / [] / []
Mailing Address 44 PATCHOGUE DRIVE		Amount of Each Receipt this Period 100.00 (\$4.00 WEEKLY)
City ROCKY POINT	State NY Zip Code 11778	
FEC ID number of contributing federal political committee. C		
Name of Employer EDO CORPORATION	Occupation PROGRAM MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00	

SUBTOTAL of Receipts This Page (optional)	350.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 9
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EDO CORPORATION PAC

A. DENNIS D. HANCOCK
Full Name (Last, First, Middle Initial)

Mailing Address
1120 AMBERDALE DRIVE

City **CHESAPEAKE** State **VA** Zip Code **23322**

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

Name of Employer **EDO CORPORATION** Occupation **ENGINEER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt **PAYROLL DEDUCTION**
[] [] []

Amount of Each Receipt this Period
130.00
(\$5.00 WEEKLY)

B. ERNEST J. LADEVÈZE
Full Name (Last, First, Middle Initial)

Mailing Address
612 WICKWOOD DRIVE

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

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

Name of Employer **EDO CORPORATION** Occupation **ENGINEER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt **PAYROLL DEDUCTION**
[] [] []

Amount of Each Receipt this Period
104.00
(\$4.00 WEEKLY)

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

Mailing Address
2125 DOVE RIDGE DRIVE

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

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

Name of Employer **EDO CORPORATION** Occupation **PROGRAM MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt **PAYROLL DEDUCTION**
[] [] []

Amount of Each Receipt this Period
104.00
(\$4.00 WEEKLY)

SUBTOTAL of Receipts This Page (optional) **338.00**

TOTAL This Period (last page this line number only) **338.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 9	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EDO CORPORATION PAC

A. CHARLES LUNDRIGAN

Full Name (Last, First, Middle Initial)
Mailing Address
942 WINCHESTER WAY
City CHESAPEAKE State VA Zip Code 23320

FEC ID number of contributing federal political committee: C

Name of Employer: EDO CORPORATION Occupation: ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt PAYROLL DEDUCTION
[] / [] / []

Amount of Each Receipt this Period
104.00
(\$4.00 WEEKLY)

B. TERRELL OTIS

Full Name (Last, First, Middle Initial)
Mailing Address
5001 36TH STREET
City ARLINGTON State VA Zip Code 22207-2962

FEC ID number of contributing federal political committee: C

Name of Employer: EDO CORPORATION Occupation: PROGRAMS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt PAYROLL DEDUCTION
[] / [] / []

Amount of Each Receipt this Period
130.00
(\$5.00 WEEKLY)

C. KEVIN HAYNES

Full Name (Last, First, Middle Initial)
Mailing Address
2170 COLONY ROAD
City JAMISON State PA Zip Code 18929

FEC ID number of contributing federal political committee: C

Name of Employer: EDO CORPORATION Occupation: TEST TECHNICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt PAYROLL DEDUCTION
[] / [] / []

Amount of Each Receipt this Period
104.00
(\$4.00 WEEKLY)

SUBTOTAL of Receipts This Page (optional) 338.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)	PAGE 7 OF 9
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EDO CORPORATION PAC

A. Full Name (Last, First, Middle Initial) PATRICIA D. COMISKEY		Date of Receipt PAYROLL DEDUCTION
Mailing Address 5 NEW STREET		<input type="text"/> / <input type="text"/> / <input type="text"/>
City GREAT RIVER	State NY	Zip Code 11739
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00 (\$4.00 WEEKLY)	
Name of Employer EDO CORPORATION	Occupation V.P./H.R.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00	

B. Full Name (Last, First, Middle Initial) BARRY FITZGERALD		Date of Receipt PAYROLL DEDUCTION
Mailing Address 29025 INDIAN RIDGE COURT		<input type="text"/> / <input type="text"/> / <input type="text"/>
City AGOURA HILLS	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 125.00 (\$5.00 WEEKLY)	
Name of Employer EDO CORPORATION	Occupation PRESIDENT-ANC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C. Full Name (Last, First, Middle Initial) GEORGE P. FOX JR.		Date of Receipt PAYROLL DEDUCTION
Mailing Address 8 EAST GATE LANE		<input type="text"/> / <input type="text"/> / <input type="text"/>
City OLD FIELD	State NY	Zip Code 11733
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00 (\$4.00 WEEKLY)	
Name of Employer EDO CORPORATION	Occupation GROUP V.P.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00	

SUBTOTAL of Receipts This Page (optional)	325.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 8 OF 9
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EDO CORPORATION PAC

A. Full Name (Last, First, Middle Initial)
ROBERT LUKACHINSKI

Mailing Address
135 OLD WINKLE POINT ROAD

City: EATONS NECK State: NY Zip Code: 11768

FEC ID number of contributing federal political committee: C

Name of Employer: EDO CORPORATION Occupation: GENERAL MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt: PAYROLL DEDUCTION
[] / [] / []

Amount of Each Receipt this Period
100.00
(\$4.00 WEEKLY)

B. Full Name (Last, First, Middle Initial)
PETER J. MCVEIGH

Mailing Address
10 THOMAS DRIVE

City: HAUPPAUGE State: NY Zip Code: 11798

FEC ID number of contributing federal political committee: C

Name of Employer: EDO CORPORATION Occupation: GENERAL MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt: PAYROLL DEDUCTION
[] / [] / []

Amount of Each Receipt this Period
100.00
(\$4.00 WEEKLY)

C. Full Name (Last, First, Middle Initial)
HENRY C. PACZKOWSKI

Mailing Address
75 EXECUTIVE DRIVE

City: MANHASSET HILLS State: NY Zip Code: 11040

FEC ID number of contributing federal political committee: C

Name of Employer: EDO CORPORATION Occupation: BUSINESS MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt: PAYROLL DEDUCTION
[] / [] / []

Amount of Each Receipt this Period
100.00
(\$4.00 WEEKLY)

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

TOTAL This Period (last page this line number only) ▶

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

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
EDO CORPORATION PAC

A. Full Name (Last, First, Middle Initial) EDUARDO F. PALACIO		Date of Receipt PAYROLL DEDUCTION [] [] []
Mailing Address 3 TONY DRIVE		Amount of Each Receipt this Period 100.00 (\$4.00 WEEKLY)
City KINGS PARK	State NY	
FEC ID number of contributing federal political committee. C []		
Name of Employer EDO CORPORATION	Occupation GENERAL MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00	

B. Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		[] [] []
City	State	Zip Code
FEC ID number of contributing federal political committee. C []		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

C. Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		[] [] []
City	State	Zip Code
FEC ID number of contributing federal political committee. C []		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number only)	4,255.00

**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)

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

PAGE 1 OF 1

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NAME OF COMMITTEE (In Full)
EDO CORPORATION PAC

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

Date of Disbursement
08 / 10 / 2001

Mailing Address
P.O. BOX 777

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

Purpose of Disbursement
FUNDRAISING EVENT

Candidate Name
STEVE ISRAEL

Office Sought: House Senate President
State: **NY** District: **2**

Disbursement For: Primary General Other (specify) ▼

Amount of Each Disbursement this Period
500.00

Category/Type

Full Name (Last, First, Middle Initial)
B. FRIENDS OF CAROLYN MCCARTHY

Date of Disbursement
10 / 09 / 2001

Mailing Address
P.O. BOX 190

City: **MINEOLA** State: **NY** Zip Code: **11501**

Purpose of Disbursement
2002 REELECTION CAMPAIGN

Candidate Name
CAROLYN MCCARTHY

Office Sought: House Senate President
State: **NY** District: **4**

Disbursement For: Primary General Other (specify) ▼

Amount of Each Disbursement this Period
500.00

Category/Type

Full Name (Last, First, Middle Initial)
C. FRIENDS OF CAROLYN MCCARTHY

Date of Disbursement
12 / 07 / 2001

Mailing Address
P.O. BOX 190

City: **MINEOLA** State: **NY** Zip Code: **11501**

Purpose of Disbursement
2002 REELECTION CAMPAIGN

Candidate Name
CAROLYN MCCARTHY

Office Sought: House Senate President
State: **NY** District: **4**

Disbursement For: Primary General Other (specify) ▼

Amount of Each Disbursement this Period
500.00

Category/Type

SUBTOTAL of Disbursements This Page (optional) **1,500.00**

TOTAL This Period (last page this line number only) **1,500.00**

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) <i>1-28-02</i>
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>cmv</i> PREPARER	<i>2-25-02</i> DATE PREPARED