

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER

2003 JUL 16 AM 11:13

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4MS

EDO CORPORATION PAC

ADDRESS (number and street)

60 EAST 42ND STREET 42ND FLOOR

Check if different than previously reported. (AGC)

NEW YORK

NY

10165

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

000329318

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(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 (12S)

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

2003

through

06

30

2003

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

Type or Print Name of Treasurer

WILLIAM J. PROST

Signature of Treasurer

William J. Prost

Date

07

30

2003

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 (Rev. 02/2003)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

EDC CORPORATION PAC

Report Covering the Period:

From:

01 01 2003

To:

06 30 2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2003		42,451.25
(b) Cash on Hand at Beginning of Reporting Period	42,451.25	
(c) Total Receipts (from Line 10)	12,178.93	12,178.93
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	54,630.18	54,630.18
7. Total Disbursements (from Line 9)	15,425.00	15,425.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	39,205.18	39,205.18
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 (Rev. 02/2003)

Write or Type Committee Name

EDO CORPORATION PAC

Report Covering the Period: From: **01 01 2003** To: **06 30 2003**

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)

4,593.00

(ii) Unitemized

7,585.93

(iii) TOTAL (add Line 11(a)(i) and (ii))

12,178.93

12,178.93

(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 33, page 5)

12,178.93

12,178.93

12. Transfers From Affiliated/Other Party Committees

-

-

13. All Loans Received

-

-

14. Loan Repayments Received

-

-

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)

-

-

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

-

-

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

-

-

18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)

-

-

(b) Levin Funds (from Schedule H5)

-

-

(c) Total Transfers (add 18(a) and 18(b))

-

-

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

12,178.93

12,178.93

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

12,178.93

12,178.93

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	15,425.00	15,425.00
24. Independent Expenditures (use Schedule E)	-	-
25. Coordinated Party Expenditures (2 U.S.C. §461a(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. Federal Election Activity (2 U.S.C. §431(20)):		
(a) Allocated Federal Election Activity (from Schedule H6):		
(i) Federal Share	-	-
(ii) "Levin" Share	-	-
(b) Federal Election Activity Paid Entirely With Federal Funds	-	-
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	-	-
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15,425.00	15,425.00
32. Total Federal Disbursements (subtract Line 21(a)(i) and Line 30(a)(i) from Line 31)	15,425.00	15,425.00

DETAILED SUMMARY PAGE
of Disbursements

Page 5

FEC Form 3X (Rev. 12/2009)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
32. Total Contributions (other than loans) (from Line 11(c), page 3)	12,178.93	12,178.93
34. Total Contribution Returns (from Line 28(d))	-	-
35. Net Contributions (other than loans) (subtract Line 34 from Line 32)	3,246.07	3,246.07
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	-	-
37. Offsets to Operating Expenditures (from Line 15, page 3)	-	-
38. Net Operating Expenditures (subtract Line 36 from Line 35)	3,246.07	3,246.07

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

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

FOR LINE NUMBER: PAGE 1 OF 4
 11a 11b 11c 12
 13 14 15 16 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. SMITH, JAMES N.

Mailing Address
35 ARROWHEAD COURT

City NORTH HILLS State NY Zip Code 11030

FEC ID number of contributing federal political committee: C

Name of Employer: EDO CORPORATION Occupation: CHMN/CEG/PRES.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date: 650 00

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

Amount of Each Receipt this Period: 650 00
(\$30 weekly)

Full Name (Last, First, Middle Initial)
B. ANDERSON, JON A.

Mailing Address
5023 N. WASHINGTON BOULEVARD

City ARLINGTON State VA Zip Code 22205

FEC ID number of contributing federal political committee: C

Name of Employer: EDO CORPORATION Occupation: VP/WASH OPS.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date: 243 00

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

Amount of Each Receipt this Period: 243 00
(\$6 weekly)

Full Name (Last, First, Middle Initial)
C. COMISKEY, PATRICIA

Mailing Address
3 NEW STREET

City GREAT RIVER State NY Zip Code 11739

FEC ID number of contributing federal political committee: C

Name of Employer: EDO CORPORATION Occupation: VP/HR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date: 222 00

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

Amount of Each Receipt this Period: 222 00
(\$10 weekly)

SUBTOTAL of Receipts This Page (optional) ▶

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

1,115.00

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

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

FOR LINE NUMBER:		PAGE 2 OF 4	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EDO CORPORATION PAC

A. Full Name (Last, First, Middle Initial)
MCINNIS, RICHARD D.

Mailing Address
9503 WATERLINE DRIVE

City **BURKE** State **VA** Zip Code **22015**

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

Name of Employer: **EDO CORPORATION** Occupation: **DIR OF GOVT RELATIONS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

PAYROLL DEDUCTION
Date of Receipt

Amount of Each Receipt This Period
270.00
(\$10 weekly)

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

Mailing Address
4 CEDAR ROAD

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
540.00

PAYROLL DEDUCTION
Date of Receipt

Amount of Each Receipt This Period
540.00
(\$20 weekly)

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

Mailing Address
6 SWIRL LANE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
378.00

PAYROLL DEDUCTION
Date of Receipt

Amount of Each Receipt This Period
378.00
(\$14 weekly)

SUBTOTAL of Receipts This Page (optional) ▶

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

1,188.00

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

Use separate schedulers for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 3 OF 4	
	<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)
EDO CORPORATION PAC

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

Mailing Address
713 DOWNINGTON DRIVE

City State Zip Code
CHESAPEAKE VA 23320

FEC ID number of contributing federal political committee
C1

Name of Employer Occupation
EDO CORPORATION GROUP V.P.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date
520.00

PAYROLL DEDUCTION
Date of Receipt

Amount of Each Receipt this Period
520.00
(\$20 weekly)

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

Mailing Address
624 WHITEHURST LANDING ROAD

City State Zip Code
VIRGINIA BEACH VA 23464

FEC ID number of contributing federal political committee
C

Name of Employer Occupation
EDO CORPORATION GENERAL MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date
260.00

PAYROLL DEDUCTION
Date of Receipt

Amount of Each Receipt this Period
260.00
(\$10 weekly)

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

Mailing Address
5309 ROSAMR PLACE

City State Zip Code
VIRGINIA BEACH VA 23464

FEC ID number of contributing federal political committee
C

Name of Employer Occupation
EDO CORPORATION GROUP CONTROLLER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date
260.00

PAYROLL DEDUCTION
Date of Receipt

Amount of Each Receipt this Period
260.00
(\$10 weekly)

SUBTOTAL of Receipts This Page (optional) 1,040.00

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 Deleted Summary Page	FOR LINE NUMBER: (check only one)		PAGE 4 OF 4	
	<input checked="" type="checkbox"/> 1e	<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"/> 18 <input type="checkbox"/> 17

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NAME OF COMMITTEE (in full)
EDO CORPORATION PAC

A. Full Name (Last, First, Middle initial)
MCVEIGH, PETER

Mailing Address
10 THOMAS DRIVE

City **HAUPPAUGE** State **NY** Zip Code **11788**

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: **1,000.00**

Date of Receipt: **05 30 2003**

Amount of Each Receipt this Period: **1,000.00**

B. Full Name (Last, First, Middle initial)
CANNON, WALTER

Mailing Address
6681 HAMPTON DRIVE

City **SAN JOSE** State **CA** Zip Code **95120**

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

Name of Employer: **EDO CORPORATION** Occupation: **DIR BUS DEV.**

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: **250.00**

Date of Receipt: **05 22 2003**

Amount of Each Receipt this Period: **250.00**

C. Full Name (Last, First, Middle initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) **1,250.00**

TOTAL This Period (last page this line number only) **4,593.00**

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 1 OF 5

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

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NAME OF COMMITTEE (in full)
EDO CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. LONG ISLAND ASSOCIATION

Date of Disbursement

02 / 19 / 2003

Mailing Address
50 HAUPPAUGE ROAD

City State Zip Code
COMMACK NY 11725

Purpose of Disbursement
L.I.A. ACTION COMM CONTRIBUTION

0 1 1
Category/
Type

Amount of Each Disbursement this Period
925.00

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. ISRAEL FOR CONGRESS

Date of Disbursement

02 / 19 / 2003

Mailing Address
P.O. BOX 777

City State Zip Code
DEER PARK NY 11729

Purpose of Disbursement
FUNDRAISER

0 1 1
Category/
Type

Amount of Each Disbursement this Period
2,000.00

Candidate Name
STEVE ISRAEL

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: NY District: 2

Full Name (Last, First, Middle Initial)

C. LOFGREN FOR CONGRESS

Date of Disbursement

03 / 26 / 2003

Mailing Address
436 New Jersey Avenue, S.E.

City State Zip Code
WASHINGTON D.C. 2003

Purpose of Disbursement
FUNDRAISER

0 1 1
Category/
Type

Amount of Each Disbursement this Period
500.00

Candidate Name
BOE LOFGREN

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: CA District: 16

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

3,425.00

**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 2 OF 6	
	<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 28	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
EDO CORPORATION PAC

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

Date of Disbursement
03 26 2003

Mailing Address
324 25TH STREET, SUITE 1017

City **OGDEN** State **UT** Zip Code **84401**

Purpose of Disbursement
FUNDRAISER Category/Type **0 1 1**

Candidate Name
ROB BISHOP

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **▼**

State: **UT** District: **1**

Amount of Each Disbursement this Period
500.00

Full Name (Last, First, Middle Initial)
B. MIKE HONDA FOR CONGRESS

Date of Disbursement
03 26 2003

Mailing Address
721 BOUNDARY AVENUE

City **SILVER SPRING** State **MD** Zip Code **20901**

Purpose of Disbursement
FUNDRAISER Category/Type **0 1 1**

Candidate Name
MIKE HONDA

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **▼**

State: **CA** District: **15**

Amount of Each Disbursement this Period
1,000.00

Full Name (Last, First, Middle Initial)
C. PETE KING FOR CONGRESS

Date of Disbursement
03 26 2003

Mailing Address
P.O. BOX 1426

City **SEAFORD** State **NY** Zip Code **11783**

Purpose of Disbursement
FUNDRAISER Category/Type **0 1 1**

Candidate Name
PETER KING

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **▼**

State: **NY** District: **3**

Amount of Each Disbursement this Period
500.00

SUBTOTAL of Disbursements This Page (optional) **2,000.00**

TOTAL The 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 3 OF 6			
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28b
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 29c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b		

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NAME OF COMMITTEE (In Full)
EDO CORPORATION PAC

A. ACKERMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
ACKERMAN FOR CONGRESS

Date of Disbursement
03 / 26 / 2003

Mailing Address
P.O. BOX 95

City: FRESH MEADOWS State: NY Zip Code: 11365

Purpose of Disbursement: FUNDRAISER Category/Type: 0 1 1

Candidate Name: GARY ACKERMAN

Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼

State: NY District: 2

Amount of Each Disbursement this Period
1,000.00

B. ISRAEL FOR CONGRESS

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

Date of Disbursement
03 / 26 / 2003

Mailing Address
P.O. BOX 777

City: DEER PARK State: NY Zip Code: 11729

Purpose of Disbursement: FUNDRAISER Category/Type: 0 1 1

Candidate Name: STEVE ISRAEL

Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼

State: NY District: 2

Amount of Each Disbursement this Period
1,000.00

C. BUCK MCKEON FOR CONGRESS

Full Name (Last, First, Middle Initial)
BUCK MCKEON FOR CONGRESS

Date of Disbursement
04 / 08 / 2003

Mailing Address
24265 SAN FERNANDO ROAD

City: SANTA CLARITA State: CA Zip Code: 91321

Purpose of Disbursement: FUNDRAISER Category/Type: 0 1 1

Candidate Name: BUCK MCKEON

Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼

State: CA District: 25

Amount of Each Disbursement this Period
1,000.00

SUBTOTAL of Disbursements This Page (optional) 3,000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check any one)

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

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NAME OF COMMITTEE (in Full)
SIDO CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. GEORGE ALLEN FOR U.S. SENATE

Date of Disbursement

04 / 08 / 2003

Mailing Address
1805 MONUMENT AVENUE, SUITE 203

City State Zip Code
RICHMOND VA 23220

Purpose of Disbursement
FUNDRAISER

0 1 1
Category/
Type

Amount of Each Disbursement this Period

500.00

Candidate Name
GEORGE ALLEN

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: VA District:

Full Name (Last, First, Middle Initial)

B. LEWIS FOR CONGRESS COMMITTEE

Date of Disbursement

05 / 02 / 2003

Mailing Address
4451 BROOKFIELD CORPORATE DRIVE

City State Zip Code
CHANTILLY VA 20151

Purpose of Disbursement
FUNDRAISER

0 1 1
Category/
Type

Amount of Each Disbursement this Period

1,000.00

Candidate Name
JERRY LEWIS

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: CA District: 41

Full Name (Last, First, Middle Initial)

C. MURTHA FOR CONGRESS COMMITTEE

Date of Disbursement

05 / 02 / 2003

Mailing Address
P.O. BOX 1091

City State Zip Code
JOHNSTOWN PA 15907

Purpose of Disbursement
FUNDRAISER

0 1 1
Category/
Type

Amount of Each Disbursement this Period

2,500.00

Candidate Name
JACK MURTHA

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: PA District: 12

SUBTOTAL of Disbursements This Page (optional) ▶

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

2,500.00

**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"/> 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)

EDG CORPORATION PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

A.

VISCLOSKY FOR CONGRESS

<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03	<input type="checkbox"/> 04	<input type="checkbox"/> 05	<input type="checkbox"/> 06	<input type="checkbox"/> 07	<input type="checkbox"/> 08	<input type="checkbox"/> 09	<input type="checkbox"/> 10	<input type="checkbox"/> 11	<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	<input type="checkbox"/> 21	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24

Mailing Address

P.O. BOX 10003

City

MERRILLVILLE

State

IN

Zip Code

46410

Purpose of Disbursement
FUNDRAISER

0	1	1
Category	Type	

Amount of Each Disbursement this Period

1,000.00

Candidate Name

PETE VISCLOSKY

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **IN**

District: **1**

Full Name (Last, First, Middle Initial)

Date of Disbursement

B.

LANGEVIN FOR CONGRESS

<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03	<input type="checkbox"/> 04	<input type="checkbox"/> 05	<input type="checkbox"/> 06	<input type="checkbox"/> 07	<input type="checkbox"/> 08	<input type="checkbox"/> 09	<input type="checkbox"/> 10	<input type="checkbox"/> 11	<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	<input type="checkbox"/> 21	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24

Mailing Address

181A KNIGHT STREET

City

WARWICK

State

R.I.

Zip Code

02886

Purpose of Disbursement
FUNDRAISER

0	1	1
Category	Type	

Amount of Each Disbursement this Period

500.00

Candidate Name

JIM LANGEVIN

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **RI**

District: **2**

Full Name (Last, First, Middle Initial)

Date of Disbursement

C.

MIKE HONDA FOR CONGRESS

<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03	<input type="checkbox"/> 04	<input type="checkbox"/> 05	<input type="checkbox"/> 06	<input type="checkbox"/> 07	<input type="checkbox"/> 08	<input type="checkbox"/> 09	<input type="checkbox"/> 10	<input type="checkbox"/> 11	<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	<input type="checkbox"/> 21	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24

Mailing Address

721 BOUNDARY AVENUE

City

SILVER SPRINGS

State

MD

Zip Code

20910

Purpose of Disbursement
FUNDRAISER

0	1	1
Category	Type	

Amount of Each Disbursement this Period

1,000.00

Candidate Name

MIKE HONDA

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **CA**

District: **15**

SUBTOTAL of Disbursements this Page (optional)

TOTAL This Period (last page this line number only)

2,500.00

**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"/> 21a	<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"/> 29c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EDO CORPORATION PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

A.

RICHARD POMBO FOR CONGRESS

06 / 05 / 2003

Mailing Address

P.O. BOX 16021

City

ALEXANDRIA

State

VA

Zip Code

22302

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

RICHARD POMBO

Category/Type

1,000.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: CA

District: 11

Full Name (Last, First, Middle Initial)

Date of Disbursement

B.

ZOE LOFGREN FOR CONGRESS

06 / 05 / 2003

Mailing Address

436 NEW JERSEY AVENUE S.E.

City

WASHINGTON

State

D.C.

Zip Code

20030

Purpose of Disbursement

FUNDRAISER

011

Amount of Each Disbursement this Period

Candidate Name

ZOE LOFGREN

Category/Type

1,000.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: CA

District: 16

Full Name (Last, First, Middle Initial)

Date of Disbursement

C.

Mailing Address

06 / 05 / 2003

City

State

Zip Code

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)


TOTAL This Period (last page this line number only)

2,000.00
15,425.00

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
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<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	
 PREPARER	7/16/03 DATE PREPARED