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Office Use Only

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12 FEB 4M5

EDC CORPORATION PAC

ADDRESS (number and street)

50 EAST 42ND STREET 42ND FLOOR

Check if different than previously reported. (ACC)

NEW YORK

NY

10165

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

0000329318

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(h) 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)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

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

Termination Report (TER)

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

Primary (12F)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

In the State of

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

General (30F)

Runoff (30R)

Special (30S)

Election on

In the State of

5. Covering Period

07 01 2004

through

09 30 2004

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

Type or Print Name of Treasurer

WILLIAM J. FROST

Signature of Treasurer

Date

10 13 2004

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

Office Use Only

FEC FORM 3X (Rev. 02/2003)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

EDC CORPORATION PAC

Report Covering the Period:

From:

07 / 01 / 2004

To:

09 / 30 / 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2004	48,482.70	48,482.70
(b) Cash on Hand at Beginning of Reporting Period	22,399.10	
(c) Total Receipts (from Line 19)	10,832.78	26,466.53
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 5(a) and 5(c) for Column B)	32,431.88	74,949.23
7. Total Disbursements (from Line 31)	13,800.00	55,517.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	19,431.88	19,431.88
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	-	-
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	-	-



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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Name or Type Committee Name
EDO CORPORATION PAC

Report Covering the Period: From: 07 01 2004 To: 09 30 2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	4 515 50	9 813 75
(ii) Unitemized	4 517 28	15 652 78
(iii) TOTAL (add Lines 11(a)(i) and (ii))	9 032 78	25 466 53
(b) Political Party Committees	- 0 -	- 0 -
(c) Other Political Committees (such as PACs)	- 0 -	- 0 -
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	9 032 78	25 466 53
12. Transfers From Affiliated/Other Party Committees	- 0 -	- 0 -
13. All Loans Received	- 0 -	- 0 -
14. Loan Repayments Received	- 0 -	- 0 -
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	- 0 -	- 0 -
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	1 000 00	1 000 00
17. Other Federal Receipts (Dividends, interest, etc.)	- 0 -	- 0 -
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	- 0 -	- 0 -
(b) Levin Funds (from Schedule H5)	- 0 -	- 0 -
(c) Total Transfers (add 18(a) and 18(b))	- 0 -	- 0 -
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	10 032 78	26 466 53
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10 032 78	26 466 53

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures	0	17.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0	17.35
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	13,000.00	55,500.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Lender" Share	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	13,000.00	55,517.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	13,000.00	55,517.35

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	9,032.78	25,466.53
34. Total Contribution Refunds (from Line 20(d))	- 0 -	- 0 -
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9,032.78	25,466.53
36. Total Federal Operating Expenditures (add Lines 21(a)(i) and Line 21(b))	- 0 -	- 0 -
37. Offsets to Operating Expenditures (from Line 15, page 3)	- 0 -	- 0 -
38. Net Operating Expenditures (subtract Line 37 from Line 36)	- 0 -	- 0 -

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

Use separate receipts for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1 OF 9

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (in Full)

EDC CORPORATION PAC

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

Mailing Address
35 ARROWHEAD COURT

City **NORTH HILLS** State **NY** Zip Code **11030**

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

Name of Employer: **EDC CORPORATION** Occupation: **CHMN/PRES/CEO**

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date: **1170.00**

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

Amount of Each Receipt this Period: **390.00**
(\$30 WEEKLY)

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

Mailing Address
4 CEDAR ROAD

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

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

Name of Employer: **EDC CORPORATION** Occupation: **V.P./COO**

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date: **780.00**

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

Amount of Each Receipt this Period: **260.00**
(\$20 WEEKLY)

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

Mailing Address
713 DONNINGTON DRIVE

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

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

Name of Employer: **EDC CORPORATION** Occupation: **GROUP VICE PRESIDENT**

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date: **760.00**

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

Amount of Each Receipt this Period: **260.00**
(\$20 WEEKLY)

SUBTOTAL of Receipts This Page (optional) _____

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

930.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER (check only one)		PAGE 2 OF 9	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EDO CORPORATION PAC

A. Full Name (Last, First, Middle Initial)
MCINTIRE, DAVID R

Mailing Address
4469 PARADISE COURT

City State Zip Code
SAN JOSE CA 95136

FEC ID number of contributing federal political committee
C

Name of Employer Occupation
EDO CORPORATION DIRECTOR OF CONTRACTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) **780.00**

PAYROLL DEDUCTION
 Date of Receipt

Amount of Each Receipt this Period
280.00
 (\$20 WEEKLY)

B. Full Name (Last, First, Middle Initial)
NEWSOME, LARRY D

Mailing Address
18301 TOLESA COURT

City State Zip Code
MORGAN HILL CA 95037

FEC ID number of contributing federal political committee
C

Name of Employer Occupation
EDO CORPORATION GENERAL MANAGER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) **780.00**

PAYROLL DEDUCTION
 Date of Receipt

Amount of Each Receipt this Period
280.00
 (\$20 WEEKLY)

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

Mailing Address
5023 N. WASHINGTON BLVD

City State Zip Code
ARLINGTON VA 22205

FEC ID number of contributing federal political committee
C

Name of Employer Occupation
EDO CORPORATION VP/WASH OPS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) **585.00**

PAYROLL DEDUCTION
 Date of Receipt

Amount of Each Receipt this Period
195.00
 (\$15 WEEKLY)

SUBTOTAL of Receipts This Page (optional) **755.00**

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 3 OF 9

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

EDO CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. COMISKEY, PATRICIA

Mailing Address

5 NEW STREET

City

GREAT RIVER

State
NY

Zip Code
11739

FEC ID number of contributing
federal political committee.

C

Name of Employer

EDO CORPORATION

Occupation

VP/HR

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

PAYROLL DEDUCTION
Date of Receipt

01/01/00

Amount of Each Receipt this Period

130.00

(\$10 WEEKLY)

Full Name (Last, First, Middle Initial)

B. MCINNIS, RICHARD D

Mailing Address

9503 WATERLINE DRIVE

City

BURKE

State
VA

Zip Code
22015

FEC ID number of contributing
federal political committee.

C

Name of Employer

EDO CORPORATION

Occupation

DIR. GOVT. RELATIONS

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

PAYROLL DEDUCTION
Date of Receipt

01/01/00

Amount of Each Receipt this Period

130.00

(\$10 WEEKLY)

Full Name (Last, First, Middle Initial)

C. LAROSE, DANIEL

Mailing Address

793 MELROSE TERRACE

City

NEWPORT NEWS

State
VA

Zip Code
23608

FEC ID number of contributing
federal political committee.

C

Name of Employer

EDO CORPORATION

Occupation

BUS. AREA MANAGER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

PAYROLL DEDUCTION
Date of Receipt

01/01/00

Amount of Each Receipt this Period

130.00

(\$10 WEEKLY)

SUBTOTAL of Receipts This Page (optional) ▶

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

390.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 4 OF 9	
<input checked="" type="checkbox"/> 11A	<input type="checkbox"/> 11B	<input type="checkbox"/> 11C	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)

EDO CORPORATION PAC

A. Full Name (Last, First, Middle Initial)
LANES, FREDERIC

Mailing Address
1206 GATES COURT

City **MORRIS PLAINS** State **NJ** Zip Code **07950**

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

Name of Employer: **EDO CORPORATION** Occupation: **CORP. DIR. BUS. OPS.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

PAYROLL DEDUCTION
Date of Receipt

Amount of Each Receipt this Period
130.00
(\$10 WEEKLY)

B. Full Name (Last, First, Middle Initial)
MYGLAND, ALF E

Mailing Address
230 BOW DRIVE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

PAYROLL DEDUCTION
Date of Receipt

Amount of Each Receipt this Period
120.00
(\$10 WEEKLY)

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

Mailing Address
6 SWIRL LANE

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

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

Name of Employer: **EDO CORPORATION** Occupation: **GROUP VP**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
546.00

PAYROLL DEDUCTION
Date of Receipt

Amount of Each Receipt this Period
182.00
(\$14 WEEKLY)

SUBTOTAL of Receipts This Page (optional)..... ▶

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

442.00

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

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

FOR LINE NUMBER:	PAGE	5 OF 9
(check only one)		
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 16	<input type="checkbox"/> 18	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EDC CORPORATION PAC

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

Mailing Address
624 WHITEHURST LANDING ROAD

City State Zip Code
VIRGINIA BEACH VA 23464

FEC ID number of contributing federal political committee
C

Name of Employer Occupation
EDC CORPORATION GENERAL MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

PAYROLL DEDUCTION
Date of Receipt

Amount of Each Receipt This Period
140.00
(\$20 WEEKLY)

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

Mailing Address
5309 ROSAER PLACE

City State Zip Code
VIRGINIA BEACH VA 23464

FEC ID number of contributing federal political committee
C

Name of Employer Occupation
EDC CORPORATION GROUP CONTROLLER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

PAYROLL DEDUCTION
Date of Receipt

Amount of Each Receipt This Period
140.00
(\$20 WEEKLY)

Full Name (Last, First, Middle Initial)
C. SPRINGFIELD, GARY D

Mailing Address
75B NORTH 3500 WEST

City State Zip Code
WEST POINT UT 84015

FEC ID number of contributing federal political committee
C

Name of Employer Occupation
EDC CORPORATION GENERAL MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

PAYROLL DEDUCTION
Date of Receipt

Amount of Each Receipt this Period
140.00
(\$20 WEEKLY)

SUBTOTAL of Receipts This Page (optional) ▶

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

420.00

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

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

FOR LINE NUMBER: PAGE 6 OF 9

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EDO CORPORATION PAC

A. CAESAR, JULIUS S

Full Name (Last, First, Middle Initial)
Mailing Address
6307 LEE FOREST PATH
City: CENTERVILLE State: VA Zip Code: 20120

FEC ID number of contributing federal political committee: C

Name of Employer: EDO CORPORATION
Occupation: GENERAL MANAGER

Receipt For:
 Primary General
 Other (specify):

Aggregate Year-to-Date: 400.00

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

Amount of Each Receipt this Period: 140.00 (\$20 WEEKLY)

B. HICKS, RUSSELL

Full Name (Last, First, Middle Initial)
Mailing Address
249 SPURWOOD LANE
City: SIMI VALLEY State: CA Zip Code: 93065

FEC ID number of contributing federal political committee: C

Name of Employer: EDO CORPORATION
Occupation: PROG. MGR. SR.

Receipt For:
 Primary General
 Other (specify):

Aggregate Year-to-Date: 390.00

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

Amount of Each Receipt this Period: 140.00 (\$10 WEEKLY)

C. MATTLAND, ARTHUR I.

Full Name (Last, First, Middle Initial)
Mailing Address
5359 INDIAN HILLS DRIVE
City: SIMI VALLEY State: CA Zip Code: 93063

FEC ID number of contributing federal political committee: C

Name of Employer: EDO CORPORATION
Occupation: PROG. MGR.

Receipt For:
 Primary General
 Other (specify):

Aggregate Year-to-Date: 390.00

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

Amount of Each Receipt this Period: 140.00 (\$10 WEEKLY)

SUBTOTAL of Receipts This Page (optional): 420.00

TOTAL This Period (set page this line number only):

420.00

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

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

FOR LINE NUMBER: PAGE 7 OF 9

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 18	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EDO CORPORATION PAC

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

Mailing Address
686 POTOMAC COURT

City **SAN JOSE** State **CA** Zip Code **95136**

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

Name of Employer
EDO CORPORATION Occupation
PROGRAM MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
633.75

PAYROLL DEDUCTION
Date of Receipt
[] [] []

Amount of Each Receipt this Period
227.50
(\$16.25 WEEKLY)

B. Full Name (Last, First, Middle Initial)
HIGGS, WILLIAM R.

Mailing Address
20 MINOEA ROAD

City **PORTOLA VALLEY** State **CA** Zip Code **94028**

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

Name of Employer
EDO CORPORATION Occupation
PROGRAM MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

PAYROLL DEDUCTION
Date of Receipt
[] [] []

Amount of Each Receipt this Period
140.00
(\$10 WEEKLY)

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

Mailing Address
35 RALPHS WAY

City **HOLLISTER** State **CA** Zip Code **95023**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

PAYROLL DEDUCTION
Date of Receipt
[] [] []

Amount of Each Receipt this Period
140.00
(\$10 WEEKLY)

SUBTOTAL of Receipts This Page (optional) ▶

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

507.50

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

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

FOR LINE NUMBER:		PAGE 6 OF 9	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EDO CORPORATION PAC

Fed Name (Last, First, Middle Initial)
A. MILLER, GARY

Mailing Address
1055 IRIS AVENUE

City **SUNNYVALE,** State **CA** Zip Code **94086**

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

Name of Employer: **EDO CORPORATION** Occupation: **CONTROLLER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

PAYROLL DEDUCTION
Date of Receipt: **01/01/00**

Amount of Each Receipt this Period
140.00
(\$10 WEEKLY)

Fed Name (Last, First, Middle Initial)
H. SCHMIDT, TERPANCE J.

Mailing Address
104 AURORA LANE

City **LOS GATOS** State **CA** Zip Code **95032**

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

Name of Employer: **EDO CORPORATION** Occupation: **DIR. OPERATIONS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

PAYROLL DEDUCTION
Date of Receipt: **01/01/00**

Amount of Each Receipt this Period
140.00
(\$10 WEEKLY)

Fed Name (Last, First, Middle Initial)
C. ARNOLD, WILLIAM G

Mailing Address
316 NORTH COLUMBUS STREET

City **ALEXANDRIA** State **VA** Zip Code **22205**

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

Name of Employer: **EDO CORPORATION** Occupation: **DIR. DEP. RELATIONS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
273.00

PAYROLL DEDUCTION
Date of Receipt: **01/01/00**

Amount of Each Receipt this Period
91.00
(\$7 WEEKLY)

SUBTOTAL of Receipts This Page (optional) **371.00**

TOTAL This Period (last page this line number only) **371.00**

371.00

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

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

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

NAME OF COMMITTEE (in Full)
EDO CORPORATION PAC

A. Full Name (Last, First, Middle Initial)
COOK, GORDON D.

Mailing Address
9783 SOUTH CHYLENE DRIVE

City **SANDY** State **UT** Zip Code **84092**

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

Name of Employer: **EDO CORPORATION** Occupation: **PROD. LINE MGR**

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: **200.00**

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

Amount of Each Receipt this Period: **70.00**
(\$10 WEEKLY)

B. Full Name (Last, First, Middle Initial)
SMITH, JAMES F.

Mailing Address
1444 EAST SHERMAN AVENUE

City **SALT LAKE CITY** State **UT** Zip Code **84105**

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: **200.00**

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

Amount of Each Receipt this Period: **70.00**
(\$10 WEEKLY)

C. Full Name (Last, First, Middle Initial)
ALPERT, SEELDON I

Mailing Address
4331 CLEARWOOD ROAD

City **MOORPARK** State **CA** Zip Code **93065**

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

Name of Employer: **EDO CORPORATION** Occupation: **DIR. ENGINEERING**

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: **390.00**

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

Amount of Each Receipt this Period: **140.00**
(\$10 WEEKLY)

SUBTOTAL of Receipts This Page (optional) **280.00**

TOTAL This Period (last page this line number only) **1515.50**

280.00

1515.50

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 1 OF 1 (check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full):
EDO CORPORATION PAC

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

Mailing Address
P.O. BOX 1070

City **TRACY** State **CA** Zip Code **95378**

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

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) _____
REMIIND OF CONTRIBUTION

Aggregate Year-to-Date: **1,000.00**

Date of Receipt
09 10 2004

Amount of Each Receipt this Period
1000.00

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

Mailing Address

City _____ State _____ Zip Code _____

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

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date: _____

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City _____ State _____ Zip Code _____

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

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date: _____

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional): _____

TOTAL This Period (last page this line number only): _____

1,000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 1 OF 4	
<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 29c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EDO CORPORATION PAC

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

Date of Disbursement
09 / 13 / 2004

Mailing Address
P.O. BOX 94001

City **SIMI VALLEY** State **CA** Zip Code **93094**

Purpose of Disbursement
FUNDRAISER Category/Type

Candidate Name
ELTON GALLEGLY

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

State: **CA** District: **23**

Amount of Each Disbursement This Period
1000.00

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

Date of Disbursement
09 / 13 / 2004

Mailing Address
35 IVY STREET SE

City **WASHINGTON** State **DC** Zip Code **20003**

Purpose of Disbursement
FUNDRAISER Category/Type

Candidate Name
CAROLYN MCCARTHY

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

State: **NY** District: **4**

Amount of Each Disbursement This Period
1000.00

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

Date of Disbursement
09 / 13 / 2004

Mailing Address
1454 CIMARRON DRIVE

City **HOLLAND** State **MI** Zip Code **49423**

Purpose of Disbursement
FUNDRAISER Category/Type

Candidate Name
PETE HOEKSTRA

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

State: **MI** District: **2**

Amount of Each Disbursement This Period
1000.00

SUBTOTAL of Disbursements This Page (optional) **3000.00**

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check any one)				PAGE 2 OF 4
<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 29c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (in FWS)
EDC CORPORATION PAC

A. Full Name (Last, First, Middle Initial)
JIM DEMINT FOR U.S. SENATE

Date of Disbursement
09 / 23 / 2004

Mailing Address
P.O. BOX 2776

City: ARLINGTON State: VA Zip Code: 22202

Purpose of Disbursement: FUNDRAISER

Candidate Name: JIM DEMINT

Office Sought: House Senate Presidential

Disbursement For: Primary General Other (specify) _____

State: SC District: _____

Amount of Each Disbursement this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JIM DEMINT FOR U.S. SENATE

Date of Disbursement
09 / 23 / 2004

Mailing Address
P.O. BOX 2776

City: ARLINGTON State: VA Zip Code: 22202

Purpose of Disbursement: FUNDRAISER

Candidate Name: JIM DEMINT

Office Sought: House Senate Presidential

Disbursement For: Primary General Other (specify) _____

State: SC District: _____

Amount of Each Disbursement this Period
1000.00

C. Full Name (Last, First, Middle Initial)
JIM DEMINT FOR U.S. SENATE

Date of Disbursement
09 / 23 / 2004

Mailing Address
P.O. BOX 2776

City: ARLINGTON State: VA Zip Code: 22202

Purpose of Disbursement: FUNDRAISER

Candidate Name: JIM DEMINT

Office Sought: House Senate Presidential

Disbursement For: Primary General Other (specify) _____

State: SC District: _____

Amount of Each Disbursement this Period
1000.00

SUBTOTAL of Disbursements This Page (optional) 3000.00

TOTAL This Period (see page this line number any)

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 3 OF 4	
<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"/> 29c	<input type="checkbox"/> 29	<input type="checkbox"/> 30a

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NAME OF COMMITTEE (In Full)
EDD CORPORATION PAC

A. PETE KING FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address
3920 MERRICK ROAD

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

Purpose of Disbursement
FUNDRAISER

Candidate Name
PETE KING

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

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

Date of Disbursement: **09 / 13 / 2004**

Amount of Each Disbursement this Period
300.00

B. JIM MATHESON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address
P.O. BOX 636

City **ANNANDALE** State **VA** Zip Code **22003**

Purpose of Disbursement
FUNDRAISER

Candidate Name
JIM MATHESON

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **VA** District: **2**

Date of Disbursement: **09 / 23 / 2004**

Amount of Each Disbursement this Period
1000.00

C. GALLEGLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address
P.O. BOX 94001

City **SIMI VALLEY** State **CA** Zip Code **94001**

Purpose of Disbursement
FUNDRAISER

Candidate Name
ELTON GALLEGLY

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **CA** District: **23**

Date of Disbursement: **09 / 23 / 2004**

Amount of Each Disbursement this Period
1000.00

SUBTOTAL of Disbursements This Page (optional) **3000.00**

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check any one)						PAGE 4 OF 4	
<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	

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NAME OF COMMITTEE (In Full)
LDO CORPORATION PAC

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

Date of Disbursement
09 / 23 / 2004

Mailing Address
24265 SAN FERNANDO ROAD

City: SANTA CLARITA State: CA Zip Code: 91321

Purpose of Disbursement: FUNDRAISER

Candidate Name: BUCK MCKEON

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: CA District: 25

Amount of Each Disbursement this Period
1,000.00

Full Name (Last, First, Middle Initial)
B. AL SAFA (CAMERER)

Date of Disbursement
09 / 29 / 2004

Mailing Address

City State Zip Code

Purpose of Disbursement: IN-KIND CONTRIBUTION

Candidate Name: RICHARD POMBO

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼
REFLECTION

State: District:

Amount of Each Disbursement this Period
1,000.00

Full Name (Last, First, Middle Initial)
C. RICHARD POMBO FOR CONGRESS

Date of Disbursement
07 / 01 / 2004

Mailing Address
P.O. BOX 16021

City: ALEXANDRIA State: VA Zip Code: 22302

Purpose of Disbursement: FUNDRAISER

Candidate Name: RICHARD POMBO

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: CA District: 11

Amount of Each Disbursement this Period
2,000.00

SUBTOTAL of Disbursements This Page (optional) 4,000.00

TOTAL This Period (last page this line number only) 13,000.00

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 10-13-04
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>PL</i> PREPARER	10-18-04 DATE PREPARED