

# 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

ORBPAC

ADDRESS (number and street) 21839 Atlantic Blvd.  
4th Floor  
 Check if different than previously reported. (ACC)  
Dulles VA 20166

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00195263

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 10 23 2006 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 10 01 2006 through 10 18 2006

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

Type or Print Name of Treasurer Ms. Marie Craft

Signature of Treasurer Electronically Filed by Ms. Marie Craft Date 10 23 2006

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

Office Use Only							
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
ORB PAC

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		20423.69
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	42314.90									
(c) Total Receipts (from Line 19) .....	10059.44	105550.65								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	52374.34	125974.34								
7. Total Disbursements (from Line 31) .....	5000.00	78600.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	47374.34	47374.34								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
ORB PAC

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	8716.44	68482.50
(i) Itemized (use Schedule A) .....	1343.00	37068.15
(ii) Unitemized .....		
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	10059.44	105550.65
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....	10059.44	105550.65
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	10059.44	105550.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	10059.44	105550.65

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	76100.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	2500.00
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))..	5000.00	78600.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	5000.00	78600.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	10059.44	105550.65
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10059.44	105550.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one) <input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 6 / 64
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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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. BRENT R R. COLLINS</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1036689717717
Mailing Address 2225 W. Frye Road, #1112		Amount of Each Receipt this Period 168.16
City Chandler State AZ Zip Code 85224	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Orbital Sciences Corporation Occupation Deputy General Manager for Operations	Aggregate Year-to-Date ▼ 1765.68	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$84.08 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. MICHELLE L L. FRANK</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1064651517717
Mailing Address 42843 GLYNDEBOURNE COURT		Amount of Each Receipt this Period 24.00
City ASHBURN State VA Zip Code 20148	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Orbital Sciences Corporation Occupation Supervisor	Aggregate Year-to-Date ▼ 252.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$12.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. CHRISTOPHER CONDREY</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1079799817717
Mailing Address 1414 S. BARTON STREET, #448		Amount of Each Receipt this Period 20.00
City ARLINGTON State VA Zip Code 22204	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Orbital Sciences Corporation Occupation Engineer	Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$10.00 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	212.16
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. CLIFFORD I I. CUMMINGS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 521 CLAGETT STREET		<b>Transaction ID: PR1079799917717</b>
City State Zip Code LEESBURG VA 20175	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$10.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. WILLIAM D D. WILLIAMS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 48 WHITE PINE CIRCLE, #203		<b>Transaction ID: PR1079800117717</b>
City State Zip Code STAFFORD VA 22554	Amount of Each Receipt this Period _____ 30.38	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation Lead Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 328.39	P/R Deduction (\$15.19 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. DALE J J. KENNEDY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5720 W. PARK AVENUE		<b>Transaction ID: PR1079832117717</b>
City State Zip Code CHANDLER AZ 85226	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$10.00 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>70.38</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 64
	<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)  
ORB PAC

<b>A.</b> Full Name (Last, First, Middle Initial) MIKLOS P P. KADAR		Date of Receipt
Mailing Address 158 OAK VIEW DRIVE, SE		<input type="text"/> / <input type="text"/> / <input type="text"/>
City LEESBURG	State VA	Zip Code 20175
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> PR1079835917717
Name of Employer Orbital Sciences Corporat- ion		Amount of Each Receipt this Period
Occupation Engineer		<input type="text"/> 40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		P/R Deduction (\$20.00 Bi-Weekly)
Aggregate Year-to-Date ▼		<input type="text"/> 420.00

<b>B.</b> Full Name (Last, First, Middle Initial) DARCIE A A. DURHAM		Date of Receipt
Mailing Address 1664 PARKCREST CIRCLE #200		<input type="text"/> / <input type="text"/> / <input type="text"/>
City RESTON	State VA	Zip Code 20190
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> PR1079968717717
Name of Employer Orbital Sciences Corporat- ion		Amount of Each Receipt this Period
Occupation LOBBYIST		<input type="text"/> 20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		P/R Deduction (\$10.00 Bi-Weekly)
Aggregate Year-to-Date ▼		<input type="text"/> 210.00

<b>C.</b> Full Name (Last, First, Middle Initial) KIRK H H. BINGEMAN		Date of Receipt
Mailing Address 16022 S. 45TH STREET		<input type="text"/> / <input type="text"/> / <input type="text"/>
City PHOENIX	State AZ	Zip Code 85048
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> PR1087190317717
Name of Employer Orbital Sciences Corporat- ion		Amount of Each Receipt this Period
Occupation SR. PRINCIPAL ENGINEER		<input type="text"/> 24.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		P/R Deduction (\$12.00 Bi-Weekly)
Aggregate Year-to-Date ▼		<input type="text"/> 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 84.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. JOHN J. J. HILTY</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2988 N. COCONADO STREET		<b>Transaction ID: PR1087191217717</b>
City CHANDLER	State AZ	Zip Code 85224
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 20.00
Name of Employer Orbital Sciences Corporat- ion	Occupation Administrator	P/R Deduction (\$10.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>B. MOSTAFA KIA</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 10570 E. BAHIA DRIVE		<b>Transaction ID: PR1087191317717</b>
City SCOTTSDALE	State AZ	Zip Code 85255
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 40.00
Name of Employer Orbital Sciences Corporat- ion	Occupation Engineer	P/R Deduction (\$20.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) <b>C. MARY ELLEN KURISH</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 1738 E. LINDA LANE		<b>Transaction ID: PR1087191617717</b>
City GILBERT	State AZ	Zip Code 85234
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 20.00
Name of Employer Orbital Sciences Corporat- ion	Occupation Manager	P/R Deduction (\$10.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	80.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 64
	<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)  
ORB PAC

<b>A.</b> Full Name (Last, First, Middle Initial) MIKE LUCHT		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1087201817717	
Mailing Address 1109 E. SCOTT AVENUE		Amount of Each Receipt this Period 76.00	
City GILBERT	State AZ	Zip Code 95234	P/R Deduction (\$38.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer Orbital Sciences Corporat- ion	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00		

<b>B.</b> Full Name (Last, First, Middle Initial) CRAIG L. L. TRENT		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1087326417717	
Mailing Address 631 E. BUENA VISTA DRIVE		Amount of Each Receipt this Period 20.00	
City CHANDLER	State AZ	Zip Code 85249	P/R Deduction (\$10.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer Orbital Sciences Corporat- ion	Occupation Sr. Prin. Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

<b>C.</b> Full Name (Last, First, Middle Initial) PATTY ZIMMERMAN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1087326517717	
Mailing Address 1061 E. POWERE WAY		Amount of Each Receipt this Period 30.00	
City CHANDLER	State AZ	Zip Code 85249	P/R Deduction (\$15.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer Orbital Sciences Corporat- ion	Occupation Sr. Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	126.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ORB PAC

<b>A.</b> Full Name (Last, First, Middle Initial) IAN A A IVERSON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1087331717717	
Mailing Address 37685 CHAPPELLE HILL ROAD		Amount of Each Receipt this Period 20.00	
City PURCELLVILLE	State VA	Zip Code 20132	P/R Deduction (\$10.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 210.00	
Name of Employer Orbital Sciences Corporat- ion	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) TIMOTHY R R. LANE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1088405417717	
Mailing Address 1163 E. TOLEDO STREET		Amount of Each Receipt this Period 33.56	
City GILBERT	State AZ	Zip Code 85296	P/R Deduction (\$16.78 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 352.38	
Name of Employer Orbital Sciences Corporat- ion	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) ROGER S S. O'DELL		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1088405517717	
Mailing Address 229 E. CHELSEA LANE		Amount of Each Receipt this Period 20.00	
City GILBERT	State AZ	Zip Code 85296	P/R Deduction (\$10.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 210.00	
Name of Employer Orbital Sciences Corporat- ion	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	73.56
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. ADOLPH F F. SHERER</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 291 TOWNSEND LANE		<b>Transaction ID: PR1095360717717</b>
City <b>SANTA MARIA</b>	State <b>CA</b>	Zip Code <b>93455</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>20.00</b>
Name of Employer Orbital Sciences Corporat- ion	Occupation <b>Engineer</b>	P/R Deduction (\$10.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>210.00</b>	

Full Name (Last, First, Middle Initial) <b>B. DAVID J J. ADERHOLD</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 41600 SWIFTWATER DRIVE		<b>Transaction ID: PR1131928017717</b>
City <b>LEESBURG</b>	State <b>VA</b>	Zip Code <b>20176</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>80.00</b>
Name of Employer Orbital Sciences Corporat- ion	Occupation <b>SENIOR DIRECTOR</b>	P/R Deduction (\$40.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>821.54</b>	

Full Name (Last, First, Middle Initial) <b>C. GRACE L L. BEN</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 3999 S. DOBSON ROAD, APT. 2053		<b>Transaction ID: PR1131929417717</b>
City <b>CHANDLER</b>	State <b>AZ</b>	Zip Code <b>85248</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>20.00</b>
Name of Employer Orbital Sciences Corporat- ion	Occupation <b>ENGINEERING SUPERVISOR</b>	P/R Deduction (\$10.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>205.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>120.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 64
	<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)  
ORBAPAC

<b>A.</b> Full Name (Last, First, Middle Initial) DAVID P P. STAIB JR., JR. Mailing Address 6905 VANTAGE DRIVE City ALEXANDRIA State VA Zip Code 22306 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1131940517717 Amount of Each Receipt this Period 80.00
Name of Employer Orbital Sciences Corporation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation DIRECTOR, PROGRAM INTEGRATION Aggregate Year-to-Date ▼ 760.00	P/R Deduction (\$40.00 Bi-Weekly)

<b>B.</b> Full Name (Last, First, Middle Initial) DOUGLAS M M. THOMPSON Mailing Address 15047 N. LOS MOCHOS COURT City MOUNTAIN HILLS State AZ Zip Code 85268 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1131940617717 Amount of Each Receipt this Period 20.00
Name of Employer Orbital Sciences Corporation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation SUPPLIER PROGRAM MANAGER Aggregate Year-to-Date ▼ 205.00	P/R Deduction (\$10.00 Bi-Weekly)

<b>C.</b> Full Name (Last, First, Middle Initial) JENNIFER D D. KALMANSON Mailing Address 6604 MCCA HILL TERRACE City LAUREL State MD Zip Code 20707 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1131943917717 Amount of Each Receipt this Period 30.00
Name of Employer Orbital Sciences Corporation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation ENGINEER Aggregate Year-to-Date ▼ 310.00	P/R Deduction (\$15.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>130.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. GREGORY A A. JONES</b>		Date of Receipt
Mailing Address 7513 CANNON FORT DRIVE		<input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>CLIFTON</b>	State <b>VA</b>	Zip Code <b>20124</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: PR1150543717717</b>
Name of Employer Orbital Sciences Corporat- ion Occupation <b>VICE PRESIDENT</b>		Amount of Each Receipt this Period 190.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1881.16	P/R Deduction (\$95.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. NEIL A A. GARDNER</b>		Date of Receipt
Mailing Address 741 E. BUENA VISTA DRIVE		<input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>CHANDLER</b>	State <b>AZ</b>	Zip Code <b>85249</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: PR1234696817717</b>
Name of Employer Orbital Sciences Corporat- ion Occupation <b>VICE PRESIDENT</b>		Amount of Each Receipt this Period 40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. PHILLIP C KALMANSON</b>		Date of Receipt
Mailing Address 6604 MCCA HILL TERRACE		<input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>LAUREL</b>	State <b>MD</b>	Zip Code <b>20707</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: PR1234700717717</b>
Name of Employer Orbital Sciences Corporat- ion Occupation <b>ENGINEER</b>		Amount of Each Receipt this Period 40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	270.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 64
	<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)  
ORBAPAC

Full Name (Last, First, Middle Initial) <b>A. ZACHARY R PETTIS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1 ROYAL STREET, SW, APT. C		<b>Transaction ID: PR1234701117717</b>
City State Zip Code LEESBURG VA 20175	Amount of Each Receipt this Period _____ 24.24	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation ENGINEER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 230.81	P/R Deduction (\$12.41 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. JUSTIN A ANTHONY ZAWISTOWSKI</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 22684 CRICKET HILL COURT		<b>Transaction ID: PR1234807417717</b>
City State Zip Code ASHBURN VA 20148	Amount of Each Receipt this Period _____ 76.92	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation PC TECHNICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 769.20	P/R Deduction (\$38.46 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. AMY L L. PETERS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3142 E. HOPE STREET		<b>Transaction ID: PR1244272717717</b>
City State Zip Code MESA AZ 85213	Amount of Each Receipt this Period _____ 78.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 702.00	P/R Deduction (\$39.00 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>179.16</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. ROBERT N N. YURICH</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1871 EAST HARRISON STREET		<b>Transaction ID: PR1244945517717</b>
City State Zip Code CHANDLER AZ 85225	Amount of Each Receipt this Period _____ 40.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation PROGRAM MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 320.00	P/R Deduction (\$20.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. THOMAS J. ITCHKAWICH</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 43412 SPERRIN COURT		<b>Transaction ID: PR629553517717</b>
City State Zip Code ASHBURN VA 20147	Amount of Each Receipt this Period _____ 80.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 640.00	P/R Deduction (\$40.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. BARRY A A. JOHNSON</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 511 Wolfe Court		<b>Transaction ID: PR629554417717</b>
City State Zip Code Leesburg VA 20175	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$10.00 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>140.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. JAMES B JUDD</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 16645 S. 27TH LANE		<b>Transaction ID: PR629554517717</b>
City PHOENIX	State AZ	Zip Code 85045
Amount of Each Receipt this Period _____ 121.76		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 730.56	P/R Deduction (\$60.88 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. JAMES H H. UTTER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 24607 S. ROCKER BROOK DRIVE		<b>Transaction ID: PR629556517717</b>
City SUN LAKES	State AZ	Zip Code 85248
Amount of Each Receipt this Period _____ 90.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion	Occupation DEPUTY GENERAL MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 940.00	P/R Deduction (\$45.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. JOHN F F. MCCARTHY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1027 CHALLEDON RD.		<b>Transaction ID: PR629557317717</b>
City GREAT FALLS	State VA	Zip Code 22066
Amount of Each Receipt this Period _____ 71.08		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 746.34	P/R Deduction (\$35.54 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>282.84</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 64
	<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)  
ORBAC

Full Name (Last, First, Middle Initial) <b>A. ANGELO D D KACHEMOV</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 14035 RT 108		<b>Transaction ID: PR629558017717</b>	
City <b>HIGHLAND</b>	State <b>MD</b>	Zip Code <b>20777</b>	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation <b>Sr. Dir. Bus. Operations</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 315.00		
		P/R Deduction (\$15.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. TIMOTHY E RUMFORD</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 21023 POWDERHORNE COURT		<b>Transaction ID: PR629561517717</b>	
City <b>ASHBURN FARMS</b>	State <b>VA</b>	Zip Code <b>22011</b>	Amount of Each Receipt this Period _____ 53.10
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation <b>MANAGER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 345.15		
		P/R Deduction (\$26.55 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. BARRON S. BENESKI</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 43301 DOVETAIL PLACE		<b>Transaction ID: PR629562417717</b>	
City <b>ASHBURN</b>	State <b>VA</b>	Zip Code <b>20147</b>	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation <b>VP</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 420.00		
		P/R Deduction (\$20.00 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>123.10</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ORB PAC

**A.** Full Name (Last, First, Middle Initial)  
WILLIAM DUCAS

Mailing Address 16037 COPEN MEADOW DRIVE

City State Zip Code  
GAITHERSBURG MD 20878

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

Name of Employer Occupation  
Orbital Sciences Corporat- Manager  
ion

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 551.70

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR629565217717

Amount of Each Receipt this Period  
53.16

P/R Deduction (\$26.58 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
CHARLES WHITMEYER

Mailing Address 895 W. Laurel Avenue

City State Zip Code  
Gilbert AZ 85233

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

Name of Employer Occupation  
Orbital Sciences Corporat- VP  
ion

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 420.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR629566917717

Amount of Each Receipt this Period  
40.00

P/R Deduction (\$20.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
JAMES E E. BOBBETT

Mailing Address 44213 TIPPECANEE TERRACE

City State Zip Code  
FAIRFAX VA 22032

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

Name of Employer Occupation  
Orbital Sciences Corporat- Sr. Prin. Engineer  
ion

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR629567317717

Amount of Each Receipt this Period  
20.00

P/R Deduction (\$10.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	113.16
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. ROBERT M M. DEMME</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8410 NIGHTINGALE DRIVE		<b>Transaction ID: PR629567617717</b>	
City LANHAM	State MD	Zip Code 20706	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation OPERATIONS MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 420.00		
		P/R Deduction (\$20.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. THOMAS G G. LEWIS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 20579 SNOWSHOE SQ. #202		<b>Transaction ID: PR629568417717</b>	
City ASHBURN	State VA	Zip Code 20147	Amount of Each Receipt this Period _____ 20.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00		
		P/R Deduction (\$10.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. JOHN K K. FISHER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 20656 PARKSIDE CIRCLE		<b>Transaction ID: PR629571517717</b>	
City STERLING	State VA	Zip Code 20165	Amount of Each Receipt this Period _____ 20.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation Sr. Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00		
		P/R Deduction (\$10.00 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>80.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 64
	<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	

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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. DOMINIC P P MANFRE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 10211 Baltimore National Pike		<b>Transaction ID: PR629572817717</b>		
City State Zip Code Myersville MD 21773	Amount of Each Receipt this Period _____ 30.00		P/R Deduction (\$15.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. <b>C</b> _____				
Name of Employer Orbital Sciences Corporat- ion Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation SR. Director Procuremewnt Aggregate Year-to-Date ▼ _____ 315.00			

Full Name (Last, First, Middle Initial) <b>B. TIMOTHY K K. FACKLER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 21935 HYDE PARK DRIVE		<b>Transaction ID: PR629575617717</b>		
City State Zip Code ASHBURN VA 20147	Amount of Each Receipt this Period _____ 20.00		P/R Deduction (\$10.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. <b>C</b> _____				
Name of Employer Orbital Sciences Corporat- ion Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Chief Engineer Aggregate Year-to-Date ▼ _____ 210.00			

Full Name (Last, First, Middle Initial) <b>C. JOSEPH M M. MAKOWSKI</b>		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 6 WHITTINGHAM CIRCLE		<b>Transaction ID: PR629576417717</b>		
City State Zip Code STERLING VA 20165	Amount of Each Receipt this Period _____ 40.00		P/R Deduction (\$20.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. <b>C</b> _____				
Name of Employer Orbital Sciences Corporat- ion Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Manager Aggregate Year-to-Date ▼ _____ 420.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>90.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. RONALD J J. GRABE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2653 E. SCORPIO PLACE		<b>Transaction ID: PR629576917717</b>	
City State Zip Code CHANDLER AZ 85249	Amount of Each Receipt this Period _____ 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1525.00		
		P/R Deduction (\$75.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. DAVID B B. KESLOW</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 27 TURNHAM LANE		<b>Transaction ID: PR629577317717</b>	
City State Zip Code GAITHERSBURG MD 20878	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 315.00		
		P/R Deduction (\$15.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. MARC D D GORDON</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 216 BOOKHAM LN.		<b>Transaction ID: PR629578817717</b>	
City State Zip Code GAITHERSBURG MD 20877	Amount of Each Receipt this Period _____ 67.36		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation Dir. Product Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 675.60		
		P/R Deduction (\$33.68 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>247.36</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 64
	<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)  
ORBAC

<b>A.</b> Full Name (Last, First, Middle Initial) LINDA PUFPAFF Mailing Address 3742 W LINDA LANE City CHANDLER State AZ Zip Code 85226 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR629579317717 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporat- ion Occupation SENIOR PURCHASING MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>B.</b> Full Name (Last, First, Middle Initial) JOSEPH II. DIMAGGIO Mailing Address 3826 E. FARMDALE AVE City MESA State AZ Zip Code 85206 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR629579517717 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporat- ion Occupation MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

<b>C.</b> Full Name (Last, First, Middle Initial) THOMAS W W. MCDERMOTT JR, JR. Mailing Address 21147 MORNING WAY City STERLING State VA Zip Code 20164 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR629579917717 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporat- ion Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	80.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 64
	<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)  
ORBAPAC

Full Name (Last, First, Middle Initial) <b>A. HOWARD D. D. SHORE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5618 E. MARILYN ROAD		<b>Transaction ID: PR629580517717</b>
City State Zip Code SCOTTSDALE AZ 85254	Amount of Each Receipt this Period _____ 80.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion Occupation Program Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 791.91	P/R Deduction (\$40.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER W W. RICHMOND</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 313 SILVER CREST DR.		<b>Transaction ID: PR629586817717</b>
City State Zip Code WALKERSVILLE MD 21793	Amount of Each Receipt this Period _____ 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 420.00	P/R Deduction (\$20.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. JOSEPH E E ARELT</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1524 LINCOLN WAY #302		<b>Transaction ID: PR629587817717</b>
City State Zip Code MCLEAN VA 22102	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion Occupation Principle Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$10.00 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>140.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. MARK E E. BITTERMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1835 BEULAH ROAD		<b>Transaction ID: PR629588617717</b>	
City VIENNA	State VA	Zip Code 22182	Amount of Each Receipt this Period _____ 80.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 784.00		

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. PAUL N N. CAPOROSSI</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2506 IRON FORGE ROAD		<b>Transaction ID: PR629589517717</b>	
City HERNDON	State VA	Zip Code 20171	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 420.00		

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. FRANK DEMAURO JR., JR.</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 320 LOCUST GROVE DRIVE		<b>Transaction ID: PR629590017717</b>	
City PURCELLVILLE	State VA	Zip Code 20132	Amount of Each Receipt this Period _____ 20.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation SR. PROGRAM DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00		

P/R Deduction (\$10.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>140.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 64
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. HARLAN W W. BOWERS</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629590117717
Mailing Address 20410 ROSEMALLOW COURT		Amount of Each Receipt this Period 24.00
City State Zip Code STERLING VA 20165	FEC ID number of contributing federal political committee. C	P/R Deduction (\$12.00 Bi-Weekly)
Name of Employer Occupation Orbital Sciences Corporat- ion DIRECTOR	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. SATYAPRASAD P. MAGANTY</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629590317717
Mailing Address 4709 W. Carla Vista		Amount of Each Receipt this Period 62.22
City State Zip Code Chandler AZ 85226	FEC ID number of contributing federal political committee. C	P/R Deduction (\$31.11 Bi-Weekly)
Name of Employer Occupation Orbital Sciences Corporat- ion Director	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 643.30	

Full Name (Last, First, Middle Initial) <b>C. JAMES D D. EITNIER</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629590517717
Mailing Address 310 EASTFIELD PLACE		Amount of Each Receipt this Period 40.00
City State Zip Code WALKERSVILLE MD 21793	FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer Occupation Orbital Sciences Corporat- ion SCIENTIST	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	126.22
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. SALLY A A. RICHARDSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629592517717
Mailing Address 19380 EMERALD PARK DRIVE		Amount of Each Receipt this Period 30.00
City LEESBURG	State VA	Zip Code 20175
FEC ID number of contributing federal political committee. C		P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporat- ion	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) <b>B. CARL J J. MATTES</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629592717717
Mailing Address 810 Sandy Landing Drive		Amount of Each Receipt this Period 20.00
City Leesburg	State VA	Zip Code 20175
FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporat- ion	Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>C. KARL M M. NOAH</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629598217717
Mailing Address 4919 Sutherland Drive		Amount of Each Receipt this Period 32.00
City Frederick	State MD	Zip Code 21703
FEC ID number of contributing federal political committee. C		P/R Deduction (\$16.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporat- ion	Occupation SR. MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 272.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	82.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. JOHN M M. DANKO</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1806 Millridge Ct.		<b>Transaction ID: PR629599617717</b>
City ANNAPOLIS	State MD	Zip Code 21401
Amount of Each Receipt this Period _____ 47.95		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion	Occupation Sr. VP Science/Tech. Programs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1182.95	
		P/R Deduction (\$27.76 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. F. JOSEPH HARVATINE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 810 LEE AVE.		<b>Transaction ID: PR629601517717</b>
City SYKESVILLE	State MD	Zip Code 21784
Amount of Each Receipt this Period _____ 80.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion	Occupation SR. DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	
		P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. SUSAN HERLICK</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5581 N. 16TH ST		<b>Transaction ID: PR629602817717</b>
City ARLINGTON	State VA	Zip Code 22205
Amount of Each Receipt this Period _____ 20.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion	Occupation VP & Deputy General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	
		P/R Deduction (\$10.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>147.95</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 / 64
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. BARBARA J J. CLARK</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address ROUTE 4, BOX 37		<b>Transaction ID: PR629604317717</b>	
City <b>HARPERS FERRY</b>	State <b>WV</b>	Zip Code <b>25425</b>	Amount of Each Receipt this Period _____ 20.00
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00		
		P/R Deduction (\$10.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. JAMES G G. NICHOLSON</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3050 CHICKWEED PLACE		<b>Transaction ID: PR629605117717</b>	
City <b>IJAMSVILLE</b>	State <b>MD</b>	Zip Code <b>21754</b>	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00		
		P/R Deduction (\$20.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL E E. LARKIN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5860 GOLDENWOOD PLACE		<b>Transaction ID: PR629605317717</b>	
City <b>ADAMSTOWN</b>	State <b>MD</b>	Zip Code <b>21710</b>	Amount of Each Receipt this Period _____ 20.00
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00		
		P/R Deduction (\$10.00 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>80.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 64
	<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)  
ORBAPAC

Full Name (Last, First, Middle Initial) <b>A. RICHARD J J. HICKS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 215 Nashua Court		<b>Transaction ID: PR629607317717</b>	
City State Zip Code Gambrills MD 21054	Amount of Each Receipt this Period _____ 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 420.00	P/R Deduction (\$20.00 Bi- Weekly)	

Full Name (Last, First, Middle Initial) <b>B. JOSEPH W W. WHITACRE Jr., JR.</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 13523 Sanderling Place		<b>Transaction ID: PR629611117717</b>	
City State Zip Code GERMANTOWN MD 20874	Amount of Each Receipt this Period _____ 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation VP and Chief Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 420.00	P/R Deduction (\$20.00 Bi- Weekly)	

Full Name (Last, First, Middle Initial) <b>C. ROBERT T T. FECONDA</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 39000 FOX MANOR DRIVE		<b>Transaction ID: PR629616817717</b>	
City State Zip Code LEESBURG VA 20175	Amount of Each Receipt this Period _____ 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 415.00	P/R Deduction (\$20.00 Bi- Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>120.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 64
	<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)  
ORBAC

Full Name (Last, First, Middle Initial) <b>A. JOHN C CLIFFORD GSELL</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 14547 SANDY LANE		<b>Transaction ID: PR629627217717</b>
City State Zip Code EDEN MD 21822	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$10.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. WILLIAM L L. PRICE JR., JR.</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 21378 Apple Grove Court		<b>Transaction ID: PR629639417717</b>
City State Zip Code Gaithersburg MD 20877	Amount of Each Receipt this Period _____ 77.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 859.00	P/R Deduction (\$38.50 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. MICHAEL W w. MILLER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 10155 NIGHTINGALE ST		<b>Transaction ID: PR629647517717</b>
City State Zip Code GAITHERSBURG MD 20882	Amount of Each Receipt this Period _____ 88.58	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 885.80	P/R Deduction (\$44.29 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>185.58</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 64
	<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)  
ORB PAC

<b>A.</b> Full Name (Last, First, Middle Initial) KURT D D. EBERLY		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629651517717
Mailing Address 2400 CLARENDON BLVD. #1001		Amount of Each Receipt this Period 30.00
City ARLINGTON State VA Zip Code 22201	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: Director	Aggregate Year-to-Date ▼ 310.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) MICHAEL D D. MOORE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629658617717
Mailing Address 12272 Turkey Wing Court		Amount of Each Receipt this Period 40.00
City Reston State VA Zip Code 20191	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: Engineer	Aggregate Year-to-Date ▼ 420.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) JENNIFER M M. ZSOLDOS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629659317717
Mailing Address 2136 POINT OF ROCKS ROAD		Amount of Each Receipt this Period 20.00
City KNOXVILLE State MD Zip Code 21758	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: Manager	Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	90.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. JOHN L. L. PULLEN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 9995 TIMBER KNOLL LN		<b>Transaction ID: PR629660817717</b>	
City ELLICOTT CITY	State MD	Zip Code 21042	Amount of Each Receipt this Period _____ 20.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation Sr. Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00		
		P/R Deduction (\$10.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. WALTER S S. BRADLEY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1313 PAUL DR.		<b>Transaction ID: PR629672817717</b>	
City SEVERN	State MD	Zip Code 21144	Amount of Each Receipt this Period _____ 20.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation Scientist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00		
		P/R Deduction (\$10.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. EMILY S S. BENDER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 9213 BEACHWAY LANE		<b>Transaction ID: PR629681017717</b>	
City SPRINGFIELD	State VA	Zip Code 22153	Amount of Each Receipt this Period _____ 28.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation VICE PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 274.00		
		P/R Deduction (\$14.00 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>68.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. JOHN J J. SCHAUS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 6804 SOUTHRIDGE WAY		<b>Transaction ID: PR629683017717</b>
City State Zip Code MIDDLETOWN MD 21769	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation Sr. Director	P/R Deduction (\$10.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	

Full Name (Last, First, Middle Initial) <b>B. MICHAEL J J. BOONE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1063 NAOMI LANE		<b>Transaction ID: PR629683117717</b>
City State Zip Code KEARNEYSVILLE WV 25430	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation Engineer	P/R Deduction (\$10.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	

Full Name (Last, First, Middle Initial) <b>C. JOHN R CARRO</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 16 WOODLAND DRIVE		<b>Transaction ID: PR629688017717</b>
City State Zip Code SEVERNA PARK MD 21146	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation ENGINEERING SUPERVISOR	P/R Deduction (\$10.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>60.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. MICHAEL S S. DORSCH</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 42803 SONGBIRG COURT		<b>Transaction ID: PR629689017717</b>	
City State Zip Code ASHBURN VA 20148	Amount of Each Receipt this Period _____ 20.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation SR. DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 205.00		
		P/R Deduction (\$10.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. DAVID J J. HARDLEY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 20806 FENWICK DRIVE		<b>Transaction ID: PR629699717717</b>	
City State Zip Code ASHBURN VA 20147	Amount of Each Receipt this Period _____ 20.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation Lead Designer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00		
		P/R Deduction (\$10.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. JOHN R R. MANSER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 603 CURTIN PL SE		<b>Transaction ID: PR629701617717</b>	
City State Zip Code LEESBURG VA 20175	Amount of Each Receipt this Period _____ 20.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00		
		P/R Deduction (\$10.00 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>60.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. STEVEN A A MUMMA</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8048 Arcadian Shore Ct.		<b>Transaction ID: PR629702517717</b>	
City State Zip Code GAINESVILLE VA 20155	Amount of Each Receipt this Period _____ 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 420.00	P/R Deduction (\$20.00 Bi- Weekly)	

Full Name (Last, First, Middle Initial) <b>B. G. DAVID LOW</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 20461 SWAN CREEK COURT		<b>Transaction ID: PR629702717717</b>	
City State Zip Code POTOMAC FALLS VA 20165	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation VICE PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1030.00	P/R Deduction (\$50.00 Bi- Weekly)	

Full Name (Last, First, Middle Initial) <b>C. BRADLEY A FIELDS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 25745 Howerton Drive		<b>Transaction ID: PR629710317717</b>	
City State Zip Code South Riding VA 20176	Amount of Each Receipt this Period _____ 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 360.00	P/R Deduction (\$20.00 Bi- Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>180.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 64
	<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)  
ORB PAC

**A.** Full Name (Last, First, Middle Initial)  
ROBERT T T. RICHARDS

Mailing Address 43280 OVERVIEW PLACE

City ASHBURN State VA Zip Code 20148

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

Name of Employer: Orbital Sciences Corporation  
Occupation: VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1040.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR629710717717

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$50.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
MICHAEL P P. WHALEN

Mailing Address 401 GLENMEADE CIRCLE

City PURCELLVILLE State VA Zip Code 20132

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

Name of Employer: Orbital Sciences Corporation  
Occupation: Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR629711317717

Amount of Each Receipt this Period  
20.00

P/R Deduction (\$10.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
JOANN D D. DOSS

Mailing Address 3229 Sherry Court

City Falls Church State VA Zip Code 22042

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

Name of Employer: Orbital Sciences Corporation  
Occupation: Tax Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR629711717717

Amount of Each Receipt this Period  
20.00

P/R Deduction (\$10.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	140.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ORB PAC

<b>A.</b> Full Name (Last, First, Middle Initial) ROBERT G GUY RALLISON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629716217717
Mailing Address 1082 E. CANYON WAY		Amount of Each Receipt this Period 20.00
City CHANDLER State AZ Zip Code 85249	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporation Occupation Manager	Aggregate Year-to-Date 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>B.</b> Full Name (Last, First, Middle Initial) MICHAEL G G. SIMS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629717517717
Mailing Address 16619 S. 15TH STREET		Amount of Each Receipt this Period 20.00
City PHOENIX State AZ Zip Code 85044	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporation Occupation Director	Aggregate Year-to-Date 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>C.</b> Full Name (Last, First, Middle Initial) WILLIAM A LLORENS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629723817717
Mailing Address 412 MADISON FOREST DRIVE		Amount of Each Receipt this Period 20.00
City HERNDON State VA Zip Code 20170	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporation Occupation Sr. Scientist	Aggregate Year-to-Date 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 64
	<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)  
ORB PAC

<b>A.</b> Full Name (Last, First, Middle Initial) DAVID W. W. THOMPSON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629723917717
Mailing Address 11217 BRIGHT POND LANE		Amount of Each Receipt this Period 384.00
City RESTON State VA Zip Code 20194	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$192.00 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: chairman and CEO	Aggregate Year-to-Date ▼ 4032.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) W. JEAN FLOYD		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629726017717
Mailing Address 843 W SHERRI DR		Amount of Each Receipt this Period 200.02
City GILBERT State AZ Zip Code 85233	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$100.01 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: Prog Mgr	Aggregate Year-to-Date ▼ 2100.21	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) J.R.R. THOMPSON, JR.		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629726817717
Mailing Address 416 Randolph Ave.		Amount of Each Receipt this Period 384.00
City Huntsville State AL Zip Code 35801	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$192.00 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: President and COO	Aggregate Year-to-Date ▼ 4032.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	968.02
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. DONALD E E. THOMPSON</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 20848 GREAT FALLS FOREST DRIVE		<b>Transaction ID: PR629726917717</b>	
City State Zip Code STERLING VA 20165	Amount of Each Receipt this Period _____ 77.00		
FEC ID number of contributing federal political committee. C _____	Name of Employer Occupation Orbital Sciences Corporat- MANAGER ion		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 771.50		
P/R Deduction (\$38.50 Bi-Weekly)			

Full Name (Last, First, Middle Initial) <b>B. HUIWEN YAO</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 14113 FOREST RDG DR.		<b>Transaction ID: PR629731517717</b>	
City State Zip Code N POTOMAC MD 20878	Amount of Each Receipt this Period _____ 20.00		
FEC ID number of contributing federal political committee. C _____	Name of Employer Occupation Orbital Sciences Corporat- Director ion		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00		
P/R Deduction (\$10.00 Bi-Weekly)			

Full Name (Last, First, Middle Initial) <b>C. DAVID HASTMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 11614 S. APPALOOSA DR.		<b>Transaction ID: PR629732817717</b>	
City State Zip Code PHOENIX AZ 85044	Amount of Each Receipt this Period _____ 149.14		
FEC ID number of contributing federal political committee. C _____	Name of Employer Occupation Orbital Sciences Corporat- Vice President ion		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1562.75		
P/R Deduction (\$74.57 Bi-Weekly)			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>246.14</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. GARY J. J. FRANKO, J.</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1601F BERRY ROSE CT.		<b>Transaction ID: PR629736017717</b>
City State Zip Code <b>FREDERICK MD 21701</b>	Amount of Each Receipt this Period _____ <b>77.67</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion Occupation Quality Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>736.24</b>	P/R Deduction (\$43.15 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. ANREN HU</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 27 PRAIRIE LANDING COURT		<b>Transaction ID: PR629742317717</b>
City State Zip Code <b>GAITHERSBURG MD 20878</b>	Amount of Each Receipt this Period _____ <b>20.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>210.00</b>	P/R Deduction (\$10.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. JEFFREY F. GICK</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 215 WHITNEY PLACE, NE		<b>Transaction ID: PR629742817717</b>
City State Zip Code <b>ASHBURN VA 20176</b>	Amount of Each Receipt this Period _____ <b>30.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>240.00</b>	P/R Deduction (\$15.00 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>127.67</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. CHARLES L. L. RICHARDS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1433 EAST SARAGOSA STREET		<b>Transaction ID: PR629744917717</b>
City State Zip Code <b>CHANDLER AZ 85225</b>	Amount of Each Receipt this Period _____ <b>44.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion Occupation <b>MANAGER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>460.00</b>	P/R Deduction (\$22.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. CAMILLE T. T. CISEK</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1468 W DEVON DR		<b>Transaction ID: PR629747017717</b>
City State Zip Code <b>GILBERT AZ 85233</b>	Amount of Each Receipt this Period _____ <b>50.94</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion Occupation <b>Director</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>509.40</b>	P/R Deduction (\$25.47 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. SUSAN M. M. KNAPP</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 20700 Globe Mills Court		<b>Transaction ID: PR629747417717</b>
City State Zip Code <b>Ashburn VA 20147</b>	Amount of Each Receipt this Period _____ <b>77.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion Occupation <b>Director</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>778.00</b>	P/R Deduction (\$38.50 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>171.94</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 64
	<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)  
ORB PAC

<b>A.</b> Full Name (Last, First, Middle Initial) KIDANE I.I. TECLE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629747717717
Mailing Address 11009 SAFFOLD WAY		Amount of Each Receipt this Period 20.00
City RESTON State VA Zip Code 20190	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: Network Administrator	Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) N PAUL BROST		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629751817717
Mailing Address 18301 Mid Ocean Place		Amount of Each Receipt this Period 106.26
City Leesburg State VA Zip Code 20176	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$53.13 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: Sr. VP.	Aggregate Year-to-Date ▼ 1115.73	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) LARRY D D. BONS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629759517717
Mailing Address 1711 S. ASH STREET		Amount of Each Receipt this Period 77.00
City GILBERT State AZ Zip Code 85233	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$38.50 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: MANAGER	Aggregate Year-to-Date ▼ 780.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	203.26
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 64
	<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)  
ORBAPAC

Full Name (Last, First, Middle Initial) <b>A. STEPHEN B B. THOMAS, JR.</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 365 E ARABIAN DR.		<b>Transaction ID: PR629765517717</b>	
City <b>GILBERT</b>	State <b>AZ</b>	Zip Code <b>85296</b>	Amount of Each Receipt this Period _____ 80.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation <b>DIRECTOR</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 760.00	P/R Deduction (\$40.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. PAUL R R. PARK</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 725 W. Pasgo Way		<b>Transaction ID: PR629766617717</b>	
City <b>Tempe</b>	State <b>AZ</b>	Zip Code <b>85283</b>	Amount of Each Receipt this Period _____ 20.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation <b>Engineer</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$10.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL R R. PINKSTON</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3829 W. LAREDO ST.		<b>Transaction ID: PR629767617717</b>	
City <b>CHANDLER</b>	State <b>AZ</b>	Zip Code <b>85226</b>	Amount of Each Receipt this Period _____ 80.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation <b>Deputy Program Manager</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 808.00	P/R Deduction (\$40.00 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>180.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 64
	<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)  
ORBAPAC

Full Name (Last, First, Middle Initial) <b>A. MARK OGREN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 541 E. MERRILL AVE		<b>Transaction ID: PR629774417717</b>
City State Zip Code GILBERT AZ 85234	Amount of Each Receipt this Period _____ 231.24	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation Dir. Bus. Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2428.02	P/R Deduction (\$115.62 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. EVELYN M.M. STAPLES</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2106 HARRIS RD N.W.		<b>Transaction ID: PR629777117717</b>
City State Zip Code HUNTSVILLE AL 35810	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation EXECUTIVE ASSISTANT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$10.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. BRIAN F.F. CLASS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 19932 Interlachen Circle		<b>Transaction ID: PR629779917717</b>
City State Zip Code ASHBURN VA 20147	Amount of Each Receipt this Period _____ 40.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 420.00	P/R Deduction (\$20.00 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>291.24</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 64
	<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)  
ORBAC

Full Name (Last, First, Middle Initial) <b>A. RICHARD S. STRAKA</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 14630 S. 14TH WAY		<b>Transaction ID: PR629781117717</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85048</b>	Amount of Each Receipt this Period _____ 60.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation <b>VP</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 630.00	P/R Deduction (\$30.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. RICK R R. BAIRD</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6130 W HARRISON		<b>Transaction ID: PR629786417717</b>	
City <b>CHANDLER</b>	State <b>AZ</b>	Zip Code <b>85226</b>	Amount of Each Receipt this Period _____ 20.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation <b>MECHANICAL ENGINEER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$10.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. BRIAN T T. MULLET</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1761 S NAVAJO WAY		<b>Transaction ID: PR629788017717</b>	
City <b>CHANDLER</b>	State <b>AZ</b>	Zip Code <b>85248</b>	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Orbital Sciences Corporat- ion	Occupation <b>Prog. Mgr</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 410.00	P/R Deduction (\$20.00 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>120.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. MARK B B. CHAVEZ</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3109 E. BIGHORN AVENUE		<b>Transaction ID: PR629789317717</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85048</b>	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation <b>MANAGER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 380.00		
		P/R Deduction (\$20.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. RONALD D D. WILEY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5551 W. GAIL DR.		<b>Transaction ID: PR629789517717</b>	
City <b>CHANDLER</b>	State <b>AZ</b>	Zip Code <b>85226</b>	Amount of Each Receipt this Period _____ 80.00
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation <b>Sr. VP</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 840.00		
		P/R Deduction (\$40.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. RICHARD MARK HAYNIE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 25034 S. SIGNAL BUTTE ROAD		<b>Transaction ID: PR629789717717</b>	
City <b>QUEEN CREEK</b>	State <b>AZ</b>	Zip Code <b>85242</b>	Amount of Each Receipt this Period _____ 80.00
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation <b>VP</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 750.00		
		P/R Deduction (\$40.00 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>200.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 64
	<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	

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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. JOSEPH D D SCHAFER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 342 S. Corrine Dr.		<b>Transaction ID: PR629789817717</b>
City State Zip Code Gilbert AZ 85296	Amount of Each Receipt this Period _____ 56.12	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$28.06 Bi-Weekly)
Name of Employer Orbital Sciences Corporat- ion	Occupation Program Mgr.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 589.26	

Full Name (Last, First, Middle Initial) <b>B. MARGARET B B. DIMAGGIO</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3826 E. FARMDALE AVE.		<b>Transaction ID: PR629791917717</b>
City State Zip Code MESA AZ 85206	Amount of Each Receipt this Period _____ 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporat- ion	Occupation MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00	

Full Name (Last, First, Middle Initial) <b>C. VICKIE E. MOREY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 343 S. GOLDEN KEY DRIVE		<b>Transaction ID: PR629795917717</b>
City State Zip Code GILBERT AZ 85233	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporat- ion	Occupation BUYER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>116.12</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. GWEN L L. GIBSON</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1163 S. NIELSON STREET		<b>Transaction ID: PR629799117717</b>
City State Zip Code GILBERT AZ 85296	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation Prin. Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$10.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. KETTNER J J. GRISWOLD</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 8308 CARDEROCK DR.		<b>Transaction ID: PR629803617717</b>
City State Zip Code BETHESDA MD 20817	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$10.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. TERRY R R. LUCHI</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1823 W. CANARY WAY		<b>Transaction ID: PR629804317717</b>
City State Zip Code CHANDLER AZ 85248	Amount of Each Receipt this Period _____ 80.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 800.00	P/R Deduction (\$40.00 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>120.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 64
	<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)  
ORB PAC

<b>A.</b> Full Name (Last, First, Middle Initial) GARY L LEE SPRUTE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629806417717
Mailing Address 2561 W. MONTEREY AVE		Amount of Each Receipt this Period 24.00
City MESA State AZ Zip Code 85202	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$12.00 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: Director Software Eng.	Aggregate Year-to-Date ▼ 252.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) KAREN ANDERSON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629813117717
Mailing Address 302 N. HALL ST		Amount of Each Receipt this Period 30.00
City MESA State AZ Zip Code 85203	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: Prin. Buyer	Aggregate Year-to-Date ▼ 305.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) WARREN B B. NAU		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629815117717
Mailing Address 760 N KAREN DR		Amount of Each Receipt this Period 24.50
City CHANDLER State AZ Zip Code 85224	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$12.25 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: Sr. Buyer	Aggregate Year-to-Date ▼ 257.25	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	78.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. ALI E E ATIA</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 10841 Willow Run Ct.		<b>Transaction ID: PR629817717717</b>
City State Zip Code POTOMAC MD 20854	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation PRESIDENT, COMM. INTER.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 515.00	P/R Deduction (\$25.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. WILLIAM J J. SCHUMACHER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 43985 Bruceton Mills Circle		<b>Transaction ID: PR629820117717</b>
City State Zip Code Ashburn VA 22011	Amount of Each Receipt this Period _____ 40.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 390.00	P/R Deduction (\$20.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. KEITH E E. EMERSON</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3293 E. CANYON WAY		<b>Transaction ID: PR629825817717</b>
City State Zip Code CHANDLER AZ 85249	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 205.00	P/R Deduction (\$10.00 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>110.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. ANTHONY V V. BANES</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3412 OLIVE BRANCH DRIVE		<b>Transaction ID: PR629826317717</b>
City State Zip Code SILVER SPRING MD 20904	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$10.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. KEVEN L L. LEITH</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 462 WEST CAROB DRIVE		<b>Transaction ID: PR629826717717</b>
City State Zip Code CHANDLER AZ 85248	Amount of Each Receipt this Period _____ 128.08	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1344.84	P/R Deduction (\$64.04 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. RONALD A A. WILLEY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 690 S. CROSSCREEK PLACE		<b>Transaction ID: PR629827417717</b>
City State Zip Code Phoenix AZ 85044	Amount of Each Receipt this Period _____ 78.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 717.00	P/R Deduction (\$39.00 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>226.08</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. GREGG E E. BURGESS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 10306 BRANDEBURG COURT		<b>Transaction ID: PR629827617717</b>
City State Zip Code GREAT FALLS VA 22066	Amount of Each Receipt this Period _____ 80.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 800.00	P/R Deduction (\$40.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. RICHARD S S. THOMPSON</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 230 CHELTENHAM PLACE		<b>Transaction ID: PR629828617717</b>
City State Zip Code SAN JOSE CA 95139	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation Sr. Scientist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$10.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. CHRISTINE E E. MONROE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3806 ROUNDTREE ROAD		<b>Transaction ID: PR629830417717</b>
City State Zip Code JEFFERSON MD 21755	Amount of Each Receipt this Period _____ 30.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation CONTROLLER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 310.00	P/R Deduction (\$15.00 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>130.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 64
	<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)  
ORBAC

Full Name (Last, First, Middle Initial) <b>A. LUIS H H. PONCE</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629835217717
Mailing Address 3291 NUTMEG COURT		Amount of Each Receipt this Period 20.00
City ADAMSTOWN State MD Zip Code 21710		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion	Occupation Reliability Assurance Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$10.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. PAMELA W W. TARPLEY</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629838017717
Mailing Address 2813 THICKETT WAY		Amount of Each Receipt this Period 22.00
City OLNEY State MD Zip Code 20832		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion	Occupation MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	P/R Deduction (\$11.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. ROBERT S S PINKHAM</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629839717717
Mailing Address 20941 HOLLYBERRY COURT		Amount of Each Receipt this Period 20.00
City ASHBURN State VA Zip Code 20147		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orbital Sciences Corporat- ion	Occupation Prin. Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$10.00 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	62.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ORB PAC

<b>A.</b> Full Name (Last, First, Middle Initial) KAILASH C C. PANDE		Date of Receipt
Mailing Address 3178 E DESERT WILLOW ROAD		<input type="text"/> / <input type="text"/> / <input type="text"/>
City PHOENIX	State AZ	Zip Code 85048
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> PR629843717717
Name of Employer Orbital Sciences Corporation		Amount of Each Receipt this Period 77.00
Occupation SCIENTIST		P/R Deduction (\$38.50 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 731.50	

<b>B.</b> Full Name (Last, First, Middle Initial) JOHN G. G. ZIERDT Jr., JR.		Date of Receipt
Mailing Address 608 EAGLES RIDGE PLACE		<input type="text"/> / <input type="text"/> / <input type="text"/>
City HUNTSVILLE	State AL	Zip Code 35802
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> PR682730417717
Name of Employer Orbital Sciences Corporation		Amount of Each Receipt this Period 100.00
Occupation VP, Huntsville Operations		P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

<b>C.</b> Full Name (Last, First, Middle Initial) RICHARD L. MCGLOTHLIN		Date of Receipt
Mailing Address 119 MATT PHILLIPS ROAD		<input type="text"/> / <input type="text"/> / <input type="text"/>
City NASHVILLE	State AL	Zip Code 37220
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> PR682730717717
Name of Employer Orbital Sciences Corporation		Amount of Each Receipt this Period 40.00
Occupation DIRECTOR		P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> <b>217.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 56 / 64
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. ANTONIO L. ELIAS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 7907 ARIEL WAY		<b>Transaction ID: PR760535517717</b>
City State Zip Code MCLEAN VA 22102	Amount of Each Receipt this Period _____ 77.00	
FEC ID number of contributing federal political committee. C _____	P/R Deduction (\$38.50 Bi-Weekly)	
Name of Employer Orbital Sciences Corporat- ion Occupation Exec. VP and GM	Aggregate Year-to-Date ▼ _____ 808.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. PATRICK J. JENKINS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 102 WINDOVER AVENUE		<b>Transaction ID: PR760535917717</b>
City State Zip Code VIENNA VA 22180	Amount of Each Receipt this Period _____ 60.00	
FEC ID number of contributing federal political committee. C _____	P/R Deduction (\$30.00 Bi-Weekly)	
Name of Employer Orbital Sciences Corporat- ion Occupation SENIOR VP	Aggregate Year-to-Date ▼ _____ 540.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. SHERRY KEDROWSKI</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3105 S. SARATOGA CIRCLE		<b>Transaction ID: PR760538417717</b>
City State Zip Code MESA AZ 85202	Amount of Each Receipt this Period _____ 24.60	
FEC ID number of contributing federal political committee. C _____	P/R Deduction (\$12.30 Bi-Weekly)	
Name of Employer Orbital Sciences Corporat- ion Occupation Analyst	Aggregate Year-to-Date ▼ _____ 258.30	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>161.60</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 64
	<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)  
ORBAC

Full Name (Last, First, Middle Initial) <b>A. CATHERINE M M. MOORE</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760538717717
Mailing Address 5962 WATERFLOW COURT		Amount of Each Receipt this Period 20.00
City CENTREVILLE	State VA	Zip Code 20121
FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporat- ion	Occupation Sr. Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>B. GARRETT E E. PIERCE</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760539117717
Mailing Address 43468 CASTLE HARBOUR TERRACE		Amount of Each Receipt this Period 100.00
City LEESBURG	State VA	Zip Code 20176
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporat- ion	Occupation CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

Full Name (Last, First, Middle Initial) <b>C. HOLLIS M M. THOMPSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760539617717
Mailing Address 1233 TOTTENHAM COURT		Amount of Each Receipt this Period 30.00
City RESTON	State VA	Zip Code 20194
FEC ID number of contributing federal political committee. C		P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporat- ion	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 64
	<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)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. MICHAEL R R. WILLIAMS</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760539917717
Mailing Address 16958 HEATHER KNOLLS PLACE		Amount of Each Receipt this Period 100.00
City State Zip Code HAMILTON VA 20158	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Occupation Orbital Sciences Corporat- SVP ion	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1050.00	

Full Name (Last, First, Middle Initial) <b>B. BRUCE P P. VORIS</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760547417717
Mailing Address 6086 OLD LAWYERS HILL ROAD		Amount of Each Receipt this Period 20.00
City State Zip Code ELKRIDGE MD 21075	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Occupation Orbital Sciences Corporat- Sr. Engineer ion	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>C. LUIS M MIGUEL BERMUDEZ</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760549517717
Mailing Address 4271 E. BUCKBOARD ROAD		Amount of Each Receipt this Period 20.00
City State Zip Code GILBERT AZ 85297-6641	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Occupation Orbital Sciences Corporat- SR. AERODYNAMIC ENGINEER ion	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	140.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 64
	<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)  
ORBAPAC

Full Name (Last, First, Middle Initial) <b>A. MARK H H. BYCROFT</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 16 E. FAIRMONT DRIVE		<b>Transaction ID: PR760551217717</b>
City State Zip Code TEMPE AZ 85282	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$10.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. CRAIG A A. COLEMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 25556 EVANS SQUARE		<b>Transaction ID: PR760552017717</b>
City State Zip Code SOUTH RIDING VA 20152	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation Prin. Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$10.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. JESSE F F. DOGGETT</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2425 S. EXTENSION ROAD		<b>Transaction ID: PR760554017717</b>
City State Zip Code MESA AZ 85210	Amount of Each Receipt this Period _____ 97.40	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion	Occupation DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 974.00	P/R Deduction (\$48.70 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>137.40</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 64
	<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)  
ORB PAC

<b>A.</b> Full Name (Last, First, Middle Initial) BRENDA J J. KEINER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760560617717	
Mailing Address 13610 s. 155TH STREET		Amount of Each Receipt this Period 20.00	
City GILBERT	State AZ	Zip Code 85296	P/R Deduction (\$10.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 210.00	
Name of Employer Orbital Sciences Corporat- ion	Occupation Prin. Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) RUSSEL K KOLEBER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760561217717	
Mailing Address 14436 S. 22ND STREET		Amount of Each Receipt this Period 20.00	
City PHOENIX	State AZ	Zip Code 85048	P/R Deduction (\$10.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 210.00	
Name of Employer Orbital Sciences Corporat- ion	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) BETH L L. SCHULKE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760571317717	
Mailing Address 2146 S. PORTER		Amount of Each Receipt this Period 20.00	
City GILBERT	State AZ	Zip Code 85296	P/R Deduction (\$10.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 210.00	
Name of Employer Orbital Sciences Corporat- ion	Occupation MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. ROBERT E WEBB</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2493 W. SPRICE DRIVE		<b>Transaction ID: PR760575717717</b>
City State Zip Code <b>CHANDLER AZ 85248</b>	Amount of Each Receipt this Period _____ 40.00	
FEC ID number of contributing federal political committee. <b>C</b> _____		
Name of Employer Orbital Sciences Corporat- ion Occupation <b>MANAGER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 380.00	P/R Deduction (\$20.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>B. KATHLEEN A A. BERES</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3120 CHURCH ROAD		<b>Transaction ID: PR760578317717</b>
City State Zip Code <b>MITCHELLVILLE MD 20721</b>	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. <b>C</b> _____		
Name of Employer Orbital Sciences Corporat- ion Occupation <b>Sr. Director</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$10.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) <b>C. RAYMOND P P. CROUGH</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 301 WEST 5TH STREET		<b>Transaction ID: PR760579917717</b>
City State Zip Code <b>FREDERICK MD 21701</b>	Amount of Each Receipt this Period _____ 40.00	
FEC ID number of contributing federal political committee. <b>C</b> _____		
Name of Employer Orbital Sciences Corporat- ion Occupation <b>Director</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 420.00	P/R Deduction (\$20.00 Bi- Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>100.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 64
	<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)  
ORB PAC

<b>A.</b> Full Name (Last, First, Middle Initial) MICHAEL P P. DO		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760580217717	
Mailing Address 2723 RUSHING BROOK LANE		Amount of Each Receipt this Period 78.00	
City OAK HILL	State VA	Zip Code 20171	P/R Deduction (\$39.00 Bi-Weekly)
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 780.00	
Name of Employer Orbital Sciences Corporat- ion	Occupation DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) ANN C C. GRANDFIELD		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760582117717	
Mailing Address 405 MOOREFIELD ROAD		Amount of Each Receipt this Period 80.00	
City VIENNA	State VA	Zip Code 22180	P/R Deduction (\$40.00 Bi-Weekly)
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 800.00	
Name of Employer Orbital Sciences Corporat- ion	Occupation DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) THOMAS A A. MICCOLIS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760597117717	
Mailing Address 2902 JOHNSON DRIVE		Amount of Each Receipt this Period 20.00	
City DAVIDSONVILLE	State MD	Zip Code 21035	P/R Deduction (\$10.00 Bi-Weekly)
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 210.00	
Name of Employer Orbital Sciences Corporat- ion	Occupation Prin. Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	178.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 63 / 64
	(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)  
ORB PAC

**A.** Full Name (Last, First, Middle Initial)  
MATTHEW J J. MILLER

Mailing Address 1316 W. MEDINA AVENUE

City MESA State AZ Zip Code 85202

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

Name of Employer: Orbital Sciences Corporation  
Occupation: Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR760597217717

Amount of Each Receipt this Period  
20.00

P/R Deduction (\$10.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
RICKY L L. WEAVER

Mailing Address 2009 ORCHARD DRIVE

City POCOMOKE CITY State MD Zip Code 21851

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

Name of Employer: Orbital Sciences Corporation  
Occupation: Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR760600517717

Amount of Each Receipt this Period  
20.00

P/R Deduction (\$10.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	40.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	8716.44

# 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 64 / 64

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

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NAME OF COMMITTEE (In Full)  
ORB PAC

Full Name (Last, First, Middle Initial) <b>A. Allen Victory Committee</b>		<b>Transaction ID: 13166413</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address P.O. Box 6853		Amount of Each Disbursement this Period 5000.00	
City Arlington	State VA	Zip Code 22206	011 Category/ Type
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	5000.00