

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) 205 Pennsylvania Avenue, SE
 Check if different than previously reported. (ACC)
Washington DC 20003

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)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly 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 (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 2009 through 06 30 2009

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 Mr. Joseph A. Auteri

Signature of Treasurer Electronically Filed by Mr. Joseph A. Auteri Date 10 30 2009

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

This amendment provides the previously omitted attributions to the unincorporated proprietorships and partnerships conveyed on the Mid-Year Report (1/1/09 -6/30/09). In order to comply with federal regulations, refund checks for the prohibited funds are forthcoming.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		26119.97
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	26119.97									
(c) Total Receipts (from Line 19)	82464.75	82464.75								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	108584.72	108584.72								
7. Total Disbursements (from Line 31)	87455.13	87455.13								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	21129.59	21129.59								
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**

FEC Form 3X (Rev. 06/2004)

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	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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)	64200.00	64200.00
(ii) Unitemized	8010.00	8010.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	72210.00	72210.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	9600.00	9600.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	81810.00	81810.00
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)	651.59	651.59
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	3.16	3.16
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))	82464.75	82464.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	82464.75	82464.75

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) 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.....	84505.13	84505.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	84505.13	84505.13
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	1050.00	1050.00
(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))	1050.00	1050.00
29. Other Disbursements.....	1900.00	1900.00
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))..	87455.13	87455.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	87455.13	87455.13

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	81810.00	81810.00
34. Total Contribution Refunds (from Line 28(d))	1050.00	1050.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	80760.00	80760.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	84505.13	84505.13
37. Offsets to Operating Expenditures (from Line 15, page 3)	651.59	651.59
38. Net Operating Expenditures (subtract Line 37 from Line 36)	83853.54	83853.54

**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 / 86
	<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)
Adelina Algieri

Mailing Address 479 Summit Avenue

City Philadelphia State PA Zip Code 19128-4025

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

Name of Employer Information Requested-best Eff
Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 20 / 2009

Transaction ID: AF86B9A9A8C8A4CBD83E

Amount of Each Receipt this Period 350.00

PAC Fundraising Event

B.

Full Name (Last, First, Middle Initial)
Ms. Nancy Alperin

Mailing Address 1736 Pine Street

City Philadelphia State PA Zip Code 19103-6720

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

Name of Employer Maxwell Realty
Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 02 / 2009

Transaction ID: ADDD0571ADA5F48928C9

Amount of Each Receipt this Period 350.00

PAC Fundraising Event

C.

Full Name (Last, First, Middle Initial)
Mr. James J. Anderson

Mailing Address 6958 Torresdale Avenue Suite 200

City Philadelphia State PA Zip Code 19135-1932

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

Name of Employer James J. Anderson Construction
Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 02 / 2009

Transaction ID: A49FB1E2B3C9C400AA7B

Amount of Each Receipt this Period 350.00

PAC Fundraising Event

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. James J. Anderson

Mailing Address 6958 Torresdale Avenue
Suite 200

City Philadelphia State PA Zip Code 19135-1932

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

Name of Employer James J. Anderson Construction Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt 02 / 12 / 2009
Transaction ID: A97A9BCC2528E43559B3
Amount of Each Receipt this Period 125.00
Membership Dues

B. Full Name (Last, First, Middle Initial)
Gregory Augustine

Mailing Address 1345 E. Susquehanna Ave.

City Philadelphia State PA Zip Code 19125-2839

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

Name of Employer August Interiors Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 25 / 2009
Transaction ID: A6BE99B358A414E21A67
Amount of Each Receipt this Period 350.00

C. Full Name (Last, First, Middle Initial)
Ms. Barbara J. Augustine

Mailing Address 595 Main Street
Suite 100

City Schwenksville State PA Zip Code 19473-1010

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

Name of Employer Golf Outing Productions Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 03 / 12 / 2009
Transaction ID: A6A323873E2F84BAA90A
Amount of Each Receipt this Period 1200.00
PAC Fundraising Event

SUBTOTAL of Receipts This Page (optional) ► 1675.00

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 / 86
	<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) Ms. Barbara J. Augustine		Date of Receipt
	Mailing Address 595 Main Street Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 13 / 2009
	City	State	Zip Code
	Schwenksville	PA	19473-1010
	FEC ID number of contributing federal political committee. C		Transaction ID: A42A6F5E76BF946049C3
Name of Employer Golf Outing Productions		Occupation Owner	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 2500.00
			PAC Fundraising Event

B.	Full Name (Last, First, Middle Initial) Mr. Joseph A. Auteri		Date of Receipt
	Mailing Address 2515 Garrett Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 02 / 20 / 2009
	City	State	Zip Code
	Drexel Hill	PA	19026-1010
	FEC ID number of contributing federal political committee. C		Transaction ID: A0AABE84ECEF4423A9B0
Name of Employer Berardi, Auteri & Assoc		Occupation Financial Advisor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 700.00
			PAC Fundraising Event

C.	Full Name (Last, First, Middle Initial) Angelo Auteri		Date of Receipt
	Mailing Address 315 Richfield Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 01 / 23 / 2009
	City	State	Zip Code
	Upper Darby	PA	19082-4108
	FEC ID number of contributing federal political committee. C		Transaction ID: A0D2AB841EF314B948C0
Name of Employer Self Employed		Occupation Hardware Admin.	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 875.00
			PAC Fundraising Event

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 4075.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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 10 / 86
	<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) Catherine Baggiano	Date of Receipt MM / DD / YYYY 02 / 25 / 2009
	Mailing Address 120 Hillview Drive	Transaction ID: A77BFAF7205D845089FD
	City Springfield State PA Zip Code 19064-2608	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Employed Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 350.00	

B.	Full Name (Last, First, Middle Initial) Catherine Baggiano	Date of Receipt MM / DD / YYYY 06 / 12 / 2009
	Mailing Address 120 Hillview Drive	Transaction ID: AEC081FE9DA454E0A947
	City Springfield State PA Zip Code 19064-2608	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Self Employed Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 500.00	

C.	Full Name (Last, First, Middle Initial) Ms. Mildred L. Banks	Date of Receipt MM / DD / YYYY 02 / 02 / 2009
	Mailing Address 1518 N. 61st Street	Transaction ID: A91659EB263C74A0F963
	City Philadelphia State PA Zip Code 19151-4220	Amount of Each Receipt this Period 175.00
	FEC ID number of contributing federal political committee. C	PAC Fundraising Event
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 350.00	

SUBTOTAL of Receipts This Page (optional)	675.00
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 11 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Alexis L Barbieri

Mailing Address 501 W. Mermaid Lane
14th Floor

City Philadelphia State PA Zip Code 19118-4205

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

Name of Employer Off. of Attorney Gen. Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 25 / 2009
Transaction ID: AF37BBC5707F04BB494F
Amount of Each Receipt this Period 350.00

B. Full Name (Last, First, Middle Initial)
Martin Belisario

Mailing Address 1545 Morstein Road

City Malvern State PA Zip Code 19355-1966

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

Name of Employer Panitch Schwarle et al Occupation Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 25 / 2009
Transaction ID: A04B1FF91EC77428B97F
Amount of Each Receipt this Period 350.00

C. Full Name (Last, First, Middle Initial)
Mr. Salvatore Berardi

Mailing Address 3868 Angus Road

City Philadelphia State PA Zip Code 19114

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

Name of Employer Delaware Valley Construct-
ion Inc. Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 15 / 2009
Transaction ID: A4AAA5562229347E78A9
Amount of Each Receipt this Period 250.00
Membership Dues

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 86
	<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) Cav. Amato L. Berardi	Date of Receipt MM / DD / YYYY 04 / 23 / 2009
	Mailing Address 555 East City Line Ave. Suite 770	Transaction ID: A9A638F3660514F38A4F
	City Bala Cynwyd State PA Zip Code 19004-1115	Amount of Each Receipt this Period 2975.00
	FEC ID number of contributing federal political committee. C	PAC Fundraising Event
	Name of Employer Berardi, Auteri & Assoc Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2975.00	

B.	Full Name (Last, First, Middle Initial) Paul Heylman	Date of Receipt MM / DD / YYYY 01 / 23 / 2009
	Mailing Address 2600 Virginia Ave.	Transaction ID: A452E97504D3B4223984
	City Washington State DC Zip Code 20037-1905	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	Partnership Attribution
	Name of Employer Saul Ewing Llp Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 350.00	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Mr. Dominic E. Marsico, Jr.	Date of Receipt MM / DD / YYYY 02 / 02 / 2009
	Mailing Address 120 E. State Street	Transaction ID: AF766B34F6204453CA10
	City Media State PA Zip Code 19063-3431	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	Partnership Attribution
	Name of Employer Wechler & Marsico Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 350.00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	2975.00
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 13 / 86
	<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) Mr. Sandro Corrado	Date of Receipt MM / DD / YYYY 02 / 02 / 2009
	Mailing Address 310 Schoolhouse Rd. Suite 1	Transaction ID: A0A9E5806A7C946179E2
	City State Zip Code Souderton PA 18964-2417	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Partnership Attribution
Name of Employer Corrado & Sons	Occupation Information Requested	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1850.00	

B.	Full Name (Last, First, Middle Initial) Mr. Sandro Corrado	Date of Receipt MM / DD / YYYY 02 / 02 / 2009
	Mailing Address 310 Schoolhouse Rd. Suite 1	Transaction ID: AC91046137DA94CD2B59
	City State Zip Code Souderton PA 18964-2417	Amount of Each Receipt this Period 700.00
	FEC ID number of contributing federal political committee. C	Partnership Attribution
Name of Employer Corrado & Sons	Occupation Information Requested	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1850.00	

C.	Full Name (Last, First, Middle Initial) Mr. Samuel Gabriel	Date of Receipt MM / DD / YYYY 02 / 02 / 2009
	Mailing Address 2200 Michener Street Suite 1	Transaction ID: A5B656457A24F4A79924
	City State Zip Code Philadelphia PA 19115-4374	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	Partnership Attribution
Name of Employer Gabriel Building Group	Occupation Information Requested	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	0.00
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 14 / 86
(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)
Mr. Alex Chiaro

Mailing Address 325 Wexford Road

City State Zip Code
Red Hill PA 18076-1416

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

Name of Employer Chiaro's Inc. Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1925.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2009

Transaction ID: A85D010D84CA94B79987

Amount of Each Receipt this Period
950.00

Reattribution to Memo
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Vincent B. Mancini, Esq.

Mailing Address 414 E. Baltimore Pike

City State Zip Code
Media PA 19063-3808

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

Name of Employer Self-employed Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: AEEDBFECDD34514127861

Amount of Each Receipt this Period
1050.00

Partnership Attribution
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Richard F Furia

Mailing Address 815 Bowman Avenue

City State Zip Code
Wynnewood PA 19096-1602

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

Name of Employer Furia and Turner Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
MM / DD / YYYY
04 / 10 / 2009

Transaction ID: A7970B18B973A406BB3F

Amount of Each Receipt this Period
250.00

Partnership Attribution
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

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 15 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
George A Bochetto

Mailing Address 1524 Locust Street

City Philadelphia State PA Zip Code 19102-4401

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

Name of Employer Bochetto & Lentz Occupation Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 02 / 02 / 2009
Transaction ID: AD9DD788B2F524DCEABB
Amount of Each Receipt this Period 700.00
PAC Fundraising Event

B. Full Name (Last, First, Middle Initial)
Donna M Bongarzone-Fluehr

Mailing Address 1408 Plymouth Blvd.

City Plymouth Meeting State PA Zip Code 19462-2655

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

Name of Employer Tot-Time child Development Centers Inc Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 01 / 23 / 2009
Transaction ID: A89E0DF7D84574FE5A7E
Amount of Each Receipt this Period 350.00
PAC Fundraising Event

C. Full Name (Last, First, Middle Initial)
Donna M Bongarzone-Fluehr

Mailing Address 1408 Plymouth Blvd.

City Plymouth Meeting State PA Zip Code 19462-2655

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

Name of Employer Tot-Time child Development Centers Inc Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 20 / 2009
Transaction ID: A128600A220794983B2F
Amount of Each Receipt this Period 250.00
PAC Fundraising Event

SUBTOTAL of Receipts This Page (optional) ► 1300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 86
	<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) Sammy A. Braccia		Date of Receipt
	Mailing Address 201 Pine Ave		<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Horsham	PA	19044-2422
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Braccia Builders, Inc.		Occupation Homebuilder	Transaction ID: A1F743994A2CC4D588F2
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="1300.00"/>
		<input type="text" value="1300.00"/>	PAC Fundraising Event

B.	Full Name (Last, First, Middle Initial) Raymond Bucceroni		Date of Receipt
	Mailing Address 3168 Capri Drive		<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19145-5773
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Raymond S. Bucceroni Real Estate		Occupation Realtor	Transaction ID: A770338E9339C49B591B
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="1400.00"/>
		<input type="text" value="1400.00"/>	

C.	Full Name (Last, First, Middle Initial) Judith A Camiel		Date of Receipt
	Mailing Address 624 Hazelhurst Road		<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Merion Station	PA	19066-1407
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer The Camiel Group, Llc		Occupation Fundraiser	Transaction ID: A84F69850CDF7420AB8C
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="875.00"/>
		<input type="text" value="875.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="3575.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 86
(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)
Barbara Capozzi

Mailing Address 3320 South 20th Street

City Philadelphia State PA Zip Code 19145-5707

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

Name of Employer Capozzi Real Estate Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 02 / 25 / 2009
Transaction ID: A87041F34E20E4B1C8CE
Amount of Each Receipt this Period 700.00

B.

Full Name (Last, First, Middle Initial)
Caroline E Capreri

Mailing Address 1352 Arthur Avenue

City Maple Glen State PA Zip Code 19002-3223

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 10 / 2009
Transaction ID: AAD2E67F60E004E5F8FB
Amount of Each Receipt this Period 350.00
PAC Fundraising Event

C.

Full Name (Last, First, Middle Initial)
Mr. Robert G Carullo

Mailing Address 7 Cranberry Lane

City Shamong State NJ Zip Code 08088-8621

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

Name of Employer Smart States Occupation Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 02 / 25 / 2009
Transaction ID: A74B8C4B709B64A8CA0F
Amount of Each Receipt this Period 700.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Robert F Cenci

Mailing Address 724 West Lancaster Avenue

City State Zip Code
Wayne PA 19087-2542

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

Name of Employer Countrywide Home Loans Occupation Owner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: AFC3977367A7D48E7BDE

Amount of Each Receipt this Period
350.00

PAC Fundraising Event

B. Full Name (Last, First, Middle Initial)
Mr. Alex Chiaro

Mailing Address 325 Wexford Road

City State Zip Code
Red Hill PA 18076-1416

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

Name of Employer Chiaro's Inc. Occupation Owner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1925.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	0	/	2	0	0	9

Transaction ID: A1B2227F6A6B940EC9D4

Amount of Each Receipt this Period
975.00

PAC Fundraising Event

C. Full Name (Last, First, Middle Initial)
Chiaro's

Mailing Address 337 Main Street

City State Zip Code
Pennsburg PA 18073-1315

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

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 950.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	0	/	2	0	0	9

Transaction ID: A26C7454A6ED243CAB35

Amount of Each Receipt this Period
950.00

Contribution to be Attributed

SUBTOTAL of Receipts This Page (optional) ► **2275.00**

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 19 / 86
	<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) Gregory Ciminera	Date of Receipt MM / DD / YYYY 02 / 25 / 2009
	Mailing Address 1225 South Longacre Blvd	Transaction ID: A2FB28E0DADEB426DA4D
	City State Zip Code Lansdowne PA 19050-3415	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Sons of Italy in America Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) Nicola Cinalli	Date of Receipt MM / DD / YYYY 01 / 23 / 2009
	Mailing Address 81 Westminster Dr	Transaction ID: AA24DD77E36454082B26
	City State Zip Code Voorhees NJ 08043-3708	Amount of Each Receipt this Period 700.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation O'donnell & Naccarato President/ceo	PAC Fundraising Event
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00	

C.	Full Name (Last, First, Middle Initial) Peter Cordua	Date of Receipt MM / DD / YYYY 02 / 25 / 2009
	Mailing Address 1650 Suckle Hwy.	Transaction ID: A8CFBBB975F0C47DFB16
	City State Zip Code Pennsauken NJ 08110-1450	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Cordua and Co. Cpa	PAC Fundraising Event
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)	▶	1400.00
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 20 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 1650 Suckle Hwy.

City State Zip Code
Pennsauken NJ 08110-1450

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

Name of Employer Occupation
Cordua and Co. Cpa

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2009

Transaction ID: AA5BCC59F11DB430F886

Amount of Each Receipt this Period
350.00

PAC Fundraising Event

B. Full Name (Last, First, Middle Initial)
John Costa

Mailing Address 256 Joseph Road

City State Zip Code
Oxford PA 19363-4319

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

Name of Employer Occupation
Procacci Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2009

Transaction ID: ABB1F18A32C394DE48DC

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
Christopher Couch

Mailing Address 1353 Arthur Avenue

City State Zip Code
Maple Glen PA 19002-3202

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

Name of Employer Occupation
Merrill Lynch Manager, VP of Custom Client Design

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: ADF4DEC4149C94A9195A

Amount of Each Receipt this Period
350.00

PAC Fundraising Event

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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 21 / 86	
	<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) Steven Crescimone	Date of Receipt MM / DD / YYYY 02 / 02 / 2009
	Mailing Address 325 W. 5th Avenue	Transaction ID: AA138D56D377540FDAD6
	City State Zip Code Conshohocken PA 19428-1612	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	PAC Fundraising Event
	Name of Employer Corporate Express Imaging Occupation Strategic Business Development Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 385.00	

B.	Full Name (Last, First, Middle Initial) Anthony K. DePaul, Esq.	Date of Receipt MM / DD / YYYY 02 / 02 / 2009
	Mailing Address 1070 Blyth Court	Transaction ID: A73144D97C1254CB3BD2
	City State Zip Code Blue Bell PA 19422-2448	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	Caraneval Ad
	Name of Employer DePaul Group Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) Mr. Guido DiCicco	Date of Receipt MM / DD / YYYY 02 / 20 / 2009
	Mailing Address 37 Summer Place	Transaction ID: A10A4C6C2DCE6419FA0D
	City State Zip Code Huntingdon Valley PA 19006-1524	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	PAC Fundraising Event
	Name of Employer Di Cicco Auto Body Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	1050.00
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 22 / 86
	<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) Susan L DiLeonardo		Date of Receipt MM / DD / YYYY 02 / 02 / 2009
Mailing Address 1239 Jeffrey Lane		Transaction ID: AA874DCA712754F9B972
City Langhorne	State PA	Zip Code 19047-3764
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 350.00	
Name of Employer Homemaker	Occupation Homemaker	PAC Fundraising Event
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.

Full Name (Last, First, Middle Initial) Mr. Anthony S. DiSandro, Sr.		Date of Receipt MM / DD / YYYY 03 / 12 / 2009
Mailing Address 205 McClure Drive		Transaction ID: AEB1F6ED3682B4E80ABB
City Blue Bell	State PA	Zip Code 19422-2833
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Stevens & Lee PC	Occupation Shareholder	PAC Fundraising Event
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Ronald R. Donatucci		Date of Receipt MM / DD / YYYY 02 / 25 / 2009
Mailing Address 2336 South 21st Street		Transaction ID: AE7B625F4645A4F02922
City Philadelphia	State PA	Zip Code 19145-3418
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2100.00	
Name of Employer City Hall of Philadelphia	Occupation Register of Wills	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00	

SUBTOTAL of Receipts This Page (optional)	▶	2950.00
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 23 / 86						
	(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

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

A.	Full Name (Last, First, Middle Initial) Danny Dumoff		Date of Receipt MM / DD / YYYY 03 / 23 / 2009		
	Mailing Address 538 Spruce Street		Transaction ID: A1734B0DB47F942C0849		
	City Philadelphia	State PA	Zip Code 19106-4112	Amount of Each Receipt this Period 600.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Economy Rest Supply	Occupation Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

B.	Full Name (Last, First, Middle Initial) Samuel Fiocchi		Date of Receipt MM / DD / YYYY 02 / 25 / 2009		
	Mailing Address 1745 Dolly Drive		Transaction ID: AAF989552D24048A3874		
	City Vineland	State NJ	Zip Code 08361-6781	Amount of Each Receipt this Period 350.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Belvedere Holdings	Occupation Partner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00			

C.	Full Name (Last, First, Middle Initial) Mr. John Fitzgerald		Date of Receipt MM / DD / YYYY 02 / 10 / 2009		
	Mailing Address 1002 Susan Road		Transaction ID: AB40A9EA1245A4192861		
	City Philadelphia	State PA	Zip Code 19115-2904	Amount of Each Receipt this Period 700.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Information Requested-best Eff	Occupation Information Requested			
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)	▶	1650.00
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 24 / 86
(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)
Renee Freeman

Mailing Address 1520 Spruce Street

City Philadelphia State PA Zip Code 19102-4575

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

Name of Employer Information Requested-best Eff
Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: AD4B3EE8202CD4A9EA5F

Amount of Each Receipt this Period
350.00

B.

Full Name (Last, First, Middle Initial)
Furia & Turner

Mailing Address 1719 Rittenhouse Square

City Philadelphia State PA Zip Code 19103-6109

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
04 / 10 / 2009

Transaction ID: AF606F98996BE45F1949

Amount of Each Receipt this Period
250.00

Partnership contribution to be Attributed

C.

Full Name (Last, First, Middle Initial)
Richard F Furia

Mailing Address 815 Bowman Avenue

City Wynnewood State PA Zip Code 19096-1602

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

Name of Employer Furia and Turner
Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2009

Transaction ID: A2644F07789094CB687F

Amount of Each Receipt this Period
1400.00

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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 25 / 86
(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)
Richard F Furia

Mailing Address 815 Bowman Avenue

City Wynnewood State PA Zip Code 19096-1602

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

Name of Employer Furia and Turner Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 02 / 25 / 2009

Transaction ID: A7DED0863A6274933873

Amount of Each Receipt this Period 700.00

B.

Full Name (Last, First, Middle Initial)
Gabriel Properties LP

Mailing Address 220 Michener Street Suite 1

City Philadelphia State PA Zip Code 19115

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 02 / 02 / 2009

Transaction ID: AD388B16CB7BA4523B3E

Amount of Each Receipt this Period 350.00

Partnership Contribution to be Attributed

C.

Full Name (Last, First, Middle Initial)
Antonio Giordano

Mailing Address 1230 Gulph Creek Drive

City Wayne State PA Zip Code 19087-4686

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

Name of Employer Self Employed Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 25 / 2009

Transaction ID: AF84F2B6D56D34A4EBB7

Amount of Each Receipt this Period 350.00

SUBTOTAL of Receipts This Page (optional) ► 1400.00

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 26 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Frank Giordano

Mailing Address 170 East Main Street

City State Zip Code
Moorestown NJ 08057-2949

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

Name of Employer Atlantic Trailer Leasing Co. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 24 / 2009
Transaction ID: A692B35F93A1F442A8E6
Amount of Each Receipt this Period: 250.00
PAC Fundraising Event - Ad

B. Full Name (Last, First, Middle Initial)
Dorothy J. Giordano

Mailing Address 170 East Main Street

City State Zip Code
Moorestown NJ 08057-2949

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

Name of Employer Atlantic Trailer Leasing Co. Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 02 / 10 / 2009
Transaction ID: A40D01B877DA7436AB76
Amount of Each Receipt this Period: 350.00
Carnevale

C. Full Name (Last, First, Middle Initial)
Mr. Joseph P. Hand, Jr.

Mailing Address 407 E. Pennsylvania Blvd.

City State Zip Code
Feasterville Trevo PA 19053-7847

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

Name of Employer Joe Hand Promotions Inc. Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 02 / 25 / 2009
Transaction ID: AA265F7BB53A242CDB4C
Amount of Each Receipt this Period: 350.00

SUBTOTAL of Receipts This Page (optional) ► 950.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 86
	<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) Alexander Horn		Date of Receipt
	Mailing Address 42 Maryswaterford Road		<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Bala Cynwyd	PA	19004
	FEC ID number of contributing federal political committee. C		Transaction ID: A6593186E20374AB5BCF
Name of Employer Information Requested-best Eff		Occupation Information Requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="350.00"/>
		<input type="text" value="350.00"/>	

B.	Full Name (Last, First, Middle Initial) Jeanine Jewell		Date of Receipt
	Mailing Address 704 Kyle Lane		<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Ambler	PA	19002-2531
	FEC ID number of contributing federal political committee. C		Transaction ID: A524B92B1FE744127B6E
Name of Employer Canterbury Consultants Inc		Occupation Broker	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="350.00"/>
		<input type="text" value="350.00"/>	

C.	Full Name (Last, First, Middle Initial) Joseph P. Possenti Jr. & Associates, Inc.		Date of Receipt
	Mailing Address 5160 Pennell Rd		<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Media	PA	19063-6501
	FEC ID number of contributing federal political committee. C		Transaction ID: AECD266FA025942229DC
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="700.00"/>
		<input type="text" value="700.00"/>	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1400.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 28 / 86
	<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)
Brian Kappra

Mailing Address 803 North Beechwood Street

City Philadelphia State PA Zip Code 19130-1404

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

Name of Employer Evantine Design, Inc. Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 25 / 2009

Transaction ID: A07504C3EC94D4E64A99

Amount of Each Receipt this Period 350.00

B. Full Name (Last, First, Middle Initial)
Linda Kirshner

Mailing Address 250 S. 18th Street Apt 802

City Philadelphia State PA Zip Code 19103-6225

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

Name of Employer Information Requested-best Eff Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 01 / 23 / 2009

Transaction ID: A874997D91E024BCCBAB

Amount of Each Receipt this Period 350.00

Carnevale

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

Mailing Address 2132 E. Susquehanna Avenue

City Philadelphia State PA Zip Code 19125-2042

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

Name of Employer Self Employed Occupation Real Estate Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 01 / 23 / 2009

Transaction ID: A11EF077937884B61B64

Amount of Each Receipt this Period 700.00

Carnevale

SUBTOTAL of Receipts This Page (optional) ► 1400.00

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 29 / 86
	<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) Law Offices of Vincent B. Mancicni & Associates	Date of Receipt MM / DD / YYYY 03 / 12 / 2009
	Mailing Address 414 E. Baltimore Pike	Transaction ID: A3470060889E74CB58BD
	City State Zip Code Media PA 19063-3808	Amount of Each Receipt this Period 1050.00
	FEC ID number of contributing federal political committee. C	Partnership Contribution to be Attributed
Name of Employer Occupation	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) Paola Lentini	Date of Receipt MM / DD / YYYY 02 / 25 / 2009
	Mailing Address 178 South Avenue	Transaction ID: A86F4CBD7D3204EB0BEF
	City State Zip Code Swedesboro NJ 08085-1686	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Occupation Gia Pronto Director of Project Development	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00

C.	Full Name (Last, First, Middle Initial) Luigi Liberato	Date of Receipt MM / DD / YYYY 02 / 20 / 2009
	Mailing Address 2609 Equestrian Way	Transaction ID: AF9CA03429F284F239BF
	City State Zip Code East Norriton PA 19403-3955	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	Carnevale
Name of Employer Occupation Libertao Steel Fabricating Co. President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 86
	<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)
P. Douglas Maier

Mailing Address 724 Davis Road

City State Zip Code
Barrington NJ 08007-1422

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

Name of Employer P Douglas Maier CPA Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2009

Transaction ID: A5F30662482004B659D4

Amount of Each Receipt this Period
350.00

B.

Full Name (Last, First, Middle Initial)
Mr. Anthony J. Mariello

Mailing Address 1502 Bethlehem Pike

City State Zip Code
Flourtown PA 19031-2025

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

Name of Employer Collex Collision Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2009

Transaction ID: A33B2D2A488D24323BA8

Amount of Each Receipt this Period
350.00

Carnevale

C.

Full Name (Last, First, Middle Initial)
Robert Mascioli

Mailing Address 2945 Morris Road

City State Zip Code
Ardmore PA 19003-1832

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

Name of Employer McCausland Keen and Bock Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2009

Transaction ID: A219154C3CDC545FF839

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 31 / 86
	<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) Donna Massanova	Date of Receipt MM / DD / YYYY 02 / 25 / 2009
	Mailing Address 2022 West Shunk Street	Transaction ID: A3CFD9CF4B1954CB2A1B
	City Philadelphia State PA Zip Code 19145-4220	Amount of Each Receipt this Period 525.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Parente Randolph, Llc Occupation Cpa Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 525.00	

B.	Full Name (Last, First, Middle Initial) Michael J Mattioni, Esq.	Date of Receipt MM / DD / YYYY 02 / 02 / 2009
	Mailing Address 702 Gawain Road	Transaction ID: A008706FA2EBB4B4B889
	City Plymouth Meeting State PA Zip Code 19462-2110	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Mattioni Ltd Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 350.00	Carnevale

C.	Full Name (Last, First, Middle Initial) Eugene Mattioni, Esq.	Date of Receipt MM / DD / YYYY 01 / 23 / 2009
	Mailing Address 4111 Gypsy Ln	Transaction ID: AE786A41823104E97B11
	City Philadelphia State PA Zip Code 19129-5529	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Mattioni Ltd Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 350.00	Carnevale

SUBTOTAL of Receipts This Page (optional)	1225.00
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 32 / 86
(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) Dante Mattioni, Esq.		Date of Receipt MM / DD / YYYY 02 / 20 / 2009
Mailing Address 399 Market Street 2nd Floor		Transaction ID: AF36E951CD1E24C25AD0
City Philadelphia	State PA Zip Code 19106-2138	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Mattioni, Llp	Occupation Attorney	Carnevale
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.

Full Name (Last, First, Middle Initial) Martha McGeary Snider		Date of Receipt MM / DD / YYYY 03 / 09 / 2009
Mailing Address 8500 Flouertown Avenue		Transaction ID: AFF77CBFD25324DC8B9B
City Glenside	State PA Zip Code 19038-7971	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00
Name of Employer Commonwealth Of Pennsylvania	Occupation Policy Advisor Arts & Culture	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

C.

Full Name (Last, First, Middle Initial) Media Real Estate		Date of Receipt MM / DD / YYYY 02 / 20 / 2009
Mailing Address 203 E. Baltimore Ave.		Transaction ID: A6370C58883E54CFB8AE
City Media	State PA Zip Code 19063-3433	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer	Occupation	Carnevale
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Joseph Minopoli

Mailing Address 4018 Skippack Pike

City State Zip Code
Skippack PA 19474

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

Name of Employer Occupation
Jm & Mm Pizza Corp. Restaurant Owner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1050.00

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

Transaction ID: A4E298D035B184325B15

Amount of Each Receipt this Period
1050.00

Carnevale

B. Full Name (Last, First, Middle Initial)
Glorianne Nee

Mailing Address 12 High Hill Lane

City State Zip Code
Thornton PA 19373-2002

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

Name of Employer Occupation
Muller Inc. Information Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

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

Transaction ID: AE79B83D39D8A436EA81

Amount of Each Receipt this Period
350.00

Carnevale Ad

C. Full Name (Last, First, Middle Initial)
Patrick J. O'Connor

Mailing Address 207 Ashwood Road

City State Zip Code
Villanova PA 19085-1503

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

Name of Employer Occupation
Cozen O'Connor Information Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 0 / 2 0 0 9

Transaction ID: A78041503FD0240C7BF8

Amount of Each Receipt this Period
350.00

Carnevale

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 86
	<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) Sandra Palermo		Date of Receipt MM / DD / YYYY 01 / 23 / 2009
	Mailing Address 1443 Revelation Rd		Transaction ID: A2A14D80146F64DB9BD3
	City Jenkintown	State PA	Zip Code 19046-1023
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
	Name of Employer Muller Inc.	Occupation President	Carnevale

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4850.00
---	-------------------------------------

B.	Full Name (Last, First, Middle Initial) Sandra Palermo		Date of Receipt MM / DD / YYYY 01 / 23 / 2009
	Mailing Address 1443 Revelation Rd		Transaction ID: ACE9A79680B914F508D2
	City Jenkintown	State PA	Zip Code 19046-1023
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4500.00
	Name of Employer Muller Inc.	Occupation President	Carnevale

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4850.00
---	-------------------------------------

C.	Full Name (Last, First, Middle Initial) Lorena O Pannizzo		Date of Receipt MM / DD / YYYY 02 / 02 / 2009
	Mailing Address 1714 A Lombard Street		Transaction ID: AC9E81B00F54C4677A4B
	City Philadelphia	State PA	Zip Code 19146-1519
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
	Name of Employer National Board of Medical Examiners	Occupation Senior Program Manager	Carnevale

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00
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SUBTOTAL of Receipts This Page (optional)	▶	5200.00
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 35 / 86
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
Dominic Pileggi

Mailing Address 33 Patricia Lane

City State Zip Code
Glen Mills PA 19342-1031

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

Name of Employer Commonwealth Of Pennsylvania
Occupation State Senator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2009

Transaction ID: A9AEA02774D9745D6912

Amount of Each Receipt this Period
350.00

B.

Full Name (Last, First, Middle Initial)
Kathleen Radwanski

Mailing Address 5040 Grant Ave

City State Zip Code
Philadelphia PA 19114-3102

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

Name of Employer Information Requested-best Eff
Occupation Information Requested-best Eff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2009

Transaction ID: A750CEB4680BB4963BAF

Amount of Each Receipt this Period
350.00

Carnevale

C.

Full Name (Last, First, Middle Initial)
Mr. Mario D. Rivello

Mailing Address 748 Sedgewick Court

City State Zip Code
Sewell NJ 08080-2522

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

Name of Employer Dupont/providence Real Estate
Occupation Engineer/owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: A566283EEC1724678AB5

Amount of Each Receipt this Period
150.00

PAC Membership

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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 36 / 86
(check only one)
 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)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joanne Russo

Mailing Address 1762 Teresa Ct.

City State Zip Code
Downingtown PA 19335-3592

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

Name of Employer Independence Blue Cross Occupation Registered Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2009

Transaction ID: AF601E72CA4A24AA9B85

Amount of Each Receipt this Period
525.00

B. Full Name (Last, First, Middle Initial)
Ms. Maria Santoro

Mailing Address Distribution Co. Inc.
522 W. Main Street

City State Zip Code
Norristown PA 19401-4616

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

Name of Employer Santoro Tile & Marble Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2009

Transaction ID: A89006C3FC2E946A98C0

Amount of Each Receipt this Period
350.00

Carnevale

C. Full Name (Last, First, Middle Initial)
Saul Ewing Llp

Mailing Address Centre Square West
1500 Market Street, 38th Floor

City State Zip Code
Philadelphia PA 19102-2100

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
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: ADA5F5FE44D35453A8BA

Amount of Each Receipt this Period
350.00

Partnership Contribution to be Attributed

SUBTOTAL of Receipts This Page (optional) ► 1225.00

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 37 / 86
	<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) Mr. Joseph A. Scandone	Date of Receipt MM / DD / YYYY 02 / 20 / 2009
	Mailing Address 1297 Sumner Way	Transaction ID: A5C18E32583304188B78
	City State Zip Code West Chester PA 19382-8263	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	Carnevale
	Name of Employer Occupation Self Employed Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) Jennifer Schalleur	Date of Receipt MM / DD / YYYY 02 / 25 / 2009
	Mailing Address 201 Summerwing Lane	Transaction ID: A5D978C107CA24B92BF1
	City State Zip Code Harleysville PA 19438-1863	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Christo Consulting It Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) Sergio Scuteri, Esq.	Date of Receipt MM / DD / YYYY 02 / 10 / 2009
	Mailing Address 325 Chestnut Street Suite 1300	Transaction ID: A2DCC93DE80EB4D5BAB8
	City State Zip Code Philadelphia PA 19106-2613	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	Carnevale
	Name of Employer Occupation Farr, Burke, Gambacorta & Wrig Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
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 38 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

<p>A. Full Name (Last, First, Middle Initial) Andrew J Scutti</p> <p>Mailing Address 1348 Arthur Avenue</p> <p>City State Zip Code Amblor PA 19002-3223</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Dale Corporation Occupation Director of Safety & Health</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 350.00</p>	<p>Date of Receipt 02 / 25 / 2009</p> <p>Transaction ID: AD1DA981A4CD746FAA23</p> <p>Amount of Each Receipt this Period 350.00</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Stephen A Sheller</p> <p>Mailing Address 512 Hoffman Drive</p> <p>City State Zip Code Bryn Mawr PA 19010-1745</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Sheller P.C. Occupation Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 350.00</p>	<p>Date of Receipt 02 / 25 / 2009</p> <p>Transaction ID: ACB0F88EFC50D4A7A90D</p> <p>Amount of Each Receipt this Period 350.00</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) Scott P Sigman, Esq.</p> <p>Mailing Address 1524 Locust Street</p> <p>City State Zip Code Philadelphia PA 19102-4401</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Bochetto & Lentz Occupation Partner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 350.00</p>	<p>Date of Receipt 02 / 10 / 2009</p> <p>Transaction ID: ABB0FB0037C1C4474BE2</p> <p>Amount of Each Receipt this Period 350.00</p> <p>Carnevale</p>
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SUBTOTAL of Receipts This Page (optional)	1050.00
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 39 / 86
(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)
Nina Sposato

Mailing Address 16 R Shawmont Ave

City Philadelphia State PA Zip Code 19128-4203

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 02 / 10 / 2009
Transaction ID: A0401865747E14F1BBE6
Amount of Each Receipt this Period 700.00
Carnevale

B.

Full Name (Last, First, Middle Initial)
Nina Sposato

Mailing Address 16 R Shawmont Ave

City Philadelphia State PA Zip Code 19128-4203

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 02 / 10 / 2009
Transaction ID: A851460049E924E519D7
Amount of Each Receipt this Period 1400.00
Carnevale

C.

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

Mailing Address 500 Cottman Avenue

City Cheltenham State PA Zip Code 19012-2009

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2850.00

Date of Receipt 01 / 23 / 2009
Transaction ID: ACABBF5B575C34FFC945
Amount of Each Receipt this Period 2850.00
Carnevale

SUBTOTAL of Receipts This Page (optional) ► 4950.00

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 40 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Joseph P. Stampone, Esq.
Mailing Address 500 Cottman Avenue

City State Zip Code
Cheltenham PA 19012-2009

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 ▼ 3200.00

Date of Receipt
MM / DD / YYYY
02 / 02 / 2009

Transaction ID: A683ECACAC42745508EE

Amount of Each Receipt this Period
350.00

Carnevale

B. Full Name (Last, First, Middle Initial)
Joseph P. Stampone, Esq.
Mailing Address 500 Cottman Avenue

City State Zip Code
Cheltenham PA 19012-2009

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 ▼ 3550.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2009

Transaction ID: A4246C971387A4300B54

Amount of Each Receipt this Period
350.00

Carnevale

C. Full Name (Last, First, Middle Initial)
Stone Arch Investment Partnership
Mailing Address 310 Schoolhouse Road Suite 1

City State Zip Code
Souderton PA 18964-2417

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

Name of Employer Occupation
Partnership Contribution to be Attributed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1700.00

Date of Receipt
MM / DD / YYYY
02 / 02 / 2009

Transaction ID: A5C1C2A74E68542B9B8C

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1700.00

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 41 / 86
	<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) Stone Arch Investment Partnership	Date of Receipt MM / DD / YYYY 02 / 02 / 2009
	Mailing Address 310 Schoolhouse Road Suite 1	Transaction ID: AB5C7013023AA4458827
	City State Zip Code Souderton PA 18964-2417	Amount of Each Receipt this Period 700.00
	FEC ID number of contributing federal political committee. C	Partnership Contribution to be Attributed
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1700.00	

B.	Full Name (Last, First, Middle Initial) Ms. Sabrina Tamburino	Date of Receipt MM / DD / YYYY 02 / 25 / 2009
	Mailing Address 516 N. 19th Street	Transaction ID: A9850E68561B648A398E
	City State Zip Code Philadelphia PA 19130-3802	Amount of Each Receipt this Period 1850.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GPTMC Project Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2200.00	

C.	Full Name (Last, First, Middle Initial) Ms. Sabrina Tamburino	Date of Receipt MM / DD / YYYY 02 / 25 / 2009
	Mailing Address 516 N. 19th Street	Transaction ID: A4393AF7AAF8544C1A11
	City State Zip Code Philadelphia PA 19130-3802	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GPTMC Project Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2200.00	

SUBTOTAL of Receipts This Page (optional)	2900.00
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 42 / 86
	<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)
Ms. Sabrina Tamburino

Mailing Address 516 N. 19th Street

City Philadelphia State PA Zip Code 19130-3802

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

Name of Employer GPTMC Occupation Project Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2350.00

Date of Receipt 04 / 10 / 2009

Transaction ID: AC601AA62C90841878CF

Amount of Each Receipt this Period 150.00

Membership Dues

B.

Full Name (Last, First, Middle Initial)
Mr. Ivan Tancredi

Mailing Address 408 Chews Landing Road

City Haddonfield State NJ Zip Code 08033-3842

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

Name of Employer Ivan Supply Co. LLC Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 20 / 2009

Transaction ID: A6064320F26A54358BB7

Amount of Each Receipt this Period 350.00

Carnevale

C.

Full Name (Last, First, Middle Initial)
Adam K Terranova

Mailing Address 1500 Chestnut Street Apt. 4D

City Philadelphia State PA Zip Code 19102-2744

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

Name of Employer Beasley Broadcasting Occupation Account Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 20 / 2009

Transaction ID: A4C05E7AA0740472CA23

Amount of Each Receipt this Period 350.00

Carnevale

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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 43 / 86
(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)
William Tubb

Mailing Address 10 Benjamin West Way

City State Zip Code
Marlton NJ 08053-7234

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

Name of Employer Sysco Philadelphia Occupation President & Ceo

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2009

Transaction ID: A7CDB8584513A459CAFF

Amount of Each Receipt this Period
350.00

B.

Full Name (Last, First, Middle Initial)
Alexander Vaccaro

Mailing Address 925 Chestnut Street

City State Zip Code
Philadelphia PA 19107-4201

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

Name of Employer The Rothman Institute Occupation M.D./ Ph.D

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2009

Transaction ID: A73CB839DF67E4197BC9

Amount of Each Receipt this Period
350.00

C.

Full Name (Last, First, Middle Initial)
Carly Walko

Mailing Address 301 Race Street

City State Zip Code
Philadelphia PA 19106-1807

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

Name of Employer Nicole Miller Philadelphia Occupation Director of Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
04 / 10 / 2009

Transaction ID: AB3F0E0F5EFC04ACE943

Amount of Each Receipt this Period
350.00

PAC Fundraising Event- Payment

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 44 / 86
	(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

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

A.	Full Name (Last, First, Middle Initial) Wechsler/ Marsico Associates	Date of Receipt MM / DD / YYYY 02 / 02 / 2009
	Mailing Address 120 E. State Street P.O. Box 646	Transaction ID: A4F6BC8EAD0804922ACD
	City State Zip Code Media PA 19063-3431	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	Partnership Contribution to be Attributed
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
B.	Full Name (Last, First, Middle Initial) Justin B Wineburgh, Esq.	Date of Receipt MM / DD / YYYY 02 / 02 / 2009
	Mailing Address 184 Kirk Drive	Transaction ID: AF5DFD3C42552440CAE7
	City State Zip Code Huntingdon Valley PA 19006-5425	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	Carnevale Ad
Name of Employer Occupation Cozen O'Connor Attorney	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	64200.00

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

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

FOR LINE NUMBER: PAGE 45 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
BAIPAC

Mailing Address 2129 E High Street

City Pottstown State PA Zip Code 19464

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 02 / 02 / 2009
Transaction ID: AEC570001B22C4A55BFA
 Amount of Each Receipt this Period 350.00
 Carnevale

B. Full Name (Last, First, Middle Initial)
Cement Masons Local #592 Pac

Mailing Address 2511 Snyder Avenue

City Philadelphia State PA Zip Code 19145

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 02 / 02 / 2009
Transaction ID: ADED93B4A85C846788C4
 Amount of Each Receipt this Period 350.00
 Carnevale Ad

C. Full Name (Last, First, Middle Initial)
Committee to Elect Mayor Joseph Digirolamo

Mailing Address 3982 Grace Avenue

City Bensalem State PA Zip Code 19020

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 02 / 02 / 2009
Transaction ID: A36FCCD643F4B4EF9BF6
 Amount of Each Receipt this Period 350.00
 Carnevale Ad

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 46 / 86
(check only one)
 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)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
Friends of Farnese

Mailing Address 1420 Locust Street
Unit 29-D

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 ▼
875.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 9

Transaction ID: A3D8D6C42480D4BB2B27

Amount of Each Receipt this Period
875.00

Carnevale/ Ad

B. Full Name (Last, First, Middle Initial)
Friends Of Jim Matthews

Mailing Address 115 W. GERMANTOWN PIKE

City NORRISTOWN State PA Zip Code 19401

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 2 / 1 0 / 2 0 0 9

Transaction ID: A17D7FCFA63974AF1B9B

Amount of Each Receipt this Period
350.00

Carnevale

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

Mailing Address PO Box 682

City Pilgrim Gardens State PA Zip Code 19026

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4200.00

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

Transaction ID: AF6EAC06286774BFB942

Amount of Each Receipt this Period
4200.00

Carnevale

SUBTOTAL of Receipts This Page (optional) ► **5425.00**

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 47 / 86

(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

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

A.

Full Name (Last, First, Middle Initial)
Friends of Saidel

Mailing Address 1530 Chestnut St.
Suite 500

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 3 / 2 0 0 9

Transaction ID: A1DF32A34E75F48ECB24

Amount of Each Receipt this Period

175.00

Carnevale

B.

Full Name (Last, First, Middle Initial)
Friends to Elect Christine M. Tartaglione

Mailing Address P.O. BOx 52153

City State Zip Code
Philadelphia PA 19115

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 2 / 2 0 0 9

Transaction ID: A90ABFC5ECD1F4FBD96B

Amount of Each Receipt this Period

650.00

Carnevale

C.

Full Name (Last, First, Middle Initial)
Friends to Elect Christine M. Tartaglione

Mailing Address P.O. BOx 52153

City State Zip Code
Philadelphia PA 19115

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 9

Transaction ID: AE1806CEDD6054D3089B

Amount of Each Receipt this Period

50.00

Carnevale

SUBTOTAL of Receipts This Page (optional) ▶

875.00

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 48 / 86
	<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) IUOE Local 542 Political Action Fund	Date of Receipt MM / DD / YYYY 02 / 10 / 2009
	Mailing Address 1375 Virginia Drive Suite 100	Transaction ID: A1D2107BA956545FD95D
	City State Zip Code Fort Washington PA 19034	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	Carnevale
	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	

B.	Full Name (Last, First, Middle Initial) Peco Pac	Date of Receipt MM / DD / YYYY 02 / 26 / 2009
	Mailing Address 2301 Market St. PO Box 8699	Transaction ID: AD30DD8054BEE4152B46
	City State Zip Code Philadelphia PA 19101-8699	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	Contribution
	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	

C.	Full Name (Last, First, Middle Initial) Pennsylvania Realtors PAC	Date of Receipt MM / DD / YYYY 02 / 10 / 2009
	Mailing Address 4501 Chambers Hill Road	Transaction ID: A6C2934A4B2DD4D8689C
	City State Zip Code Harrisburg PA 17111	Amount of Each Receipt this Period 1400.00
	FEC ID number of contributing federal political committee. C	Carnevale
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1400.00	

SUBTOTAL of Receipts This Page (optional)	▶	2100.00
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 49 / 86	
	(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"/> 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) Reinforced Iron Workers Riggers & Machin		Date of Receipt																					
	Mailing Address Local Union #45 2433 Reed 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>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	1		1	5		2	0	0	9														
	City Philadelphia		State PA	Zip Code 19146																				
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>																					
Name of Employer		Occupation																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="150.00"/>																						
		Transaction ID: A2E8650ABBB93479FA95		Amount of Each Receipt this Period																				
				<input type="text" value="150.00"/>																				
		Membership Dues																						

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="9600.00"/>

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

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

FOR LINE NUMBER: PAGE 50 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
American Express
Mailing Address P.O. BOX 53452
City PHOENIX State AZ Zip Code 85072-3852
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 150.00
Date of Receipt 01 / 16 / 2009
Transaction ID: A21B222985B2544F5B86
Amount of Each Receipt this Period 150.00
Reimbursement

B. Full Name (Last, First, Middle Initial)
American Express
Mailing Address P.O. BOX 53452
City PHOENIX State AZ Zip Code 85072-3852
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 02 / 02 / 2009
Transaction ID: A02132831E4E040398A9
Amount of Each Receipt this Period 250.00
Reimbursement

C. Full Name (Last, First, Middle Initial)
American Express
Mailing Address P.O. BOX 53452
City PHOENIX State AZ Zip Code 85072-3852
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 02 / 17 / 2009
Transaction ID: A4BAC7AB2EE9F4D639A6
Amount of Each Receipt this Period 150.00
Reimbursement

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) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 51 / 86	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" 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) Cardworks Acquiring		Date of Receipt
Mailing Address 101 Crossways Park West		<input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
City	State	Zip Code
Woodbury	NY	11797
FEC ID number of contributing federal political committee.		Transaction ID: A9430440F9B2346229F0
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="101.59"/>
Occupation		Reimbursement
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="101.59"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="101.59"/>
TOTAL This Period (last page this line number only)	<input type="text" value="651.59"/>

**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

A. Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. BOX 53452 City PHOENIX State AZ Zip Code 85072-3852 Purpose of Disbursement Merchant Credit Card Fees Candidate Name	Transaction ID: BD8178EA842C24D5787C Date of Disbursement 01 / 05 / 2009
	Amount of Each Disbursement this Period 14.90
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

B. Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. BOX 53452 City PHOENIX State AZ Zip Code 85072-3852 Purpose of Disbursement Merchant Credit Card Fees Candidate Name	Transaction ID: B2B214F64F95041A6B1F Date of Disbursement 02 / 02 / 2009
	Amount of Each Disbursement this Period 4.95
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

C. Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. BOX 53452 City PHOENIX State AZ Zip Code 85072-3852 Purpose of Disbursement Merchant Credit Card Fees Candidate Name	Transaction ID: BF8DEC0D0081048FEB6D Date of Disbursement 02 / 04 / 2009
	Amount of Each Disbursement this Period 4.43
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) ▶	24.28
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

A. Full Name (Last, First, Middle Initial) American Express <hr/> Mailing Address P.O. BOX 53452 <hr/> City PHOENIX State AZ Zip Code 85072-3852 <hr/> Purpose of Disbursement Merchant Credit Card Fees Candidate Name <hr/> 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) ▼	Transaction ID: BA599E981CFE7461EB2F Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 4.95
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) American Express <hr/> Mailing Address P.O. BOX 53452 <hr/> City PHOENIX State AZ Zip Code 85072-3852 <hr/> Purpose of Disbursement Merchant Credit Card Fees Candidate Name <hr/> 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) ▼	Transaction ID: B12A7E79E4F2D4794A44 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 11.81
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Anderson Delone <hr/> Mailing Address 427 Glen Echo Road <hr/> City Philadelphia State PA Zip Code 19119-2915 <hr/> Purpose of Disbursement PAC Fundraising Event-Decor Candidate Name <hr/> 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) ▼	Transaction ID: B57BD50FFDC1444B0B0F Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 9
	Amount of Each Disbursement this Period 900.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	916.76
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

<p>A. Full Name (Last, First, Middle Initial) Aristotle International</p> <p>Mailing Address 205 Pennsylvania Ave., SE</p> <p>City Washington State DC Zip Code 20003-1164</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B7EBBEC1E66AD4D5FAE7</p> <p>Date of Disbursement MM / DD / YYYY 02 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1272.00</p>
<p>B. Full Name (Last, First, Middle Initial) Aristotle International</p> <p>Mailing Address 205 Pennsylvania Ave., SE</p> <p>City Washington State DC Zip Code 20003-1164</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B56969F3E2EB244E8993</p> <p>Date of Disbursement MM / DD / YYYY 03 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 88.00</p>
<p>C. Full Name (Last, First, Middle Initial) Aristotle International</p> <p>Mailing Address 205 Pennsylvania Ave., SE</p> <p>City Washington State DC Zip Code 20003-1164</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BB4D195C179004E34B10</p> <p>Date of Disbursement MM / DD / YYYY 03 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 59.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1419.00

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 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

A. Full Name (Last, First, Middle Initial) Aristotle International <hr/> Mailing Address 205 Pennsylvania Ave., SE <hr/> City Washington State DC Zip Code 20003-1164 <hr/> Purpose of Disbursement February Payment Candidate Name <hr/> 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) ▼	Transaction ID: B0A39191862044105A31 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 9
	Amount of Each Disbursement this Period 2425.00 Category/Type
B. Full Name (Last, First, Middle Initial) Aristotle International <hr/> Mailing Address 205 Pennsylvania Ave., SE <hr/> City Washington State DC Zip Code 20003-1164 <hr/> Purpose of Disbursement January Payment Candidate Name <hr/> 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) ▼	Transaction ID: BACD399F5F0BA467DB9A Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 9
	Amount of Each Disbursement this Period 2425.00 Category/Type
C. Full Name (Last, First, Middle Initial) Aristotle International <hr/> Mailing Address 205 Pennsylvania Ave., SE <hr/> City Washington State DC Zip Code 20003-1164 <hr/> Purpose of Disbursement March Payment Candidate Name <hr/> 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) ▼	Transaction ID: B1FC585EA5AFA4AD589A Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 9
	Amount of Each Disbursement this Period 2425.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

7275.00

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 only one)

PAGE 56 / 86

<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

A. Full Name (Last, First, Middle Initial) Aristotle International <hr/> Mailing Address 205 Pennsylvania Ave., SE <hr/> City Washington State DC Zip Code 20003-1164 <hr/> Purpose of Disbursement April Payment Candidate Name <hr/> 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) ▼	Transaction ID: B6C85E4E9069B47EA8AA Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2009
	Amount of Each Disbursement this Period 2425.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Aristotle International <hr/> Mailing Address 205 Pennsylvania Ave., SE <hr/> City Washington State DC Zip Code 20003-1164 <hr/> Purpose of Disbursement May Payment Candidate Name <hr/> 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) ▼	Transaction ID: B4E9FF82F2C6D4BECBBE Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2009
	Amount of Each Disbursement this Period 2425.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Authorize.net <hr/> Mailing Address 915 S. 500 EAST SUITE 200 <hr/> City AMERICAN FORK State UT Zip Code 84003 <hr/> Purpose of Disbursement Merchant Credit Card Fees Candidate Name <hr/> 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) ▼	Transaction ID: BB3EEEF17931047A1BF6 Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2009
	Amount of Each Disbursement this Period 10.65
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	4860.65
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

<p>A. Full Name (Last, First, Middle Initial) Authorize.net</p> <p>Mailing Address 915 S. 500 EAST SUITE 200</p> <p>City AMERICAN FORK State UT Zip Code 84003</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC41CE7759D49472FAB1</p> <p>Date of Disbursement 02 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 10.35</p>
<p>B. Full Name (Last, First, Middle Initial) Authorize.net</p> <p>Mailing Address 915 S. 500 EAST SUITE 200</p> <p>City AMERICAN FORK State UT Zip Code 84003</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B4A196DC9968C439B804</p> <p>Date of Disbursement 03 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 10.35</p>
<p>C. Full Name (Last, First, Middle Initial) Authorize.net</p> <p>Mailing Address 915 S. 500 EAST SUITE 200</p> <p>City AMERICAN FORK State UT Zip Code 84003</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BEC6DF9C190BE46E6842</p> <p>Date of Disbursement 04 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 10.00</p>

SUBTOTAL of Disbursements This Page (optional)	30.70
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

A.	Full Name (Last, First, Middle Initial) Authorize.net	Transaction ID: B88D7D6E2DF6A4808BE8
	Mailing Address 915 S. 500 EAST SUITE 200	Date of Disbursement MM / DD / YYYY 05 / 04 / 2009
	City AMERICAN FORK State UT Zip Code 84003	Amount of Each Disbursement this Period 10.00
	Purpose of Disbursement Merchant Credit Card Fees 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) ▼

B.	Full Name (Last, First, Middle Initial) Authorize.net	Transaction ID: B3B6F1967AD844D41B41
	Mailing Address 915 S. 500 EAST SUITE 200	Date of Disbursement MM / DD / YYYY 06 / 02 / 2009
	City AMERICAN FORK State UT Zip Code 84003	Amount of Each Disbursement this Period 10.00
	Purpose of Disbursement Merchant Credit Card Fees 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) ▼

C.	Full Name (Last, First, Middle Initial) Barna Advisory Services, Pc	Transaction ID: B5BEAF458241949239D1
	Mailing Address 270 S. Woodmont Dr.	Date of Disbursement MM / DD / YYYY 03 / 23 / 2009
	City Downingtown State PA Zip Code 19335	Amount of Each Disbursement this Period 2250.00
	Purpose of Disbursement Accounting Fees 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)	2270.00
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 only one)

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<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Martin Benedetto</p> <p>Mailing Address 7 Madison Rd</p> <p>City Willow Grove State PA Zip Code 19090-3032</p> <p>Purpose of Disbursement PAC Fundraising Event-Entertainment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BAE9082979D3D4159A0B</p> <p>Date of Disbursement 02 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Capitol Advantage Publishing</p> <p>Mailing Address 8382 H TERMINAL RD</p> <p>City LORTON State VA Zip Code 22079</p> <p>Purpose of Disbursement Publication</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B4E778F23B8BA41899B7</p> <p>Date of Disbursement 01 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 16.00</p> <p>Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Cardworks Acquiring</p> <p>Mailing Address 101 Crossways Park West</p> <p>City Woodbury State NY Zip Code 11797</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B11DFE55926774149B56</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 88.38</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional)	454.38
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)

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<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

<p>A. Full Name (Last, First, Middle Initial) Cardworks Acquiring</p> <p>Mailing Address 101 Crossways Park West</p> <p>City Woodbury State NY Zip Code 11797</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B4FCECE2A408841EABAC</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 0.26</p>
<p>B. Full Name (Last, First, Middle Initial) Cardworks Acquiring</p> <p>Mailing Address 101 Crossways Park West</p> <p>City Woodbury State NY Zip Code 11797</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC32BF56D6EC74D4A9F0</p> <p>Date of Disbursement 02 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 102.00</p>
<p>C. Full Name (Last, First, Middle Initial) Cardworks Acquiring</p> <p>Mailing Address 101 Crossways Park West</p> <p>City Woodbury State NY Zip Code 11797</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF933845F52394B2F859</p> <p>Date of Disbursement 02 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 0.26</p>

SUBTOTAL of Disbursements This Page (optional) ▶

102.52

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

<p>A. Full Name (Last, First, Middle Initial) Cardworks Acquiring</p> <p>Mailing Address 101 Crossways Park West</p> <p>City Woodbury State NY Zip Code 11797</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BB17F4EC214914BBA87E</p> <p>Date of Disbursement 03 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 75.00</p>
<p>B. Full Name (Last, First, Middle Initial) Cardworks Acquiring</p> <p>Mailing Address 101 Crossways Park West</p> <p>City Woodbury State NY Zip Code 11797</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B61627EB6390C43D9828</p> <p>Date of Disbursement 03 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 102.60</p>
<p>C. Full Name (Last, First, Middle Initial) Cardworks Acquiring</p> <p>Mailing Address 101 Crossways Park West</p> <p>City Woodbury State NY Zip Code 11797</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BAA97D5C24A244F77B72</p> <p>Date of Disbursement 03 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 60.00</p>

SUBTOTAL of Disbursements This Page (optional)	237.60
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

<p>A. Full Name (Last, First, Middle Initial) Cardworks Acquiring</p> <p>Mailing Address 101 Crossways Park West</p> <p>City Woodbury State NY Zip Code 11797</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B582E2C5DE0D6468C9BD</p> <p>Date of Disbursement 04 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 75.00</p>
<p>B. Full Name (Last, First, Middle Initial) Cardworks Acquiring</p> <p>Mailing Address 101 Crossways Park West</p> <p>City Woodbury State NY Zip Code 11797</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B3B5BFB4DBB56440C98C</p> <p>Date of Disbursement 04 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 100.00</p>
<p>C. Full Name (Last, First, Middle Initial) Cardworks Acquiring</p> <p>Mailing Address 101 Crossways Park West</p> <p>City Woodbury State NY Zip Code 11797</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD95C070D57524336918</p> <p>Date of Disbursement 05 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 75.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

250.00

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 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

A. Full Name (Last, First, Middle Initial) Cardworks Acquiring Mailing Address 101 Crossways Park West City Woodbury State NY Zip Code 11797 Purpose of Disbursement Merchant Credit Card Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: B718DDAE89A8A4DF4BEB Date of Disbursement 05 / 04 / 2009
	Amount of Each Disbursement this Period 100.00
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Cardworks Acquiring Mailing Address 101 Crossways Park West City Woodbury State NY Zip Code 11797 Purpose of Disbursement Merchant Credit Card Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: B6292853B44234D71BA2 Date of Disbursement 06 / 02 / 2009
	Amount of Each Disbursement this Period 100.00
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Cardworks Acquiring Mailing Address 101 Crossways Park West City Woodbury State NY Zip Code 11797 Purpose of Disbursement Merchant Credit Card Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: B427C97E7C8544C6ABB2 Date of Disbursement 06 / 02 / 2009
	Amount of Each Disbursement this Period 75.00
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ► **275.00**

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 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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Cashman & Associates</p> <p>Mailing Address 1000 North Hancock Street</p> <p>City Philadelphia State PA Zip Code 19123-2300</p> <p>Purpose of Disbursement PAC Fundraising Event - Planning Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BCBE9AACF647E45DE90E</p> <p>Date of Disbursement 02 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Cashman & Associates</p> <p>Mailing Address 1000 North Hancock Street</p> <p>City Philadelphia State PA Zip Code 19123-2300</p> <p>Purpose of Disbursement PAC Fundraising Event- Planning Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B0A257FB0A6D944268AA</p> <p>Date of Disbursement 04 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 2797.70</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Center City Engraving & Awards, Inc.</p> <p>Mailing Address 1206 WALNUT ST.</p> <p>City PHILADELPHIA State PA Zip Code 19107</p> <p>Purpose of Disbursement PAC Fundraising Event-Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF1E693203F4F4B81A9E</p> <p>Date of Disbursement 01 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 686.94</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5484.64

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)

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<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

<p>A. Full Name (Last, First, Middle Initial) Christo Consulting</p> <p>Mailing Address 314 Ruth Road</p> <p>City Harleysville State PA Zip Code 19438-1919</p> <p>Purpose of Disbursement Website Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF012E2E3F775433791A</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Communication Services And Support</p> <p>Mailing Address 850 Penllyn-Blue Bell Pike</p> <p>City Blue Bell State PA Zip Code 19422-1648</p> <p>Purpose of Disbursement PAC Fundraising Event-Invitations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B6F3A3931231F4860AAD</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2812.88"/></p>
<p>C. Full Name (Last, First, Middle Initial) Communication Services And Support</p> <p>Mailing Address 850 Penllyn-Blue Bell Pike</p> <p>City Blue Bell State PA Zip Code 19422-1648</p> <p>Purpose of Disbursement Business Cards</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B30A129EC234C4E61949</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

3062.88

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)

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<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

<p>A. Full Name (Last, First, Middle Initial) Communication Services And Support</p> <p>Mailing Address 850 Penllyn-Blue Bell Pike</p> <p>City Blue Bell State PA Zip Code 19422-1648</p> <p>Purpose of Disbursement PAC Fundraising Event- Program</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF11BB10839F249919B9</p> <p>Date of Disbursement 02 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 2140.00</p>
<p>B. Full Name (Last, First, Middle Initial) Concentric Services</p> <p>Mailing Address 55 ALMADEN BLVD, 7TH FLOOR</p> <p>City SAN JOSE State CA Zip Code 95113</p> <p>Purpose of Disbursement Website Maintenance Costs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B716E473434854175A81</p> <p>Date of Disbursement 01 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 19.95</p>
<p>C. Full Name (Last, First, Middle Initial) Conference Call.com</p> <p>Mailing Address PO BOX 409573</p> <p>City ATLANTA State GA Zip Code 30384</p> <p>Purpose of Disbursement Communication Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BA5F2593278EE46AFBB4</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 66.45</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2226.40

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)

<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

<p>A. Full Name (Last, First, Middle Initial) Rob Diener</p> <p>Mailing Address 1518 Fayette Ave</p> <p>City Reading State PA Zip Code 19607-2140</p> <p>Purpose of Disbursement PAC Fundraising Event-Entertainment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B7773EF79A06A40E5951</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="550.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Discover Merchant Services</p> <p>Mailing Address 2500 Lake Cook Rd.</p> <p>City Riverwood State IL Zip Code 60015</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B4685E02BFD004A41A31</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Discover Merchant Services</p> <p>Mailing Address 2500 Lake Cook Rd.</p> <p>City Riverwood State IL Zip Code 60015</p> <p>Purpose of Disbursement Merchant Bankcard Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B370D988B61FD451D98B</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="175.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="875.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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)

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<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Discover Merchant Services</p> <p>Mailing Address 2500 Lake Cook Rd.</p> <p>City Riverwood State IL Zip Code 60015</p> <p>Purpose of Disbursement Merchant Bankcard Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B056F628F7BB849D69B4</p> <p>Date of Disbursement 01 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 34.95</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Discover Merchant Services</p> <p>Mailing Address 2500 Lake Cook Rd.</p> <p>City Riverwood State IL Zip Code 60015</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BB0492CC7DB464A54B40</p> <p>Date of Disbursement 02 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 15.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Discover Merchant Services</p> <p>Mailing Address 2500 Lake Cook Rd.</p> <p>City Riverwood State IL Zip Code 60015</p> <p>Purpose of Disbursement Merchant Bankcard Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B6FB183C3BF604135862</p> <p>Date of Disbursement 02 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 25.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

74.95

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

A. Full Name (Last, First, Middle Initial) Discover Merchant Services Mailing Address 2500 Lake Cook Rd. City Riverwood State IL Zip Code 60015 Purpose of Disbursement Merchant Bankcard 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) ▼	Transaction ID: BC2F0E0DBEE2041B8954 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 34.95 Category/Type

B. Full Name (Last, First, Middle Initial) Discover Merchant Services Mailing Address 2500 Lake Cook Rd. City Riverwood State IL Zip Code 60015 Purpose of Disbursement Merchant BankCard 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) ▼	Transaction ID: BE5FC77B8506847758C3 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 25.00 Category/Type

C. Full Name (Last, First, Middle Initial) Discover Merchant Services Mailing Address 2500 Lake Cook Rd. City Riverwood State IL Zip Code 60015 Purpose of Disbursement Merchant 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) ▼	Transaction ID: B965FC683394441B6BF5 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 15.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ► **74.95**

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

<p>A. Full Name (Last, First, Middle Initial) Discover Merchant Services</p> <p>Mailing Address 2500 Lake Cook Rd.</p> <p>City Riverwood State IL Zip Code 60015</p> <p>Purpose of Disbursement Merchant BankCard Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B162C3DEB5B87472D842</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="34.95"/></p>
<p>B. Full Name (Last, First, Middle Initial) Discover Merchant Services</p> <p>Mailing Address 2500 Lake Cook Rd.</p> <p>City Riverwood State IL Zip Code 60015</p> <p>Purpose of Disbursement Merhcant Bankcard Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B26726B91E6F8475A88C</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Discover Merchant Services</p> <p>Mailing Address 2500 Lake Cook Rd.</p> <p>City Riverwood State IL Zip Code 60015</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B3A78D3C3B82243018A7</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="35.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="94.95"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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

<p>A. Full Name (Last, First, Middle Initial) Discover Merchant Services</p> <p>Mailing Address 2500 Lake Cook Rd.</p> <p>City Riverwood State IL Zip Code 60015</p> <p>Purpose of Disbursement Merchant Bank Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BA5570A963143470D965</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 34.95</p>
<p>B. Full Name (Last, First, Middle Initial) Discover Merchant Services</p> <p>Mailing Address 2500 Lake Cook Rd.</p> <p>City Riverwood State IL Zip Code 60015</p> <p>Purpose of Disbursement Merchant Bankcard Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B3E4C56F8EBCE4153B1F</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 25.00</p>
<p>C. Full Name (Last, First, Middle Initial) Discover Merchant Services</p> <p>Mailing Address 2500 Lake Cook Rd.</p> <p>City Riverwood State IL Zip Code 60015</p> <p>Purpose of Disbursement Merchant Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BFB7DE6F96FD047CF95E</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 35.00</p>

SUBTOTAL of Disbursements This Page (optional)	94.95
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

A. Full Name (Last, First, Middle Initial) Discover Merchant Services Mailing Address 2500 Lake Cook Rd. City Riverwood State IL Zip Code 60015 Purpose of Disbursement Merchant Bankcard 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) ▼	Transaction ID: B93C4C9738B1E4D27A7A Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.95 Category/Type

B. Full Name (Last, First, Middle Initial) Discover Merchant Services Mailing Address 2500 Lake Cook Rd. City Riverwood State IL Zip Code 60015 Purpose of Disbursement Merchant Bankcard 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) ▼	Transaction ID: BAA5F97880B0F4DE7896 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 25.00 Category/Type

C. Full Name (Last, First, Middle Initial) Discover Merchant Services Mailing Address 2500 Lake Cook Rd. City Riverwood State IL Zip Code 60015 Purpose of Disbursement Merchant Creditcard 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) ▼	Transaction ID: BE1E90BE213C44509AB5 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 35.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ► **94.95**

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)

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<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

<p>A. Full Name (Last, First, Middle Initial) Discover Merchant Services</p> <p>Mailing Address 2500 Lake Cook Rd.</p> <p>City Riverwood State IL Zip Code 60015</p> <p>Purpose of Disbursement Merchant Bankcard Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B59C83420EDEC4AC38BD</p> <p>Date of Disbursement 06 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 34.95</p>
<p>B. Full Name (Last, First, Middle Initial) Franco's Trattoria</p> <p>Mailing Address 4116 Ridge Avenue</p> <p>City Philadelphia State PA Zip Code 19129-1534</p> <p>Purpose of Disbursement Meeting Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B54E3352AE5894132BEA</p> <p>Date of Disbursement 04 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 165.13</p>
<p>C. Full Name (Last, First, Middle Initial) Tina Katsos</p> <p>Mailing Address 7 Madison Rd</p> <p>City Willow Grove State PA Zip Code 19090-3032</p> <p>Purpose of Disbursement PAC Fundraising Event - Entertainment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B2CC603ECB0E645BFAEC</p> <p>Date of Disbursement 02 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p>

SUBTOTAL of Disbursements This Page (optional)	550.08
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

<p>A. Full Name (Last, First, Middle Initial) La Collina</p> <p>Mailing Address 37-41 ASHLAND AVE.</p> <p>City BELMONT HILLS State PA Zip Code 19004</p> <p>Purpose of Disbursement Meeting Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BBA8557DE7034473E95B</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="545.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) La Collina</p> <p>Mailing Address 37-41 ASHLAND AVE.</p> <p>City BELMONT HILLS State PA Zip Code 19004</p> <p>Purpose of Disbursement Meeting Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B4B783F67DD17489192A</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="573.05"/></p>
<p>C. Full Name (Last, First, Middle Initial) La Collina</p> <p>Mailing Address 37-41 ASHLAND AVE.</p> <p>City BELMONT HILLS State PA Zip Code 19004</p> <p>Purpose of Disbursement Meeting Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B092602293F524F139EB</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="82.50"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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)

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<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

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

A. Full Name (Last, First, Middle Initial) La Collina <hr/> Mailing Address 37-41 ASHLAND AVE. <hr/> City BELMONT HILLS State PA Zip Code 19004 Purpose of Disbursement Meeting Expenses Candidate Name <hr/> 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) ▼	Transaction ID: BFCC71C83C2F74D39918 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 155.75
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) La Collina <hr/> Mailing Address 37-41 ASHLAND AVE. <hr/> City BELMONT HILLS State PA Zip Code 19004 Purpose of Disbursement Meeting Expenses Candidate Name <hr/> 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) ▼	Transaction ID: B2FA128AF0AAE4DAEB0B Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 33.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Luigi & Giovanni Caterers <hr/> Mailing Address 3601 Chapel Rd. <hr/> City Newtown Square State PA Zip Code 19073-3602 Purpose of Disbursement PAC Fundraising Event-Catering Candidate Name <hr/> 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) ▼	Transaction ID: BF6719961FC294D4B992 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 9
	Amount of Each Disbursement this Period 4825.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

5013.75

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

<p>A. Full Name (Last, First, Middle Initial) Luigi & Giovanni Caterers</p> <p>Mailing Address 3601 Chapel Rd.</p> <p>City Newtown Square State PA Zip Code 19073-3602</p> <p>Purpose of Disbursement PAC Fundraising Event- Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BDDA4D470A8D34EDC81F</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 372.50</p>
<p>B. Full Name (Last, First, Middle Initial) Frank Marco</p> <p>Mailing Address 7 Madison Rd</p> <p>City Willow Grove State PA Zip Code 19090-3032</p> <p>Purpose of Disbursement PAC Fundraising Event - Entertainment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B6D3782F7E3354EEE996</p> <p>Date of Disbursement 02 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p>
<p>C. Full Name (Last, First, Middle Initial) Mike Mountain Photography</p> <p>Mailing Address 737 N. EASTON RD.</p> <p>City GLENSIDE State PA Zip Code 19038</p> <p>Purpose of Disbursement PAC Fundraising Event-Photography</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BAE87BE987DBE4311866</p> <p>Date of Disbursement 02 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 747.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1469.50

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)

<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

<p>A. Full Name (Last, First, Middle Initial) Network Solutions</p> <p>Mailing Address 10 AZALEA DR</p> <p>City DRUMS State PA Zip Code 18222</p> <p>Purpose of Disbursement Website Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BDF9AA2A32BAD4AA6AD9</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) PA Department of State Corp. Bureau</p> <p>Mailing Address 206 North Office Building</p> <p>City Harrisburg State PA Zip Code 17120-0103</p> <p>Purpose of Disbursement Annual Registration</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B14A69B8C2CB6422C842</p> <p>Date of Disbursement</p> <p><input type="text" value="01"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="86.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) David Pascoe</p> <p>Mailing Address 201 Tompkins Street</p> <p>City Pittston State PA Zip Code 18640-1057</p> <p>Purpose of Disbursement PAC Fundraising Event - Entertainment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BAC90052C2EDD4B1FA1A</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="350.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

A. Full Name (Last, First, Middle Initial) Priestly Printers <hr/> Mailing Address 233-45 N. JUNIPER ST <hr/> City PHILADELPHIA State PA Zip Code 19107 Purpose of Disbursement PAC Fundraising Event-Invitations Candidate Name <hr/> 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) ▼	Transaction ID: B28F81B24570A4FB1B00 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 107.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Radnor Restaurant <hr/> Mailing Address 591 E Lancaster Ave <hr/> City St Davids State PA Zip Code 19087 Purpose of Disbursement Meeting Expenses Candidate Name <hr/> 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) ▼	Transaction ID: B28547D0794CA43DAB5F Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 9
	Amount of Each Disbursement this Period 80.49
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Robertson's Flowers <hr/> Mailing Address 1301 Mermaid Lane <hr/> City Wyndmoor State PA Zip Code 19038-7636 Purpose of Disbursement PAC Fundraising Event-Floral Arrangement Candidate Name <hr/> 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) ▼	Transaction ID: BD977C42692884AA88EA Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1187.49
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

<p>A. Full Name (Last, First, Middle Initial) Robertson's Flowers</p> <p>Mailing Address 1301 Mermaid Lane</p> <p>City Wyndmoor State PA Zip Code 19038-7636</p> <p>Purpose of Disbursement PAC Fundraising Event-Floral Arrangement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B762996BE4BF04348B5D</p> <p>Date of Disbursement 02 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 2042.00</p>
<p>B. Full Name (Last, First, Middle Initial) Anthony Sandor</p> <p>Mailing Address 7 Madison Rd</p> <p>City Willow Grove State PA Zip Code 19090-3032</p> <p>Purpose of Disbursement PAC Fundraising Event-Entertainment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B2FDDFD821D714378B37</p> <p>Date of Disbursement 02 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p>
<p>C. Full Name (Last, First, Middle Initial) Sheraton Society Hill</p> <p>Mailing Address ONE DOCK ST.</p> <p>City PHILADELPHIA State PA Zip Code 19106</p> <p>Purpose of Disbursement PAC Fundraising Event-Venue</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BFA0474DECD474267866</p> <p>Date of Disbursement 02 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 32375.14</p>

SUBTOTAL of Disbursements This Page (optional)	34767.14
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

<p>A. Full Name (Last, First, Middle Initial) Spasso Italian Grill</p> <p>Mailing Address 34 S Front Street</p> <p>City Philadelphia State PA Zip Code 19106-3019</p> <p>Purpose of Disbursement Meeting Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BCC09444F8F7741318F7</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="77.41"/></p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 1044 Market St.</p> <p>City Philadelphia State PA Zip Code 19107-4205</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B275A9D8B14174A7586A</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="39.54"/></p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Robert Taylor</p> <p>Mailing Address 2456 Eldon Ave</p> <p>City Drexel Hill State PA Zip Code 19026-1003</p> <p>Purpose of Disbursement PAC Fundraising Event - Entertainment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B5F29E03676C84691BFF</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="350.00"/></p> <p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="466.95"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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

<p>A. Full Name (Last, First, Middle Initial) The Chambers Group</p> <p>Mailing Address 147 Pennsylvania Avenue</p> <p>City Malvern State PA Zip Code 19355-2419</p> <p>Purpose of Disbursement Carnevale Mailings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B943646D0E1FB490791A</p> <p>Date of Disbursement 01 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 808.24</p>
<p>B. Full Name (Last, First, Middle Initial) The Toner Sound Entertainment Group, Inc.</p> <p>Mailing Address 4009 Market Street Suite H</p> <p>City Aston State PA Zip Code 19014-3140</p> <p>Purpose of Disbursement PAC Fundraising Event-Decor</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B6C6D6FD3892D4A9E890</p> <p>Date of Disbursement 02 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 1440.00</p>
<p>C. Full Name (Last, First, Middle Initial) Union League Of Philadelphia</p> <p>Mailing Address 140 S BROAD ST.</p> <p>City PHILADELPHIA State PA Zip Code 19102</p> <p>Purpose of Disbursement PAC Fundraising Event- Costs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BA77EA10D9AFA4509973</p> <p>Date of Disbursement 03 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 6000.00</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>8248.24</p>
<p>TOTAL This Period (last page this line number only)</p>	

**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)

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<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

A.

Full Name (Last, First, Middle Initial)
Uta Associates

Transaction ID: B7076B071BE0F447E88C

Date of Disbursement

Mailing Address 1205 LOCUST ST
SUITE 100

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	0	9

City PHILADELPHIA State PA Zip Code 19107

Amount of Each Disbursement this Period

815.87

Purpose of Disbursement
Compensation for Fundraising Svcs

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

815.87

TOTAL This Period (last page this line number only)

84505.13

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)

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<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

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

<p>A. Full Name (Last, First, Middle Initial) Friends of Val DiGiorgio</p> <p>Mailing Address 925 Railway Square</p> <p>City West Chester State PA Zip Code 19380</p> <p>Purpose of Disbursement Fundraiser</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2009</p>	<p>Transaction ID: B413AC61ECBA841A8A12</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 750.00</p>
<p>B. Full Name (Last, First, Middle Initial) Order Sons of Italy In America</p> <p>Mailing Address The Curtis Center, Suite 718 601 Walnut Street</p> <p>City Philadelphia State PA Zip Code 19106-3323</p> <p>Purpose of Disbursement Parade Sponsorship</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2009</p>	<p>Transaction ID: BF3DD940B4DBF4307A48</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) SS John Neuman & Maria Goretti High School</p> <p>Mailing Address 1736 S. 10th Street</p> <p>City Philadelphia State PA Zip Code 19148-1644</p> <p>Purpose of Disbursement Ad- 2009 Valentine Ball</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2009</p>	<p>Transaction ID: B277F6FADCB954985B74</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 150.00</p>

SUBTOTAL of Disbursements This Page (optional)	1900.00
TOTAL This Period (last page this line number only)	1900.00

SCHEDULE C (FEC Form 3X)

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

FOR LINE 13 OF FORM 3X

LOANS

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

Transaction ID: C3187E5A628C743228E0

LOAN SOURCE Full Name (Last, First, Middle Initial)
Cav. Amato L. Berardi

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 555 East City Line Ave.
Suite 770

City Bala Cynwyd State PA ZIP Code 19004-1115

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2500.00	0.00	2500.00

TERMS

Date Incurred: M M 03 D D 17 Y Y Y Y 2001
 Date Due: _____ Interest Rate: None % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____

SUBTOTALS This Period This Page (optional)	▶	2500.00
TOTALS This Period (last page in this line only)	▶	_____

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)

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

LOANS

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

Transaction ID: C654E5658AE49426EABD

LOAN SOURCE Full Name (Last, First, Middle Initial) Cav. Amato L. Berardi	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 555 East City Line Ave. Suite 770	
City Bala Cynwyd State PA ZIP Code 19004-1115	

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:																
<table style="font-size: small;"> <tr><td>M</td><td>M</td></tr> <tr><td>0</td><td>6</td></tr> </table>	M	M	0	6	<table style="font-size: small;"> <tr><td>D</td><td>D</td></tr> <tr><td>1</td><td>5</td></tr> </table>	D	D	1	5	<table style="font-size: small;"> <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>1</td></tr> </table>	Y	Y	Y	Y	2	0	0	1	None % (apr) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
M	M																		
0	6																		
D	D																		
1	5																		
Y	Y	Y	Y																
2	0	0	1																

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" 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.	