FEC FORM 3X	AN	EPORT O ID DISBU Other Than A	JRSEM	ENTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in f		EFEC MAILING LA		ample:If typing or the lines	, type			
	erican Political A	Action Committee						
ADDRESS (number and	street)	05 Pennsylvania Av	venue, SE					
Check if diffe than previous reported. (AC	у ти	Vashington					20003	-
2. FEC IDENTIFICA	TION NUMBER	₩	CITY 🛋		S	STATE	ZIPCO	DE 🔺
C00355388			3. IS THIS REPORT		NEW N) <b>OR</b>	AM (A)	ENDED	
July 15QuarterlyOctoberQuarterlyXJanuaryQuarterlyJuly 31 MReport(NYear On	orts: 7 Report(Q1) 7 Report(Q2) 15 7 Report(Q3) 31 7 Report(YE) Aid-Year lon-election	(b) Monthly Report Due On: (c) 12-Day <b>PRE</b> -Elec: Report for (d) 30-Day <b>Post</b> -Ele Report for	the: Election on ction the:		12C)	Sep 2	2G) in the State of DR) in the	Special (30S)
5. Covering Period I certify that I have exam Type or Print Name of		0 1 2 0 rt and to the best of Mr. Joseph A. Aute	my knowledge	through and belief it is	12 true, correct a	3 1 and complete.	2 0 0 9	
Signature of Treasurer	Electronically	y Filed by Mr. Jo	seph A. Auteri		D;	ate 0 1	29	2010
NOTE : Submission of	false, erroneous	s, or incomplete info	ormation may su	bject the pers	on signing this	Report to the	penalties of 2 U.	S.C 437g.
Office Use Only							FEC FOR (Rev. 12/20	

Image# 10930240880

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

2 / 31

V	Vrite or Type Committee Name National Italian American Political Action Co	mmittee	
F	Report Covering the Period: From:	0 1 Y Y Y Y 0 1 2 0 0 9	To:
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2009 Y Y Y		26119.97
	(b) Cash on Hand at Begining of Reporting Period	21129.59	
	(c) Total Receipts (from Line 19)	7768.07	90232.82
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	28897.66	116352.79
7.	Total Disbursements (from Line 31)	19317.09	106772.22
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9580.57	9580.57
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	10000.00	٦
	Schedule C and/or Schedule D)	10000.00	
	This Committee has qualified as a multicandidate	committee. (see FEC FORM 1M)	

#### For further information contact:

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

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

#### Image# 10930240881

#### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Report Covering the Period:

I. Receipts

(i) Itemized (use Schedule A) .....

(ii) Unitemized .....

(b) Political Party Committees ..... Other Political Committees

> Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry

Party Committees .....

13. All Loans Received .....

14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5) .....

Political Committees .....

(Dividends, Interest, etc.) .....

(from Schedule H3) .....

18. Transfers from Non-Federal and Levin Funds

(such as PACs) .....

Totals to Line 33, page 5) ..... >

Lines 11(a)(i) and (ii) .....

11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees

(iii) TOTAL (add

12. Transfers From Affiliated/Other

16. Refunds of Contributions Made to Federal candidates and Other

(a) Non-Federal Account

17. Other Federal Receipts

(C)

(d)

National Italian American Political Acti

From:

ction Committee	
M M 0 7 0 1 Y Y Y Y Y Y Y 2 0 0 9	To: M M J D D Y Y Y Y Y 3 1 2 3 1 2 0 0 9
COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
-	
6775.00	70975.00
925.00	8935.00
7700.00	79910.00
0.00	0.00
0.00	9600.00
7700.00	89510.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	651.59
0.00	0.00
68.07	71.23
S	
0.00	0.00
0.00	0.00

0.00

7768.07

7768.07

(c) Total Transfer (add 18(a) and 18(b)).

(b) Levin Funds (from Schedule H5) ......

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

20. Total Federal Receipts (subtract Line 18(c) from Line 19) ..... 0.00

90232.82

3/31

90232.82

#### Image# 10930240882

### **DETAILED SUMMARY PAGE**

	FEC Form 3X (Rev. 02/2003)	of Disbursements	4 / 31
	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	9669.16	94174.29
	<ul> <li>(c) Total Operating Expenditures</li> <li>(add 21(a)(i), (a)(ii) and (b))</li> </ul>	9669.16	94174.29
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
24.	Independent Expenditure (use Schedule E)	0.00	0.00
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
28.	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	1050.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	9607.00	9607.00
	<ul><li>(d) Total Contribution Refunds</li><li>(add Lines 28(a), (b), and (c))</li></ul>	9607.00	10657.00
29.	Other Disbursements	40.93	1940.93
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.		10017.00	100770.00
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	19317.09	106772.22
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	19317.09	106772.22

\_

## **DETAILED SUMMARY PAGE**

of Disbursements FEC Form 3X (Rev. 02/2003)

5 / 31

	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)	7700.00	89510.00
34.	Total Contribution Refunds (from Line 28(d))	9607.00	10657.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	-1907.00	78853.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	9669.16	94174.29
87.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	651.59
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	9669.16	93522.70

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	() Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 6/31           (check only one)         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) National Italian American Political A	nd Statements may not be sold or used by any pers the name and address of any political committee t Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)         Ms. Barbara J. Augustine         Mailing Address       595 Main Street         Suite 100         City         Schwenksville         FEC ID number of contributing federal political committee.         Name of Employer Golf Outing Productions         Receipt For:         Primary       General Other (specify) ▼	State     Zip Code       PA     19473-1010       C     Occupation       Occupation     Owner       Aggregate Year-to-Date     ▼       3850.00	Date of Receipt
Full Name (Last, First, Middle Initial)         Mr. Joseph A. Auteri         Mailing Address       2515 Garrett Road         City         Drexel Hill         FEC ID number of contributing federal political committee.         Name of Employer Berardi, Auteri & Assoc         Receipt For:         Primary       General Other (specify) ▼	State     Zip Code       PA     19026-1010       C       Occupation       Financial Advisor       Aggregate Year-to-Date       850.00	Date of Receipt Date of Receipt Date of Receipt D 2 3 / Y 2 0 0 9 Transaction ID: A6EA6D5BC1371466680 Amount of Each Receipt this Period 75.00
Full Name (Last, First, Middle Initial)         Mr. Joseph A. Auteri         Mailing Address       2515 Garrett Road         City         Drexel Hill         FEC ID number of contributing federal political committee.         Name of Employer Berardi, Auteri & Assoc         Receipt For:         Primary       General         Other (specify) ▼	State       Zip Code         PA       19026-1010         C       Occupation         Financial Advisor       Aggregate Year-to-Date       ▼         850.00	Date of Receipt M M / D D / Y Y Y Y 1 0 2 3 / 2 0 0 9 Transaction ID: AC0C1284EB0D04B9EA Amount of Each Receipt this Period 75.00
SUBTOTAL of Receipts This Page (optional	al)	300.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 7/31         (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) National Italian American Political Act	name and address of any political committee to	on for the purpose of soliciting contributions
A.	Full Name (Last, First, Middle Initial) Mr. Joseph A. Auteri		Date of Receipt
	Mailing Address 2515 Garrett Road		1 2 3 1 2 0 0 9
	City	State Zip Code	Transaction ID: AE92CC76F0B444A3FB90
	Drexel Hill	PA 19026-1010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	750.00
	Name of Employer Berardi, Auteri & Assoc	Occupation Financial Advisor	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify) ▼	1600.00	]
- B.	Full Name (Last, First, Middle Initial) Ms. Mildred L. Banks	1	Date of Receipt
	Mailing Address 1518 N. 61st Street		07 / 15 / Y Y Y Y 0 09
	City	State Zip Code	Transaction ID: AEA3AE1C2F0824F869C
	Philadelphia	PA 19151-4220	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer Retired	Occupation Retired	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	]
- c.	Full Name (Last, First, Middle Initial) Vincent B. Mancini, Esg.		Date of Receipt
•	Mailing Address 414 E. Baltimore Pike		M M / D D / Y Y Y Y 10 23 2009
	City	State Zip Code	Transaction ID: A2EF6BA6A9DEE4BF984
	Media	PA 19063-3808	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		150.00 Partnership Attribution
	Name of Employer Self-employed	Occupation Attorney	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	
ſ	SUBTOTAL of Receipts This Page (optional)		900.00
f	TOTAL This Period (last page this line number		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 8/31           (check only one)
	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full) National Italian American Political Ac	ne name and add	dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Mr. Anthony S. DiSandro, Sr. Mailing Address 205 McClure Drive	State	Zip Code	Date of Receipt $ \begin{array}{c}                                     $
	Blue Bell FEC ID number of contributing federal political committee.	PA	19422-2833	Amount of Each Receipt this Period 225.00
	Name of Employer Stevens & Lee PC Receipt For: Primary General Other (specify) ▼	Occupation Sharehol Aggregate		]
– B.	Full Name (Last, First, Middle Initial) Mr. Anthony S. DiSandro, Sr. Mailing Address 205 McClure Drive			Date of Receipt
	City <u>Blue Bell</u> FEC ID number of contributing federal political committee.	State PA	Zip Code 19422-2833	Transaction ID: AD6DF628B69E74D99B1 Amount of Each Receipt this Period 150.00
	Name of Employer Stevens & Lee PC Receipt For: Primary General Other (specify) ▼	Occupation Sharehol Aggregate		]
- C.	Full Name (Last, First, Middle Initial) Law Offices of Vincent B. Mancicni & Associate Mailing Address 414 E. Baltimore Pike			Date of Receipt
	City <u>Media</u> FEC ID number of contributing federal political committee.	State PA	Zip Code 19063-3808	Transaction ID: AF75C95D7E9E6486FB Amount of Each Receipt this Period 150.00
	Name of Employer	Occupation		Partnership Contribution to be Attributed
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00	]
Γ	SUBTOTAL of Receipts This Page (optional)		······	525.00

I	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 9/31         (check only one)       Image: Check only one)         X       11a       11b       11c       12         Image: Ima
	ny information copied from such Reports and s r for commercial purposes, other than using th NAME OF COMMITTEE (In Full) National Italian American Political Ac	e name and ad	dress of any political committee to	
. Z	Full Name (Last, First, Middle Initial) Anthony Motolese			Date of Receipt
	Mailing Address 460 Egg Harbor Roac			0 9 / 2 1 / Y Y Y Y 0 9 / 2 1 / 2 0 0 9
	City	State	Zip Code	Transaction ID: A0151FA2AC2F44E26B
	Blackwood FEC ID number of contributing federal political committee.	NJ C	08012-2112	Amount of Each Receipt this Period
	Name of Employer Information Requested	Occupatio Informati	n on Requested	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 2200.00	]
. <u> </u>	Full Name (Last, First, Middle Initial) Ms. Luci Patalano			Date of Receipt
	Mailing Address 4 logan Drive			10 <sup> / D D</sup> / Y Y Y Y 2009
	City	State	Zip Code	Transaction ID: AD2EC6117B7754F3FA9
	<u>Cherry Hill</u> FEC ID number of contributing federal political committee.	NJ C	08034-1734	Amount of Each Receipt this Period 75.00
	Name of Employer Information Requested		on Requested	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Gina Petrongolo			Date of Receipt
	Mailing Address 193 Lacosta Drive			07 13 Y Y Y Y 099
	City	State	Zip Code	Transaction ID: A7BD763658B324BCCA
	Blackwood	NJ	08012-5547	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2100.00
	Name of Employer N/A	Occupatio AP Cons		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 2100.00	
	SUBTOTAL of Receipts This Page (optional) .			4375.00

	ILE A (FEC Form 3X D RECEIPTS	)	Use separate schedule for each category of the Detailed Summary Page	(s) (ch	R LINE eck only	/ one)	BER:	PA		0/31 12 16 <b>[</b>	7 17
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	COMMITTEE (In Full) Italian American Political A	ction Commit	tee								
Mr. Dean F	Full Name (Last, First, Middle Initial) Mr. Dean Picciotti						ipt				
Mailing Ac	ddress 1530 Locust Street Suite 2B				<sup>M</sup> 1 0	/	23			0 9 9	
City		State	Zip Code	1	Transac	ction	id: A	31DA2	2C96	8BCE	480C
<u>Philadel</u> FEC ID nu	phia umber of contributing	PA	19102-4436		Amount	t of Ea	ach R	eceipt tł		riod 5.00	-
	litical committee.	C							22	5.00	
Name of E Lex Tech	Employer Holdings	Occupation Informat	on ion Requested								
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Prim Othe	nary General er (specify) <b>▼</b>	0 0	225.0	0							
	e (Last, First, Middle Initial) n A. Scandone				Date of	Rece	ipt				
Mailing Ac	ddress 1297 Sumner Way				<sup>м</sup> 1 0	/	<sup>D</sup> 2 3			0 0 9	]
City		State	Zip Code	1	Transac	ction	id: A	19F47	2E58	86694	76EA
West Ch		PA	19382-8263		Amount	t of Ea	ach R	eceipt th	nis Pe	riod	-
	umber of contributing litical committee.	C						1	7	5.00	
Name of E Self Empl	Employer oyed	Occupation Self-emp									
Receipt Fo		·	e Year-to-Date ▼ 425.0	0							
	e (Last, First, Middle Initial) Stampone, Esg.				Date of	Rece	ipt				
	ddress 500 Cottman Avenue	Э			<sup>м</sup> м 10	_	23			0 0 9	1
City Cheltenh		State PA	Zip Code		Transac		ID: A	BE912			D204
FEC ID nu	umber of contributing litical committee.	C	19012-2009		Amount	t of Ea		eceipt tr	-	0.00	
Name of E Stampone	Employer e, D'angelo & Renzi	Occupatio Attorney									
Receipt Fo			e Year-to-Date ▼ 3850.0	0							
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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 11/31         (check only one)       Image: Check only one in the image: Check on iteration is a state of the image: Check on iterate of the image: Check on iterate of the image: Chec
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) National Italian American Political Action	on Committ	ee	
Α.	Full Name (Last, First, Middle Initial) Ms. Carol Tamburino			Date of Receipt
	Mailing Address 11 Penn Center 1835 Market St 21st FL			10 <sup>//</sup> 23 <sup>//</sup> 2009
	City	State	Zip Code	Transaction ID: AB466A8B0B2E44878989
	Philadelphia	PA	19103-2968	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Turner Construction	Occupatio Informati	n on Requested	
Receipt For:       Aggregate V         Primary       General         Other (specify) ▼		e Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional)	►	75.00
TOTAL This Period (last page this line number only)	►	6775.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)				R:		PA	GE 12/	/ 31	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 2	21b	22 28a	23 28b		24 28c	25 29	$\square$	26 301
Any Information copied from such Reports and State or for commercial purposes, other than using the name		/ any pe	rson foi	the pur	rpose of s		ting co	ontribution		
NAME OF COMMITTEE (In Full)						0				
National Italian American Political Action	Committee									
Full Name (Last, First, Middle Initial) Aristotle International					action ID			38ED1D	C604	18
Mailing Address 205 Pennsylvania Ave.,	SE			07	M / D (	07	/ Y	²oŏ	9 <sup>×</sup>	
City Washington	StateZip CodeDC20003-1164			Amour	nt of Each	ו Dis	burse			d
Purpose of Disbursement June Payment	Γ							2425.0	0	
Candidate Name	(	Categor Type	y/							
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼									
Full Name (Last, First, Middle Initial)				<b>T</b>					150	01
Aristotle International				Date o	action ID	eme				91
Mailing Address 205 Pennsylvania Ave.,	SE			07		07		² 0 ŏ	9	
City Washington	State Zip Code DC 20003-1164			Amour	nt of Each	ו Dis	burse			d
Purpose of Disbursement March Invoice				L .				1818.9		
Candidate Name		Categor Type	y/							
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)									
Full Name (Last, First, Middle Initial) Aristotle International					<b>action ID</b> of Disburs			2B4FC	8B44	58
Mailing Address 205 Pennsylvania Ave.,	SE			07	M / D.	13	/ Y	ž0 ŏ	9 <sup>×</sup>	
City Washington	State Zip Code DC 20003-1164			Amour	nt of Each	ו Dis	burse	ment this	Perio	d
Purpose of Disbursement Credit Card Processing Fee				L.				837.0	0	
Candidate Name	(	Categor Type	y/							
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼									
SUBTOTAL of Disbursements This Page (optional)			•					5080.9	7	
TOTAL This Period (last page this line number only	)		▶							
6AN026				FEC	Schedu	ıle B	( For	m 3X) (R	evise	d 02

	B (FEC Form 3	•	Use sepa	arate schedule(s)		)R LINI			٦:			PAG	àE 13/	31	
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	ied from such Reports irposes, other than usir					person	for 1	he pur	pose o	f soli	icitin	g con			
<b>\</b>	MITTEE (In Full) n American Politica	I Action C	committee	)											
Full Name (Last, Aristotle Interr	First, Middle Initial) national								<b>action</b> f Disbu			5979	D5388	D64	7E5
Mailing Address	205 Pennsylvar	nia Ave., S	SE				_	<sup>м</sup> 8 <sup>м</sup>	A /	<sup>D</sup> 1(	D /	Y	žoŏ	9 <sup>×</sup>	
City Washington			State DC	Zip Code 20003-1164				Amour	nt of Ea	ach D	Disbu	ırsem	ent this		d
Purpose of Disbu Credit Card Proc	cessing Fee												2.7	5	
Candidate Name	House	Disburse	ment For:		Categ Typ		_								
State:	Senate President District:		Primary Other (spe	General Gecify)											
Full Name (Last, Aristotle Interr	First, Middle Initial) national							Date o	f Disbu	ursen	nent		CA2700		15E
Mailing Address	205 Pennsylvar	nia Ave., S	SE					12	A /	02	2	Y	² 0 ŏ	9 <sup>×</sup>	
City Washington			State DC	Zip Code 20003-1164				Amour	nt of Ea	ach D	Disbu	ırsem	ent this		d
Purpose of Disbu Credit Card Proc	cessing Fee							L.					10.0	0	
Candidate Name		L			Categ Typ										
Office Sought: State:	House Senate President District:	Disburse	ment For: Primary Other (spe	General											
Full Name (Last, Aristotle Interr	First, Middle Initial) national	<u> </u>						Date o	<b>action</b> f Disbu	ursen	nent	91CE	EEAAF	19B4	1D7
Mailing Address	205 Pennsylvar	nia Ave., S	SE					12	A /	28	9	Y	² 0 ŏ	9 <sup>×</sup>	
City Washington			State DC	Zip Code 20003-1164				Amour	nt of Ea	ach D	Disbu	ırsem	ent this		d
Purpose of Disb Credit Card Proc Candidate Name	cessing Fee							<u> </u>					10.0	U	
Office Sought:	House	Disburse	ment For:		Categ Typ	-	_								
State:	Senate President District:		Primary Other (spe	ecify) <b>V</b>											
UBTOTAL of Dis	bursements This Page	(optional) .				•							22.7	5	
	d (last page this line nu	imber only)				►									
6AN026								FEC	Sche	dule	В(	Form	3X) (Re	evise	d 02

CHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 14/31
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only X 21b 27	7 one) 22 23 28a 28b	24 25 26 28c 29 30k
ny Information copied from such Reports and Sta r for commercial purposes, other than using the n				
NAME OF COMMITTEE (In Full)	and address of any pointear ce			
National Italian American Political Actic	n Committee			
Full Name (Last, First, Middle Initial)			Transaction ID:	BFBE253E5AF76411E
Cardworks Acquiring			Date of Disburse	
Mailing Address 101 Crossways Park	West		0 <sup>M</sup> 7 <sup>M</sup> / <sup>D</sup> 0	<sup>D</sup> 2 / <sup>Y</sup> 2009 <sup>Y</sup>
City Woodbury	State Zip Code NY 11797		Amount of Each I	Disbursement this Period
Purpose of Disbursement Merchant Credit Card Fees	Γ			75.00
Candidate Name		Category/ Type		
Office Sought: House Disbuter Senate President State: District:	ursement For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
Cardworks Acquiring			Date of Disburse	
Mailing Address 101 Crossways Park	West		0 <sup>M</sup> 7 <sup>M</sup> / <sup>D</sup> 0	<sup>D</sup> / <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>
City Woodbury	State Zip Code NY 11797		Amount of Each I	Disbursement this Period
Purpose of Disbursement Merchant Credit Card Fees	Γ			100.00
Candidate Name		Category/ Type		
Office Sought: House Disbutered Senate President State: District:	ursement For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) Cardworks Acquiring			Transaction ID: Date of Disburse	B4A855AF0CDDD40C
Mailing Address 101 Crossways Park	West		0 <sup>M</sup> 8 <sup>M</sup> / 0	
City Woodbury	State Zip Code NY 11797		Amount of Each I	Disbursement this Period
Purpose of Disbursement Merchant Credit Card Fees		0 U		75.00
Candidate Name		Category/ Type		
Office Sought: House Disbutered Senate President State: District:	ursement For: Primary General Other (specify) ▼	. )		
SUBTOTAL of Disbursements This Page (option	al)	····· <b>Þ</b>		250.00

SCHEDULE B (FEC Form 3	X) Use separate schedule(s)	FOR LINE NUMBER: PAGE 15/31
TEMIZED DISBURSEMENT	S for each category of the Detailed Summary Page	(check only one)         X       21b       22       23       24       25       26         27       28a       28b       28c       29       30
r for commercial purposes, other than using		y any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee
NAME OF COMMITTEE (In Full) National Italian American Political	Action Committee	
Full Name (Last, First, Middle Initial) Cardworks Acquiring		Transaction ID: B0BF44340205E4599 Date of Disbursement
Mailing Address 101 Crossways	Park West	0 9 <sup>M</sup> / 0 2 / Y 2 0 0 9 Y
City Woodbury	State Zip Code NY 11797	Amount of Each Disbursement this Period
Purpose of Disbursement Merchant Bankcard Fees	[	75.00
Candidate Name Office Sought: House	Disbursement For:	Category/ Type
State: District:	Primary     General       Other (specify)     ▼	
State: District: Full Name (Last, First, Middle Initial)		
Cardworks Acquiring		Transaction ID: BD9DDC97FBD0043 Date of Disbursement
Mailing Address 101 Crossways	Park West	
City Woodbury	StateZip CodeNY11797	Amount of Each Disbursement this Period
Purpose of Disbursement Merchant Credit Card Fee		75.00
Candidate Name		Category/ Type
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify) ▼	
Full Name (Last, First, Middle Initial) Cardworks Acquiring		Transaction ID: B603D5201D8F54BB Date of Disbursement
Mailing Address 101 Crossways	Park West	M         M         /         D         D         /         Y
City Woodbury	State Zip Code NY 11797	Amount of Each Disbursement this Period
Purpose of Disbursement Merchant Credit Card Fee	[	75.00
Candidate Name		Category/ Type
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify) ▼	
UBTOTAL of Disbursements This Page	optional)	225.00
<b>FOTAL</b> This Period (last page this line nur	ber only)	
6AN026		FEC Schedule B (Form 3X) (Revised 0

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 16/31
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the nar		y any person f	or the purpose of se	oliciting contributions
NAME OF COMMITTEE (In Full)				
National Italian American Political Action	Committee			
Full Name (Last, First, Middle Initial) Conestoga Bank			Transaction ID: Date of Disburse	BB92E6E91AE0A4A48
Mailing Address 165 POTTSTOWN PIK	E		1 <sup>M</sup> 0 <sup>M</sup> /0	
City Chester Springs	State Zip Code PA 19425-9518		Amount of Each	Disbursement this Period
Purpose of Disbursement				25.00
Merchant Bank Card Fee				
Candidate Name		Category/ Type		
Senate President	sement For: Primary General Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) Conestoga Bank			Date of Disburse	
Mailing Address 165 POTTSTOWN PIK	E		1 <sup>°</sup> 0 <sup>°</sup> 1	<b>3</b> / <b>Y Y Y Y Y Y Y Y Y Y</b>
City Chester Springs	State Zip Code PA 19425-9518		Amount of Each	Disbursement this Period
Purpose of Disbursement Bank Service Charge				35.00
Candidate Name		Category/ Type		
Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify) ▼	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Full Name (Last, First, Middle Initial) Conestoga Bank			Transaction ID: Date of Disburse	B7ECA461783B5474C
Mailing Address 165 POTTSTOWN PIK	E		10 <sup>M</sup> / 1	<b>3</b> / <b>Y Y Y Y Y Y Y Y Y Y</b>
City Chester Springs	State Zip Code PA 19425-9518		Amount of Each	Disbursement this Period
Purpose of Disbursement Merchant Bank Card Fee		v v		34.95
Candidate Name		Category/ Type		
Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify) ▼	∑1° =		
SUBTOTAL of Disbursements This Page (optional	)	►		94.95
TOTAL This Period (last page this line number only	/)	►		
E6AN026			FEC Schedu	le B(Form 3X) (Revised 02/3

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE			PA	GE 17/3	81
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only X 21b 27	22 28a	23 28b	24 28c	25 29	26 30
Any Information copied from such Reports and State or for commercial purposes, other than using the na		y any person fo					
NAME OF COMMITTEE (In Full)							
National Italian American Political Action	Committee						
Full Name (Last, First, Middle Initial) Conestoga Bank			Date of D	sbursen	nent	2222F826	_
Mailing Address 165 POTTSTOWN PIK	E		1 <sup>0</sup>	31		2 0 Ò 9	Y
City Chester Springs	StateZip CodePA19425-9518		Amount o	f Each D	)isburser	ment this P	eriod
Purpose of Disbursement Bank Service Charge						8.00	
Candidate Name		Category/ Type					
Office Sought: House Disbur Senate President State: District:	Sement For: Primary General Other (specify) ▼						
Full Name (Last, First, Middle Initial)			Transacti	on ID:	B35FF	B33FAA	30476
Conestoga Bank			Date of D	sbursen	nent		
Mailing Address 165 POTTSTOWN PIK	E		1 1 M	02	D / Y	2 0 Ò 9	Y
City Chester Springs	State Zip Code PA 19425-9518		Amount o	f Each D	)isburser	ment this P	
Purpose of Disbursement Merchant Bankcard Fee		U U				25.00	
Candidate Name	L	Category/ Type					
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼						
Full Name (Last, First, Middle Initial) Conestoga Bank			Transacti Date of Di			0DF8533	04FA
Mailing Address 165 POTTSTOWN PIK	E		1 1 <sup>M</sup>	02	D / Y	2 0 Ò 9	Y
City Chester Springs	State Zip Code PA 19425-9518		Amount o	f Each D	)isburser	ment this P	eriod
Purpose of Disbursement Bank Service Charge	[					35.00	
Candidate Name		Category/ Type					
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼						
SUBTOTAL of Disbursements This Page (optional	)	······ <b>Þ</b>				68.00	
TOTAL This Period (last page this line number onl	y)	►					
E6AN026			FEC S	chedule	B ( For	m 3X) (Rev	ised 02

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 18/31
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only X 21b 27	22 23 28a 28b	24 25 26 28c 29 30
Any Information copied from such Reports and State or for commercial purposes, other than using the nan				
NAME OF COMMITTEE (In Full)				
National Italian American Political Action	Committee			
Full Name (Last, First, Middle Initial) Conestoga Bank			Date of Disburs	BBC6F5553FD874B4
Mailing Address 165 POTTSTOWN PIKE	Ē		11 <sup>M</sup>	0 3 <sup>′</sup> <sup>°</sup> 2 0 0 9 <sup>°</sup>
City Chester Springs	State Zip Code PA 19425-9518		Amount of Eac	n Disbursement this Period
Purpose of Disbursement Bank Service Charge		0 0		35.00
Candidate Name		Category/ Type		
Office Sought: House Disburs Senate President District:	ement For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial)			Transaction IF	: BF099B70773D841A
Conestoga Bank			Date of Disburs	sement
Mailing Address 165 POTTSTOWN PIK	1		11	0 3 <sup>′</sup> <sup>°</sup> 2 0 0 9 <sup>°</sup>
City Chester Springs	StateZip CodePA19425-9518		Amount of Eac	n Disbursement this Period
Purpose of Disbursement Bank Service Charge				35.00
Candidate Name		Category/ Type		
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) Conestoga Bank			Transaction ID	B9784BC4496BB446
Mailing Address 165 POTTSTOWN PIKE	Ξ		11 <sup>M</sup> /D	0 3 <sup>′</sup> <sup>′</sup> <sup>°</sup> <sup>°</sup> 2 0 0 9 <sup>°</sup>
City Chester Springs	State Zip Code PA 19425-9518		Amount of Eac	n Disbursement this Period
Purpose of Disbursement Bank Service Charge	Γ			35.00
Candidate Name		Category/ Type		
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼			
SUBTOTAL of Disbursements This Page (optional)		►		105.00
TOTAL This Period (last page this line number only	)	►		
E6AN026			FEC Sched	ule B ( Form 3X) (Revised 02

TermizeD DISBURSEMENTS       To each adaptory of the Data       Image: Disbursement State and Address of any polical committee State and Address of any polical committee to solicit contributions from such committee State and Address of any polical committee to solicit contributions from such committee State and Address of any polical committee to solicit contributions from such committee State and Address of any polical committee to solicit contributions from such committee State and Address of any polical committee to solicit contributions from such committee State and Address of any polical committee to solicit contributions from such committee State and Address 165 POTTSTOWN PIKE       Transaction ID: BA981826FE03F4EDF Date of Disbursement II: 1 * 0 * 0 * 1 * 2 * 0 * 0 * 0 * 0 * 0 * 0 * 0 * 0 * 0	EMIZED DISBURSEMENTS	for each category of the				- 1							
r for commercial purposes, other than using the name and address of any policial committee to solicit contributions from such committee         NAME OF COMMITTEE (in Full)         National Italian American Political Action Committee         Full Name (Last, First, Middle Initial)         Conestoga Bank         Maing Address       165 POTTSTOWN PIKE         City       State         Condition Name       Disbursement         Morchan Bankcard Fee       Catogory         Constoga Bank       Disbursement For:         Gandidate Name       Disbursement For:         State:       Disbursement For:         Office Sought:       House         Transaction ID:       BD93779BDA3BE485;         Conestoga Bank       Transaction ID:         Malling Address       165 POTTSTOWN PIKE         City       State       Disbursement For:         State:       Disbursement For:       State         Office Sought:       House       Disbursement For:				21b	2	22 [		,					_ ·
Conestoga Bank       Date of Disbursement         Mailing Address       165 POTTSTOWN PIKE         City       State       Zip Code         PA       19425-9518         Purpose of Disbursement       Galgory         Mailing Address       Isbursement for:         Othice Sought:       House         District:       Disbursement for:         Other (specify) ▼       General         Other (specify) ▼       Category         Transaction ID:       BD93779BDA3BE485:         Conestoga Bank       Disbursement for:         District:       District:         Full Name (Last, First, Middle Initia)       Conestoga Bank         Conestoga Bank       Transaction ID:         Mailing Address       165 POTTSTOWN PIKE         City       State         Category       Y 2 0 0 9         Office Sought:       House         Pareside Disbursement       Gategory         Category       Transaction ID:         Bank Service Charge       Amount of Each Disbursement this Period         City       State       Disbursement For:         President       District:       District:         Full Name (Last, First, Middle Initia)       Conestoga Bank	for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full)	ne and address of any political co											
Mailing Address       165 POTTSTOWN PIKE         City       State       Zip Code         Purpose of Disbursement       PA       19425-9518         Purpose of Disbursement       Disbursement For:       Galegory/         Office Sought:       House       Disbursement For:       Galegory/         Office Sought:       House       Disbursement For:       Galegory/         State:       District:       Disbursement For:       Galegory/         Constoga Bank       Disbursement For:       Galegory/         Mailing Address       165 POTTSTOWN PIKE       Transaction ID:       BD93779BDA3BE485:         City       State       Zip Code       PA       19425-9518         Purpose of Disbursement       PA       19425-9518       PA         Purpose of Disbursement       Disbursement For:       State       Zip Code         City       State       Disbursement For:       State       Zip Code         Office Sought:       House       Disbursement For:       Galegory/       Transaction ID:       B4FEE1832EA054519         City       State:       Disbursement For:       Galegory/       Tit       10/10/1 / Zit 0/19/       Zit 0/10/1 / Zit 0/19/         City       State:       State:       Disbu											326FF(	)3F4	EDF
Chester Springs       PA       19425-9518         Purpose of Disbursement					1		/ [	0	<b>4</b>	Y	žoŏ	9 <sup>×</sup>	
Category/ Type         Office Sought:       House Senate         Preisident       Disbursement For:         Preisident       Other (specify) ▼         State:       District:         Full Name (Last, First, Middle Initial)       Conestoga Bank         Mailing Address       165 POTTSTOWN PIKE         Chester Springs       PA         Purpose of Disbursement       General         Purpose of Disbursement       State         Category/       Y         Office Sought:       General         Parsident       Disbursement For:         Category/       Y         Office Sought:       Disbursement For:         Senate       President         Other (specify)       V         Office Sought:       Disbursement For:         Senate       President         Other (specify)       V         State:       Disbursement         Mailing Address       165 POTTSTOWN PIKE         City       Other (specify)       V         Chester Springs       PA         PA       19425-9518         Purpose of Disbursement       Mailing Address         165 POTTSTOWN PIKE       Citegory/         City					Α	mour	nt of Ea	ch [	Disbı	ursem	nent this	Perio	bd
Office Sought:       House       Disbursement For:       Type         Office Sought:       House       Disbursement For:       Other (specify) ▼         Full Name (Last, First, Middle Initial)       Other (specify) ▼       Transaction ID:       BD93779BDA3BE485:         Conestoga Bank       Tansaction ID:       BD93779BDA3BE485:       Date of Disbursement         Mailing Address       165 POTTSTOWN PIKE       Tansaction ID:       BD93779BDA3BE485:         City       Chester Springs       PA       19425-9518         Purpose of Disbursement       Bank Service Charge       Category/ Type       35.00         Office Sought:       House       Disbursement For:       Senate         Office Sought:       House       Disbursement For:       Senate         Other (specify) ▼       Ite of Disbursement       Transaction ID:       B4FEE1832EA05451S         Candidate Name       Disbursement For:       Senate       President       Tansaction ID:       B4FEE1832EA05451S         City       State       Disbursement For:       Amount of Each Disbursement this Period       Tansaction ID:       B4FEE1832EA05451S         City       State       Disbursement For:       Category/ Type       To 0 1 2 0 0 9 3       Amount of Each Disbursement this Period         City       <	Merchant Bankcard Fee	[	Cateo	on/							50.0	0	
Conestoga Bank       Mailing Address       165 POTTSTOWN PIKE         City       State       Zip Code         Chester Springs       PA       19425-9518         Purpose of Disbursement       Bank Service Charge       Amount of Each Disbursement this Period         Category/       Type         Office Sought:       House       Disbursement For:         President       Other (specify) ▼         Full Name (Last, First, Middle Initial)       Conestoga Bank         Conestoga Bank       Disbursement For:         President       Disbursement For:         Other (specify) ▼       Amount of Each Disbursement         Full Name (Last, First, Middle Initial)       Conestoga Bank         Conestoga Bank       Transaction ID: B4FEE1832EA054513         Disbursement       Mailing Address         165 POTTSTOWN PIKE       Transaction ID: B4FEE1832EA054513         City       State       Zip Code         Chester Springs       PA       19425-9518         Purpose of Disbursement       Category/ Type       X 2 0 0 9         Office Sought:       House       Disbursement For:         Senate       Primary       General         Office Sought:       House       Disbursement For:         Senate	Senate President	ement For: Primary General	-	-	_								
City       State       Zip Code         Chester Springs       PA       19425-9518         Purpose of Disbursement       Bank Service Charge						Date o	f Disbu	rser	ment				485
Chester Springs       PA       19425-9518         Purpose of Disbursement       35.00         Bank Service Charge       Category/ Type         Office Sought:       House         Senate       Primary         General       Other (specify)         State:       Disbursement For:         Gonestoga Bank       Other (specify)         Mailing Address       165 POTTSTOWN PIKE         City       State         Purpose of Disbursement       President         State:       Disbursement         Purpose of Disbursement       Mailing Address         Purpose of Disbursement       Category/         Category/       Y 2 0 0 9         Office Sought:       House         Disbursement       Category/         Category/       Transaction ID: B4FEE1832EA054519         Disbursement       Mailing Address         Mailing Address       165 POTTSTOWN PIKE         City       State       Zip Code         Purpose of Disbursement       General         Office Sought:       House       Disbursement For:         State:       District:       Primary       General         Other (specify)       Other (specify)       The secident	Mailing Address 165 POTTSTOWN PIK	<u> </u>				11		0 4	4		200	9	
In the proof of Diagonal Service Charge   Candidate Name   Candidate Name   Office Sought:   House   President   State:   District:   Full Name (Last, First, Middle Initial) Conestoga Bank Conestoga Bank Mailing Address 165 POTTSTOWN PIKE City City State: State: Disbursement Merchant Bankcard Fee Candidate Name Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Candidate Name Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Other (specify) ▼ State: District: Disbursement For: Other (specify) ▼ State: District:					A	mour	nt of Ea	ch [	Disbı	ursem			bd
Office Sought:       House       Disbursement For:       Type         Office Sought:       President       Other (specify) ▼       Image: Construct of the specify) ▼         Full Name (Last, First, Middle Initial)       Conestoga Bank       Transaction ID: B4FEE1832EA054519         Mailing Address       165 POTTSTOWN PIKE       Image: Construct of the specify of the specific the specific the specific the specific the specific the sp	Bank Service Charge				1						35.0	JŪ	
Senate       Primary       General         Other (specify)       Image: Character Springs       District:         Full Name (Last, First, Middle Initial)       Conestoga Bank       Transaction ID: B4FEE1832EA05451S         Mailing Address       165 POTTSTOWN PIKE       Image: Character Springs       District:         City       State       Zip Code       Amount of Each Disbursement this Period         Purpose of Disbursement       PA       19425-9518       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For:       Category/ Type       34.95         Office Sought:       House       Disbursement For:       General         Other (specify)       Other (specify)       Image: Character Springs       Disbursement For:         Senate       Primary       General       Other (specify)       Image: Character Springs													
Conestoga Bank       Date of Disbursement         Mailing Address       165 POTTSTOWN PIKE         City       State       Zip Code         Chester Springs       PA       19425-9518         Purpose of Disbursement       Amount of Each Disbursement this Period         Merchant Bankcard Fee       Category/ Type         Office Sought:       House         Disbursement For:       Senate         President       Other (specify)         State:       District:	Senate President	Primary General											
City       State       Zip Code         Chester Springs       PA       19425-9518         Purpose of Disbursement       34.95         Merchant Bankcard Fee       Category/ Type         Candidate Name       Category/ Type         Office Sought:       House         President       Disbursement For:         President       Other (specify)         State:       District:						)ate o	f Disbu	rser	ment				1519
Chester Springs       PA       19425-9518         Purpose of Disbursement       34.95         Merchant Bankcard Fee       Category/ Type         Candidate Name       Category/ Type         Office Sought:       House         Disbursement For:       Senate         President       Other (specify)         State:       District:	Mailing Address 165 POTTSTOWN PIKE	Ξ			11	11		1 (	Ő Í	Y	200	9	
Merchant Bankcard Fee     Category/ Type       Candidate Name     Category/ Type       Office Sought:     House       Senate     Primary       President     Other (specify)       State:     District:	Chester Springs				Α	mour	nt of Ea	ch [	Disbı	ursem			d
Type       Office Sought:     House       Senate     Primary       President     Other (specify)       State:     District:	Merchant Bankcard Fee										34.9	95	
Senate     Primary     General       President     Other (specify)     ▼			-	-									
SUBTOTAL of Disbursements This Page (optional)	Senate President	Primary General											
	UBTOTAL of Disbursements This Page (optional)	·		•	[		· ·		•		119.9	95	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 20/31
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only X 21b 27	22 23 28a 28b	24 25 26 28c 29 30
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			or the purpose of se	oliciting contributions
NAME OF COMMITTEE (In Full) National Italian American Political Action	Committee			
Full Name (Last, First, Middle Initial) Conestoga Bank			Transaction ID: Date of Disburse	B5643F975DD1243D
Mailing Address 165 POTTSTOWN PIK	E		111 / D	0 / Y Y 0 0 9 Y
City Chester Springs	State Zip Code PA 19425-9518		Amount of Each	Disbursement this Period
Purpose of Disbursement Bank Service Charge Candidate Name		Category/		35.00
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼	Туре		
Full Name (Last, First, Middle Initial) Conestoga Bank			Date of Disburse	
Mailing Address 165 POTTSTOWN PIK	E		111 3	<b>b</b> / <b>Y Y Y Y Y Y Y Y Y Y</b>
City Chester Springs	State Zip Code PA 19425-9518		Amount of Each	Disbursement this Period
Purpose of Disbursement Bank Service Charge Candidate Name		Category/		8.00
	sement For:	Type		
State: District:	Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) Discover Merchant Services			Date of Disburse	
Mailing Address 2500 Lake Cook Rd.			0 <sup>M</sup> 7 <sup>M</sup> / 0	
City Riverwood	StateZip CodeIL60015		Amount of Each	Disbursement this Period
Purpose of Disbursement Merchant Creditcard Fees				35.00
		Category/ Type		
Office Sought: House Disbur Senate President State: District:	ement For: Primary General Other (specify) ▼			
SUBTOTAL of Disbursements This Page (optional	)	<b>)</b>		78.00
<b>FOTAL</b> This Period (last page this line number onl	/)	►		
E6AN026			FEC Schedu	le B (Form 3X) (Revised 0

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			NUMBE	R:		PA	GE 21	/ 31
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	ì	eck onl 21b	y one) 22	23		24	25	
	Detailed Summary Page		27	28a	28b		28c	29	H
Any Information copied from such Reports and State or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	me and address of any political co								
National Italian American Political Action	Committee								
Full Name (Last, First, Middle Initial) Discover Merchant Services				Date o	of Disburg	seme		340DBC	
Mailing Address 2500 Lake Cook Rd.				08	M / D	04	/ Y	²oŏ	9
City Riverwood	StateZip CodeIL60015			Amour	nt of Eac	h Dis	sburse	ment this	
Purpose of Disbursement Merchant Bankcard Fees	[	-						35.0	0
Candidate Name		Catego Type	ry/						
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼								
Full Name (Last, First, Middle Initial) Discover Merchant Services					action ID			37C100	98B42
Mailing Address 2500 Lake Cook Rd.				0 <sup>M</sup> 9	M / D	0 2	/ Y	ž0ŏ	9 <sup>Y</sup>
City Riverwood	State Zip Code IL 60015			Amour	nt of Eac	h Dis	sburse	ment this	
Purpose of Disbursement Merchant Bankcard Fees	[							35.0	0
Candidate Name	L	Catego Type	ry/						
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼								
Full Name (Last, First, Middle Initial) Discover Merchant Services					action ID		-	A3FB1	5F748I
Mailing Address 2500 Lake Cook Rd.				10	M / D	0 2	/ Y	ž0 ď	9 <sup>Y</sup>
City Riverwood	State Zip Code IL 60015			Amour	nt of Eac	h Dis	sburse	ment this	Period
Purpose of Disbursement Merchant Credit Card Fee	[			L.	a a			35.0	0
Candidate Name		Catego Type	ry/						
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼								
SUBTOTAL of Disbursements This Page (optiona	)		•					105.0	0
TOTAL This Period (last page this line number on	y)		►						-
6AN026				FEC	Sched	ule E	( For	m 3X) (R	evised

Office Sought:       House       Disbursement For:       General         President       Other (specify)       ▼         State:       District:       Other (specify)       ▼         Full Name (Last, First, Middle Initial)       La Collina       La Collina         Mailing Address       37-41 ASHLAND AVE.       City       State       Zip Code         BELMONT HILLS       PA       19004       Purpose of Disbursement       Meeting Expenses       Candidate Name       Collina         Office Sought:       House       Disbursement For:       General       Other (specify)       ▼         State:       District:       Primary       General       Other (specify)       ▼         State:       District:       Primary       General       Other (specify)       ▼         Full Name (Last, First, Middle Initial)       La Collina       Acollina       Mailing Address       37-41 ASHLAND AVE.       Tip Code         City       State       Zip Code       BELMONT HILLS       PA       19004         Purpose of Disbursement       PA       19004       Purpose of Disbursement       Code         BELMONT HILLS       PA       19004       Purpose of Disbursement       Code         BELMONT HILLS       PA <th></th>	
r for commercial purposes, other than using the name and address of any political commercial purposes, other than using the name and address of any political committee          NAME OF COMMITTEE (In Full)         National Italian American Political Action Committee         Full Name (Last, First, Middle Initial)         Discover Merchant Services         Mailing Address       2500 Lake Cook Rd.         City       State       Zip Code         Riverwood       IL       60015         Purpose of Disbursement       Merchant Credit Card Fee       C         Candidate Name       Disbursement For:       Primary       General         Office Sought:       House       Disbursement For:       Primary       General         Other (specify)       ▼       Testee       Tip Code       Tip Code         BELMONT HILLS       State       Zip Code       Tip Code         Purpose of Disbursement       President       Disbursement For:       Code         Office Sought:       House       Disbursement For:       Code         Candidate Name       Code <th>(check only one)         X       21b       22       23       24       25       26         27       28a       28b       28c       29       30</th>	(check only one)         X       21b       22       23       24       25       26         27       28a       28b       28c       29       30
Full Name (Last, First, Middle Initial)         Discover Merchant Services         Mailing Address       2500 Lake Cook Rd.         City       State       Zip Code         Riverwood       IL       60015         Purpose of Disbursement       Merchant Credit Card Fee	
Discover Merchant Services         Mailing Address       2500 Lake Cook Rd.         City       State       Zip Code         Riverwood       IL       60015         Purpose of Disbursement       Merchant Credit Card Fee	
City       State       Zip Code         Riverwood       IL       60015         Purpose of Disbursement       Merchant Credit Card Fee       C         Candidate Name       Disbursement For:       General         Office Sought:       House       Disbursement For:       General         Office Sought:       District:       Primary       General         State:       District:       Other (specify)       ▼         Full Name (Last, First, Middle Initial)       La Collina       E       City         Mailing Address       37-41 ASHLAND AVE.       City       State       Zip Code         BELMONT HILLS       PA       19004       Purpose of Disbursement       General       City         Purpose of Disbursement       Beeneral       City       General       City         Office Sought:       House       Disbursement For:       General       City         Office Sought:       House       Disbursement For:       General       City         State:       District:       Other (specify)       ▼       City         Full Name (Last, First, Middle Initial)       La Collina       City       State       Zip Code         BELMONT HILLS       PA       19004       Purpose	Transaction ID: BF2CE0CAE7BE141 Date of Disbursement
Riverwood       IL       60015         Purpose of Disbursement       Merchant Credit Card Fee       Candidate Name       Collian         Office Sought:       House       Disbursement For:       Collian         Office Sought:       District:       Other (specify)       ✓         Full Name (Last, First, Middle Initial)       La Collina       Code         Mailing Address       37-41 ASHLAND AVE.       City       State       Zip Code         BELMONT HILLS       PA       19004       Purpose of Disbursement       Code         Meeting Expenses       Candidate Name       Code       Code       Code         Office Sought:       House       Disbursement For:       General       Code         Office Sought:       House       Disbursement For:       General       Code         Office Sought:       House       Disbursement For:       General       Code         Office Sought:       House       Disbursement For:       Full Name (Last, First, Middle Initial)       La Collina       Code         Mailing Address       37-41 ASHLAND AVE.       City       State       Zip Code         BELMONT HILLS       PA       19004       Purpose of Disbursement       Code         Mailing Address       37-41 AS	1 1 <sup>M</sup> <sup>M</sup> <sup>/</sup> <sup>D</sup> 0 3 <sup>/</sup> <sup>Y</sup> 2 0 0 9 <sup>Y</sup>
Merchant Credit Card Fee       Candidate Name       C         Office Sought:       House       Disbursement For:       General         State:       District:       Primary       General         State:       District:       Other (specify)       ▼         Full Name (Last, First, Middle Initial)       La Collina       Zip Code         Mailing Address       37-41 ASHLAND AVE.       City       State       Zip Code         BELMONT HILLS       PA       19004       Purpose of Disbursement       Code         Office Sought:       House       Disbursement For:       Code       Code         Office Sought:       House       Disbursement For:       Code       Code         Office Sought:       House       Disbursement For:       Code       Code         State:       District:       Primary       General       Code         Full Name (Last, First, Middle Initial)       La Collina       Code       Pa       19004         Mailing Address       37-41 ASHLAND AVE.       City       State       Zip Code       ELMONT HILLS       Pa       19004         Purpose of Disbursement       Mailing Address       37-41 ASHLAND AVE.       City       State       Zip Code       ELMONT HILLS       Pa </td <td>Amount of Each Disbursement this Period</td>	Amount of Each Disbursement this Period
Office Sought:       House       Disbursement For:         Senate       Primary       General         President       Other (specify)       ▼         State:       District:       Other (specify)       ▼         Full Name (Last, First, Middle Initial)       La Collina       Mailing Address       37-41 ASHLAND AVE.         City       State       Zip Code         BELMONT HILLS       PA       19004         Purpose of Disbursement       Meeting Expenses       Candidate Name         Office Sought:       House       Disbursement For:       General         President       Other (specify)       ▼       State:       City         State:       District:       PA       19004       Purpose of Disbursement         Mailing Address       37-41 ASHLAND AVE.       Zip Code       ElLMONT HILLS       PA       19004         Purpose of Disbursement       PA       19004       Purpose of Disbursement       General       General         Mailing Address	35.00
Senate       Primary       General         President       Other (specify)       ▼         State:       District:       ✓         Full Name (Last, First, Middle Initial)       La Collina         Mailing Address       37-41 ASHLAND AVE.         City       State       Zip Code         BELMONT HILLS       PA       19004         Purpose of Disbursement       Meeting Expenses       Candidate Name         Office Sought:       House       Disbursement For:         Senate       Primary       General         President       Other (specify)       ▼         State:       District:       Other (specify)       ▼         Full Name (Last, First, Middle Initial)       La Collina       Collina       Collina         Mailing Address       37-41 ASHLAND AVE.       Tip Code       PA         City       State       District:       Full Name (Last, First, Middle Initial)       La Collina         Mailing Address       37-41 ASHLAND AVE.       City       State       Zip Code         BELMONT HILLS       PA       19004       Purpose of Disbursement       Code         Meeting Expenses       Candidate Name       Code       Code       Code	Category/ Type
La Collina         Mailing Address       37-41 ASHLAND AVE.         City       State       Zip Code         BELMONT HILLS       PA       19004         Purpose of Disbursement       Meeting Expenses       Image: Comparison of the system o	
City     State     Zip Code       BELMONT HILLS     PA     19004       Purpose of Disbursement     Meeting Expenses     Candidate Name       Office Sought:     House     Disbursement For:       Senate     Primary     General       Office Sought:     District:     Other (specify)       State:     District:     Other (specify)       Full Name (Last, First, Middle Initial)     La Collina       Mailing Address     37-41 ASHLAND AVE.       City     State     Zip Code       BELMONT HILLS     PA     19004       Purpose of Disbursement     Meeting Expenses     Code       Candidate Name     Code     Code	Transaction ID: B796E2B640BB44D2 Date of Disbursement
BÉLMONT HILLS       PA       19004         Purpose of Disbursement       Meeting Expenses       Image: Candidate Name       Image: Candidate Name         Office Sought:       House       Disbursement For:       Image: Candidate Name       Image: Candidate Name         Office Sought:       House       Disbursement For:       Image: Candidate Name       Image: Candidate Name       Image: Candidate Name         Office Sought:       House       Disbursement For:       Image: Candidate Name       Image: Candidate Name       Image: Candidate Name         Office Sought:       House       Disbursement For:       Image: Candidate Name       Image: Candidate Name       Image: Candidate Name         Office Sought:       Image: Candidate Name       State       Zip Code       Image: Candidate Name         Candidate Name       Image: Candidate Name       Image: Candidate Name       Image: Candidate Name       Image: Candidate Name	07 <sup>M</sup> / 01 <sup>V</sup> Y 2009 <sup>V</sup>
Meeting Expenses       Candidate Name       Candidate Name         Office Sought:       House       Disbursement For:       General         President       Primary       General       Other (specify)       ▼         State:       District:       Other (specify)       ▼         Full Name (Last, First, Middle Initial)       La Collina         Mailing Address       37-41 ASHLAND AVE.         City       State       Zip Code         BELMONT HILLS       PA       19004         Purpose of Disbursement       Meeting Expenses       Candidate Name	Amount of Each Disbursement this Period
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Full Name (Last, First, Middle Initial)         La Collina         Mailing Address       37-41 ASHLAND AVE.         City       State       Zip Code         BELMONT HILLS       PA       19004         Purpose of Disbursement       Meeting Expenses       Candidate Name	Туре
City     State     Zip Code       BELMONT HILLS     PA     19004       Purpose of Disbursement     Meeting Expenses     (1)       Candidate Name     (1)     (1)	Transaction ID: B47F3CED49BEC443 Date of Disbursement
BÉLMONT HILLS     PA     19004       Purpose of Disbursement	07 <sup>M</sup> / 01 <sup>D</sup> / 2009 <sup>Y</sup>
Meeting Expenses     Candidate Name	Amount of Each Disbursement this Period
	44.00
	Category/ Type
Office Sought:       House       Disbursement For:         Senate       Primary       General         President       Other (specify)       ▼         State:       District:       Other (specify)       ▼	
SUBTOTAL of Disbursements This Page (optional)	247.45

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such comm         NAME OF COMMITTEE (In Full)         National Italian American Political Action Committee         Full Name (Last, First, Middle Initial)         La Collina         Mailing Address         37-41 ASHLAND AVE.         City         Purpose of Disbursement         Meeting Expenses         Candidate Name         Other (specify)         V         State:       Disbursement For:         State:       District:         President       Disbursement For:         State:       District:         Mailing Address       37-41 ASHLAND AVE.         City       State         Zip Code         BELMONT HILLS       PA         Purpose of Disbursement         Meeting Expenses         Candidate Name         Office Sought:       House         Disbursement       Disbursem	28b       28c       29       30b         rpose of soliciting contributions ibutions from such committee       action ID: BD981303B837A4DC69         action ID: BD981303B837A4DC69       f       2009         m       /       03       /       2009         nt of Each Disbursement       254.70         m       /       12       /       2009         action ID: B616268C9D0FB4EC29       of Disbursement         m       /       12       /       2009         nt of Each Disbursement       169.75         mt of Each Disbursement this Period       169.75         action ID: BF4BA60B4421D4F75B       169.75	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE			P	AGE 2	8 / 31	
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such comm         NAME OF COMMITTEE (in Full)         National Italian American Political Action Committee         Full Name (Last, First, Middle Initial)         La Collina         Malling Address         37.41 ASHLAND AVE.         City         BELMONT HILLS         Purpose of Disbursement         Meeting Expenses         Candidate Name         Office Sought:         House         District:         Pull Name (Last, First, Middle Initial)         La Collina         Malling Address         37.41 ASHLAND AVE.         Office Sought:         House         Disbursement For:         President         District:         Purpose of Disbursement         Malling Address         37.41 ASHLAND AVE.         City         State:         Disbursement For:         President         Malling Address         37.41 ASHLAND AVE.         City         State:       Disbursement For:         Office Sought:       House       Disbursement For:	action ID:       BD981303B837A4DC69         of Disbursement       M         M       P 0 3       Y 2 0 0 9         Int of Each Disbursement this Period       254.70         action ID:       B616268C9D0FB4EC29         of Disbursement       Y 2 0 0 9         M       P 1 2       Y 2 0 0 9         Int of Each Disbursement       Y 2 0 0 9         M       Y 2 0 0 9         Int of Each Disbursement       T 2 0 0 9         Int of Each Disbursement this Period       169.75         action ID:       BF4BA60B4421D4F75E         of Disbursement       Y 2 0 0 9         Int of Each Disbursement this Period       169.75         action ID:       BF4BA60B4421D4F75E         of Disbursement       Y 2 0 0 9         Int of Each Disbursement this Period       Int of Each Disbursement	TEMIZED DISBURSEMENTS		X 21b	22					1
NAME OF COMMITTEE (In Full)         National Italian American Political Action Committee         Full Name (Last, First, Middle Initial)         La Collina         Mailing Address         37-41 ASHLAND AVE.         City         BitLMONT HILLS         Purpose of Disbursement         Meeting Expenses         Cardidate Name         Office Sought:         House         Disbursement         Mailing Address         37-41 ASHLAND AVE.         Category/         Category/         Type         Office Sought:         House         Disbursement For:         Category/         Type         Office Sought:         Huare (Last, First, Middle Initial)         La Collina         Mailing Address         37-41 ASHLAND AVE.         City         BELMONT HILLS       State         President         Disbursement         Meeting Expenses         Candidate Name         Category/         Office Sought:         Full Name (Last, First, Middle Initial)         La Collina         Mailing Address <td>action ID: BD981303B837A4DC6 of Disbursement <math>M / D_0 J / Y 2 0 0 9</math> nt of Each Disbursement this Period 254.70 action ID: B616268C9D0FB4EC2 of Disbursement <math>M / D_1 J J / Y 2 0 0 9</math> nt of Each Disbursement this Period 169.75 action ID: BF4BA60B4421D4F75b of Disbursement <math>M / D_0 J / Y 2 0 0 9</math> nt of Each Disbursement this Period</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	action ID: BD981303B837A4DC6 of Disbursement $M / D_0 J / Y 2 0 0 9$ nt of Each Disbursement this Period 254.70 action ID: B616268C9D0FB4EC2 of Disbursement $M / D_1 J J / Y 2 0 0 9$ nt of Each Disbursement this Period 169.75 action ID: BF4BA60B4421D4F75b of Disbursement $M / D_0 J / Y 2 0 0 9$ nt of Each Disbursement this Period									
Attional Italian American Political Action Committee         Full Name (Last, First, Middle Initial) La Collina       Transaction ID: BD981303 Date of Disbursement         Mailing Address       37-41 ASHLAND AVE.         City       State       Zip Code         Purpose of Disbursement       PA         Meeting Expenses       Category/ Type         Office Sought:       House         President       Disbursement For:         President       Disbursement For:         Other (specify)       Category/ Type         Full Name (Last, First, Middle Initial) La Collina       Disbursement For:         Mailing Address       37-41 ASHLAND AVE.         City       State         Purpose of Disbursement       Disbursement For:         President       Pa         Participe Expenses       Category/ Type         City       State         Purpose of Disbursement       Category/ Type         Office Sought:       House President         Disbursement For:       Category/ Type         Office Sought:       House President         Disbursement For:       Category/ Type         Office Sought:       House President         Disbursement       Category/ Type         Mailing Address	of Disbursement M / $D_0 B$ / Y 2009 Int of Each Disbursement this Period 254.70 action ID: B616268C9D0FB4EC2 of Disbursement M / $D_1 D$ / Y 2009 Int of Each Disbursement this Period 169.75 action ID: BF4BA60B4421D4F75 of Disbursement M / $D_0 A$ / Y 2009 Int of Each Disbursement this Period		and address of any political cor			ons from	such	commu		
La Collina       Date of Disbursement         Mailing Address       37-41 ASHLAND AVE.         City       State       Zip Code         BELMONT HILLS       PA       19004         Purpose of Disbursement       Category'         Meeting Expenses       Disbursement For:         Candidate Name       Disbursement For:         President       Disbursement For:         President       Disbursement For:         President       Other (specify) ▼         Full Name (Last, First, Middle Initial)       La Collina         Mailing Address       37-41 ASHLAND AVE.         City       State         President       Disbursement For:         Office Sought:       House         Disbursement       Mailing Address         Griddate Name       Category'         Type       Office Sought:         BELMONT HILLS       PA         Part 19004         Purpose of Disbursement         Meeting Expenses         Candidate Name       Disbursement For:         Office Sought:       House         Disbursement       Disbursement For:         President       Disbursement For:         Purpose of Disbursement       Disbursement	of Disbursement M / $D_0 B$ / Y 2009 Int of Each Disbursement this Period 254.70 action ID: B616268C9D0FB4EC2 of Disbursement M / $D_1 D$ / Y 2009 Int of Each Disbursement this Period 169.75 action ID: BF4BA60B4421D4F75 of Disbursement M / $D_0 A$ / Y 2009 Int of Each Disbursement this Period	N Y	Committee							
City       State       Zip Code         BELMONT HILLS       PA       19004         Purpose of Disbursement       Category/ Type       25         Office Sought:       House       Disbursement For:       Category/ Type         Office Sought:       House       Disbursement For:       Category/ Type         Office Sought:       House       Disbursement For:       Category/ Type         Office Sought:       House       Disbursement For:       Disbursement         Mailing Address       37-41 ASHLAND AVE.       Transaction ID: B616268C         City       State       Zip Code       Amount of Each Disbursement         Meeting Expenses       Disbursement For:       Category/ Type       7 2 2 1         Office Sought:       House       Disbursement For:       Category/ Type         Office Sought:       House       Disbursement For:       62         City       State       Zip Code       Amount of Each Disbursement         Mailing Address       37-41 AS	nt of Each Disbursement this Period 254.70 action ID: B616268C9D0FB4EC2 of Disbursement M / D D / Y Z 0 0 9 Int of Each Disbursement this Period 169.75 action ID: BF4BA60B4421D4F75 of Disbursement M / D 0 Å / Y Z 0 0 9 Int of Each Disbursement this Period							31303B	337 <b>A</b> 4	DC6
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Meeting Expenses       Category/ Type         Office Sought:       House Senate       Disbursement For: Primary General Other (specify) ▼         State:       District:         Full Name (Last, First, Middle Initial) La Collina       Transaction ID: B616268C: Date of Disbursement         Mailing Address       37-41 ASHLAND AVE.         City Purpose of Disbursement Meeting Expenses       State       Zip Code Primary         Cardidate Name       Disbursement For: Primary       General         Office Sought:       House President       Disbursement For: Primary       General         Office Sought:       House President       Disbursement For: Primary       General         Office Sought:       House President       Disbursement For: Primary       General         Mailing Address       37-41 ASHLAND AVE.       Transaction ID: BF4BA60E Date of Disbursement         Mailing Address       37-41 ASHLAND AVE.       Transaction ID: BF4BA60E Date of Disbursement         Mailing Address       37-41 ASHLAND AVE.       Amount of Each Disbursement         City BELMONT HILLS       State       Zip Code PA       Amount of Each Disbursement         Mailing Address       37-41 ASHLAND AVE.       Amount of Each Disbursement       62         City Disbursement       PA       19004       Amount of Each Disbursement	action ID: B616268C9D0FB4EC2 of Disbursement $M' \begin{pmatrix} D & D & 2 \\ 1 & 2 \end{pmatrix} \begin{pmatrix} Y & 2 & 0 & 0 & 9 \\ Y & 2 & 0 & 0 & 9 \end{pmatrix}$ nt of Each Disbursement this Period 169.75 action ID: BF4BA60B4421D4F75 of Disbursement $M' \begin{pmatrix} D & D & 4 \\ 0 & 0 & 4 \end{pmatrix} \begin{pmatrix} Y & 2 & 0 & 0 & 9 \\ Y & 2 & 0 & 0 & 9 \end{pmatrix}$ nt of Each Disbursement this Period				Amount of	Each Di	isburse			bd
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La Collina       Date of Disbursement         Mailing Address       37-41 ASHLAND AVE.         City       State       Zip Code         BELMONT HILLS       PA       19004         Purpose of Disbursement       Meeting Expenses         Candidate Name       Category/ Type         Office Sought:       House         President       Disbursement For:         State:       Disbursement For:         State:       Disbursement For:         State:       Disbursement For:         President       Other (specify)         State:       Disbursement For:         Full Name (Last, First, Middle Initial)       La Collina         Mailing Address       37-41 ASHLAND AVE.         City       State         Disbursement       Initial         Purpose of Disbursement       Initial         Mailing Address       37-41 ASHLAND AVE.         City       State       Zip Code         BELMONT HILLS       PA       19004         Purpose of Disbursement       Gate of Disbursement         Meeting Expenses       Category/ Type         Office Sought:       House       Disbursement For:         Office Sought:       House       Disbursement	of Disbursement M / D D / Y 2009 Int of Each Disbursement this Period 169.75 action ID: BF4BA60B4421D4F75 of Disbursement M / D 0 4 / Y 2009 Int of Each Disbursement this Period				Transacti		D616	26900		
City       State       Zip Code         BELMONT HILLS       PA       19004         Purpose of Disbursement       Amount of Each Disbursement         Meeting Expenses       Category/         Candidate Name       Disbursement For:         Senate       President         President       Other (specify) ▼         State:       District:         Full Name (Last, First, Middle Initial)       La Collina         Mailing Address       37-41 ASHLAND AVE.         City       State         Purpose of Disbursement       PA         Purpose of Disbursement       PA         Meeting Expenses       General         City       State         Purpose of Disbursement       PA         Purpose of Disbursement       PA         Purpose of Disbursement       General         Office Sought:       House         Disbursement For:       General	nt of Each Disbursement this Period 169.75 action ID: BF4BA60B4421D4F75 of Disbursement M / D 0 4 / Y 2 0 0 9 nt of Each Disbursement this Period				Date of Di	sbursem	ent			+=02
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State: District: Other (specify)		Senate President	Primary General							
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Philadelphia         Purpose of Disbursement         Meeting Expenses         Candidate Name         Office Sought:       House         Senate       President         State:       District:         Full Name (Last, First, Middle Initial)         Staples         Mailing Address       1044 Market St.         City         Philadelphia         Purpose of Disbursement         Office Supplies	and address of any politica		22       28a         for the purpoolicit contribution         Transac         Date of I         10         Amount         Date of I         Date of I         0         7	tion ID: E Disburseme / 07 of Each Dis dof Each Dis Disburseme / 30	SUCH CO		riod 4F2B
or for commercial purposes, other than using the name         NAME OF COMMITTEE (In Full)         National Italian American Political Action C         Full Name (Last, First, Middle Initial)         Positano Coast         Mailing Address       212 Walnut Street         Second Floor         City         Philadelphia         Purpose of Disbursement         Meeting Expenses         Candidate Name         Office Sought:         House         District:         Full Name (Last, First, Middle Initial)         State:         District:         Full Name (Last, First, Middle Initial)         Stapes         Mailing Address         1044 Market St.         City         Philadelphia         Purpose of Disbursement         Office Supplies	e and address of any politica committee State Zip Code PA 19106 ment For: Primary General Other (specify) ▼	d by any person committee to s	Transac Date of I Amount Amount	tion ID: E Disburseme / 0 7 of Each Dis Disburseme / 0 7	BCCF9 ant / Y abursem BBEB17 ant / Y	54B16791           2 0 0 9           2 0 0 9           nent this Per           1325.00           72125360           2 0 0 9	4160 riod 4F2B
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Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼						
SUBTOTAL of Disbursements This Page (optional) .		····· ►		• • •	1	693.08	

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	SUBTOTAL of Disbursements This Page (optional)	•	286.21
	TOTAL This Period (last page this line number only)	►	9423.31
i	FE6AN026		FEC Schedule B ( Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER:	PAGE 26/31
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 28a 28b	24 25 26 x 28c 29 30
ny Information copied from such Reports and Sta r for commercial purposes, other than using the r NAME OF COMMITTEE (In Full)	ame and address of any political co	/ any person f	or the purpose of s	oliciting contributions
National Italian American Political Actic	n Committee			
Full Name (Last, First, Middle Initial) BAIPAC			Date of Disburse	
Mailing Address 2129 E High Street			10 <sup>M</sup> / <sup>D</sup> 3	
City Pottstown	State Zip Code PA 19464		Amount of Each	Disbursement this Period
Purpose of Disbursement Refund of Contribution		· · ·		350.00
Candidate Name		Category/ Type		
Office Sought: House Disb Senate President State: District:	Primary General Other (specify)			
Full Name (Last, First, Middle Initial) Cement Masons Local #592 Pac			Transaction ID: Date of Disburse	BDE97D59755534680
Mailing Address 2511 Snyder Avenue			10 <sup>M</sup> /3	
City Philadelpha	State Zip Code PA 19145		Amount of Each	Disbursement this Period
Purpose of Disbursement Refund of Contribution	Г	U U		350.00
Candidate Name	C	Category/ Type		
Office Sought: House Disbuter Senate President State: District:	rsement For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) Committtee to Elect Mayor Joseph Digi	rolamo		Transaction ID: Date of Disburse	B89F865FAE16C4E7
Mailing Address 3982 Grace Avenue				
City Bensalem	State Zip Code PA 19020		Amount of Each	Disbursement this Period
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Candidate Name	C	Category/ Type		
Office Sought: House Disb Senate President State: District:	rsement For: Primary General Other (specify) ▼			
SUBTOTAL of Disbursements This Page (option	al)	►		1050.00
TOTAL This Period (last page this line number o	nly)	►		
E6AN026			FEC Schedu	le B (Form 3X) (Revised

TemizeD DISBURSEMENTS              If or each calegory of the             Detailed Summary Page             [] and big of the control of the purpoes calculating contributions             for commercial purpoes, other than using the name and address of any political committee to solicit contributions             for commercial purpoes, other than using the name and address of any political committee to solicit contributions             for any political committee             for any political             for any political	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 27/31
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National Italian American Political Action Committee         Full Name (Last, First, Middle Initial)         Friends of Farnese         Malling Address       1420 Locust Street         Unit 29-D         City         Purpose of Disbursement         Refund of Contribution         Catagory         Office Sought:         President         District:         Primary         General         Office Sought:         President         District:         President         Office Sought:         President         Disbursement         Field Name (Last, First, Middle Initial)         Friends Of Jim Matthews         Malling Address         Malling Address         Itsue:         Disbursement         Persident         Disbursement For:         President         Office Sought:         Purpose of Disbursement For:         State:         Disbursement For:         President         Disbursement For:         President         Disbursement For:         President         Other (specify) ▼ <th></th> <th></th> <th>any person fo</th> <th>or the purpose of s</th> <th>oliciting contributions</th>			any person fo	or the purpose of s	oliciting contributions
Friends of Farnese     Date of Disbursement       Mailing Address     1/2 0 Locust Street Unit 29-D       City Purpose of Disbursement     PA       19102     Printery       Candidate Name     Disbursement For: State:       District:     Disbursement For: State:       District:     Disbursement For: State:       Office Sought:     House District:       Full Name (Las, First, Middle Initial) Friends Of Jim Matthews       Mailing Address     15 W. GERMANTOWN PIKE       City Purpose of Disbursement     Bate       Office Sought:     House Disbursement For: State:       Office Sought:     House Disbursement For: State:       Office Sought:     House Disbursement For: State:       Office Sought:     House Disbursement For: Disbursement For: Disb		Committee			
Mailing Address       1420 Locust Street Unit 29-D       10       30       2009         City Purpose of Disbursement Refund of Contribution       PA       19102       Amount of Each Disbursement this Period         Office Sought:       House President       Disbursement For: President       General Other (specify) ▼       Amount of Each Disbursement this Period         State:       District:       Disbursement For: President       General Other (specify) ▼       Transaction ID:       BAEBA2E95660A48A Date of Disbursement         Mailing Address       115 W. GERMANTOWN PIKE       Transaction ID:       BAEBA2E95660A48A Date of Disbursement this Period         Office Sought:       House Preprove of Disbursement       Disbursement For: Preprove of Disbursement For: Preprove of Disbursement       Amount of Each Disbursement this Period         Office Sought:       House President       Disbursement For: Primary General       Amount of Each Disbursement this Period         Office Sought:       House President       Disbursement For: Primary General       Transaction ID:       B920CEDCEB8004F6 Date of Disbursement this Period         Full Name (Last, First, Middle Initial) Friends Of Mario Civera       State       Zip Code PA       Mailing Address       PO & 0 & 5 / ¥ 2 0 & 9          Mailing Address       PO Box 682       Disbursement For: Primary General       Mount of Each Disbursement this Period					
City       State       Zip Code       Amount of Each Disbursement this Period         Purpose of Disbursement       Category/ Type       875.00         Office Sought:       House       Disbursement For:       875.00         State:       District:       Category/ Type       State:       0ther (specify) ▼         Full Name (Last, First, Middle Initial)       Friends Of Jim Matthews       Transaction ID:       BAEBA2E95660.A48A         Mailing Address       115 W. GERMANTOWN PIKE       Transaction ID:       BAEBA2E95660.A48A         City       State:       Zip Code       Amount of Each Disbursement is Period         Purpose of Disbursement       Transaction ID:       BAEBA2E95660.A48A         Defined Sought:       House       Disbursement For:       Amount of Each Disbursement is Period         Office Sought:       House       Disbursement For:       Amount of Each Disbursement is Period         Office Sought:       House       Disbursement For:       Category/ Type       350.00         Full Name (Last, First, Middle Initial)       Friends Of Mario Civera       Transaction ID:       B920CEDCEB8004F6         Flight Gardens       PA       19026       Amount of Each Disbursement his Period       Date of Disbursement his Period         Purpose of Disbursement       PA       19026				10 <sup>M</sup> /3	B D / Y Y O O 9
House of Doubling   Category/ Type   Office Sought:   House   Disbursement For:   President   State:   Disbursement For:   President   State:   Disbursement For:   President   State:   Disbursement   Mailing Address   115 W. GERMANTOWN PIKE     City   President   Office Sought:   House   State:   Disbursement   Friends Of Maino Civera     Transaction ID:   BAEBA2E95660A48A   Amount of Each Disbursement   Mailing Address   Office Sought:   House   State:   District:   President   Particle State:   District:   President   State:   District:   President   Particle State:   Pilgrim Gardens   PA   19026   Pilgrim Gardens   PA   19026   President   State:   Disbursement For:   Senate   President<	City			Amount of Each	
Office Sought:       House       Disbursement For:       Type         State:       District:       Office Sought:       District:       President         Full Name (Last, First, Middle Initial)       Friends Of Jim Matthews       Transaction ID: BAEBA2E95660A48A         Mailing Address       115 W. GERMANTOWN PIKE       Transaction ID: BAEBA2E95660A48A         Oity       State       Zip Code         NORRISTOWN       PA       19401         Purpose of Disbursement       Refund of Contribution       Category/ Type         Office Sought:       House       Disbursement For:         Senate       Disbursement For:       Senate         Office Sought:       House       State       Zip Code         Mailing Address       PO Box 682       Amount of Each Disbursement this Period         Office Sought:       Disbursement For:       State       Zip Code         Purpose of Disbursement       PA       19026       Pate of Disbursement tis Period         State:       Distoresement       Qip M       © 0 Š (* ¥ 2 0 ǎ 9*)         City       State       Disbursement For:       Senate         President       Category/ Type       Office Sought:       House       Disbursement For:         General       Other (specify)	Refund of Contribution				875.00
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City       State       Zip Code         NORRISTOWN       PA       19401         Purpose of Disbursement       Amount of Each Disbursement this Period         Refund of Contribution       Category/ Type       350.00         Office Sought:       House       Disbursement For:         President       Disbursement For:       Primary         Other (specify) ▼       Transaction ID:       B920CEDCEB8004F8         State:       District:       Disbursement For:         Priends Of Mario Civera       Other (specify) ▼       Transaction ID:         Mailing Address       PO Box 682       Ø 9 M / Ø 0 5 / Ý 2 0 0 9         City       State       Zip Code         Purpose of Disbursement       PA       19026         Purpose of Contribution       Category/ Type       Y 2 0 0 9         City       State       Zip Code         Plurpose of Disbursement       PA       19026         Purpose of Disbursement       PA       19026         Purpose of Disbursement       Category/ Type       Y 2 0 0 9         Office Sought:       House       Disbursement For:       Senate         President       Disbursement For:       Senate       Primary         Other (specify) ▼       St	Full Name (Last, First, Middle Initial)				
NÓRRISTOWN PA 19401   Purpose of Disbursement Category/ Type     Office Sought: House   President Disbursement For:   President Other (specify) ▼     State: District:     Full Name (Last, First, Middle Initial)   Friends Of Mario Civera     Mailing Address   PO Box 682     City   Purpose of Disbursement   Purgoes of Disbursement   Refund of Contribution   Category/   Type     Mailing Address   PO Box 682     City   Purpose of Disbursement   Refund of Contribution   Category/   Type   Office Sought:   House   Disbursement For:   Category/   Type   Office Sought:   House   Disbursement For:   President   Category/   Type   Office Sought:   House   Disbursement For:   President   Senate   President   Other (specify) ▼         Office Sought:   House   Disbursement For:   President   Senate   President   Other (specify) ▼               Other (specify) ▼           <	Mailing Address 115 W. GERMANTOWN	ΝΡΙΚΕ		10 <sup>M</sup> 3	<b>b</b> / <b>Y Y Y Y Y Y Y Y Y Y</b>
Augusto of Contribution       Category/ Type         Office Sought:       House Senate       Disbursement For: Other (specify) ▼         State:       District:         Full Name (Last, First, Middle Initial)       Friends Of Mario Civera         Mailing Address       PO Box 682         City       State         Pilgrim Gardens       PA         Purpose of Disbursement       Category/ Y Ž 0 Ň 9         Category/ Type       Y Ž 0 Ň 9         Office Sought:       House         Disbursement       Category/ Type         Office Sought:       House         Disbursement For:       Category/ Type         Office Sought:       House         Disbursement For:       Category/ Type         Office Sought:       House         Disbursement For:       Disbursement For:         Office Sought:       House         Disbursement This Page (optional)       Other (specify) ▼				Amount of Each	
Type         Office Sought:       House         State:       Disbursement For:         President       Other (specify)         State:       District:         Full Name (Last, First, Middle Initial)         Friends Of Mario Civera         Mailing Address       PO Box 682         City       State         Pilgrim Gardens       PA         Purpose of Disbursement         Refund of Contribution         Candidate Name         Office Sought:       House         President       Disbursement For:         State:       Disbursement For:         State:       Disbursement For:         State:       Disbursement For:         President       Other (specify)         State:       Disbursement For:         State:       Disbursements This Page (optional)	Refund of Contribution				350.00
Senate       Primary       General         Other (specify)       ✓         State:       District:         Full Name (Last, First, Middle Initial)       Friends Of Mario Civera         Mailing Address       PO Box 682         City       State       Zip Code         Pilgrim Gardens       PA       19026         Purpose of Disbursement       Amount of Each Disbursement this Period         Refund of Contribution       Category/         Candidate Name       Disbursement For:         Senate       Primary       General         Office Sought:       House       Disbursement For:         Senate       Primary       General         Office Sought:       House       Disbursement For:         Senate       Primary       General         Other (specify)       ✓       5432.00					
Friends Of Mario Civera       Date of Disbursement         Mailing Address       PO Box 682         City       State       Zip Code         Pilgrim Gardens       PA       19026         Purpose of Disbursement       4207.00         Refund of Contribution       Category/ Type         Office Sought:       House         President       Disbursement For:         State:       District:	Senate President	Primary General			
City       State       Zip Code         Pilgrim Gardens       PA       19026         Purpose of Disbursement       4207.00         Refund of Contribution       Category/         Candidate Name       Category/         Office Sought:       House         President       Disbursement For:         President       Other (specify)         State:       District:         Subtrottal of Disbursements This Page (optional)       5432.00				Date of Disburs	ement
Pilgrim Gardens       PA       19026         Purpose of Disbursement       4207.00         Refund of Contribution       Category/ Type         Candidate Name       Category/ Type         Office Sought:       House         Senate       Primary         President       Other (specify)         State:       Disbursements This Page (optional)	Mailing Address PO Box 682				05 / Y 2009
Refund of Contribution       Category/ Type         Candidate Name       Category/ Type         Office Sought:       House         Senate       Primary         President       Other (specify)         State:       District:         SUBTOTAL of Disbursements This Page (optional)       5432.00	Pilgrim Gardens			Amount of Each	
Office Sought:       House       Disbursement For:         Senate       Primary       General         President       Other (specify) ▼         State:       Disbursements This Page (optional)	Refund of Contribution		Datagan/		4207.00
State:       District:         SUBTOTAL of Disbursements This Page (optional)       5432.00	Office Sought: House Disburs Senate	ement For: Primary General			
<b>FOTAL</b> This Period (last page this line number only)					5432.00

CHEDULE B (FEC Form 3X)	Use separate schedule(s)		R LIN eck or		MBER:			PA	GE 28/	31
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	<u> </u>	21b 27	2	22 28a	23 28b	X	24 28c	25 29	26 30b
ny Information copied from such Reports and State										
r for commercial purposes, other than using the na	me and address of any political co	ommitte	ee to s	Solicit	contribi	utions f	rom s	such c	ommittee	
NAME OF COMMITTEE (In Full) National Italian American Political Action	Committee									
Full Name (Last, First, Middle Initial) Friends of Saidel						<b>tion ID</b>			A6A268	3614798A
Mailing Address 1530 Chestnut St. Suite 500					10	/ D	3 <mark>0</mark>	/ Y	² 0 ŏ	9 <sup>×</sup>
City Philadelphia	StateZip CodePA19102			A	mount	of Eacl	h Dis	burser	ment this	
Purpose of Disbursement Refund of Contribution	[	v							175.0	0
Candidate Name		Catego Type								
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼									
Full Name (Last, First, Middle Initial)				-					074507	
Friends to Elect Christine M. Tartaglione						Disburs	seme			2B42CB
Mailing Address P.O. Box 52153					1"0"		3 <sup>D</sup>		Ž0Ŏ	9
City Philadelphia	State Zip Code PA 19115			A	mount	of Eacl	h Dis	burser	ment this	
Purpose of Disbursement Refund of Contribution	[	v n		Ľ					700.0	0
Candidate Name		Catego Type								
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼									
Full Name (Last, First, Middle Initial) IUOE Local 542 Political Action Fund						<b>tion ID</b> Disburs			DC51DE	32A4CC
Mailing Address 1375 Virginia Drive Suite 100				[	<sup>M</sup> 0 <sup>M</sup>	/ D	3 <mark>0</mark>	/ Y	ž o ŏ	9 <sup>×</sup>
City Fort Washington	State Zip Code PA 19034			A	mount	of Eacl	h Dis	burser	ment this	
Purpose of Disbursement Refund of Contribution	[								350.0	U
Candidate Name		Catego Type								
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼									
SUBTOTAL of Disbursements This Page (optiona	)		•						1225.0	0
<b>FOTAL</b> This Period (last page this line number onl	y)		►	[						
6AN026					FEC	Schedu	ule B	( Forr	m 3X) (R	evised 02/2

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only		PAGE 29/31
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 28a 28b	24 25 26 X 28c 29 30b
ny Information copied from such Reports and State r for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full)				
National Italian American Political Action	Committee			
Full Name (Last, First, Middle Initial) Peco Pac			Transaction ID: Date of Disbursen	BB88241A064384A108
Mailing Address 2301 Market St. PO Box 8699			10 <sup>′′</sup> 30	0 / Y Y 0 0 9 Y
City Philadelphia	State Zip Code PA 19101-8699		Amount of Each D	isbursement this Period
Purpose of Disbursement Refund of Contribution				350.00
Candidate Name Office Sought: House Disburs	ement For:	Category/ Type		
State: District:	Primary   General     Other (specify)			
Full Name (Last, First, Middle Initial)			Transaction ID:	BD0EC60DEF5DE422
Pennsylvania Realtors PAC			Date of Disbursen	nent
Mailing Address 4501 Chambers Hill Roa	ad		10 <sup>′′</sup> 30	
City Harrisburg	StateZip CodePA17111		Amount of Each D	isbursement this Period
Purpose of Disbursement Refund of Contribution				1400.00
Candidate Name	(	Category/ Type		
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) Reinforced Iron Workers Riggers & Mach	n		Transaction ID: Date of Disbursen	B9900BEA36B2A43E4
Mailing Address Local Union #45 2433 Reed St.			10 <sup>M</sup> /30	
City Philadelphia	StateZip CodePA19146		Amount of Each D	isbursement this Period
Purpose of Disbursement Refund of Contribution				150.00
Candidate Name		Category/ Type		
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼			
SUBTOTAL of Disbursements This Page (optional)		····· <b>Þ</b>		1900.00
TOTAL This Period (last page this line number only	)	►	0 0 0 0	9607.00
E6AN026	/	-	FEC Schedule	B (Form 3X) (Revised 02/

# SCHEDULE C (FEC Form 3X)

### LOANS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 30/31

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)		L.			
National Italian American Political Action Co	mmittee				
			Transactio	on ID: C3187E	<u> 5A628C743228</u> Ę0
LOAN SOURCE Full Name (Last, First, Middl	e Initial)		Elec		
Cav. Amato L. Berardi				Primary	
				General	
Mailing Address 555 East City Line Ave. Suite 770				Other (specify)	▼
City Bala Cynwyd	State PA ZIP Co	de 19004-11	15		
Original Amount of Loan	Cumulative Payment To	Date	Balance Ou	tstanding at Clo	ose of This Period
2500.00		0.00			2500.00
TERMS Date Incurred	Date Due		Interest Rate		Secured:
M M D D Y Y Y Y	Date Date		Interest ridio	-	
03 17 2001		١	None	% (apr)	Yes X No
List All Endorsers or Guarantors (if any) to Loan	Source				
Full Name (Last, First, Middle Initial)		Name of Emplo	yer		
Mailing Address		Occupation			
		Arragement			
011	ZID O a da	Amount Guaranteed			
City State	ZIP Code	Outstanding:			
Full Name (Last, First, Middle Initial)		Name of Emplo	oyer		
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
Full Name (Last, First, Middle Initial)		Name of Emplo	yer		
Mailing Address		Occupation			
	710.0.1	Amount Guaranteed			
City State	ZIP Code	Outstanding:			
Full Name (Last, First, Middle Initial)		Name of Emplo	yer		
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed			
		Outstanding:			
SUBTOTALS This Period This Page (optional)					2500.00
<b>TOTALS</b> This Period (last page in this line only) .					<u> </u>
Carry outstanding balance only to LINE 3, Schedule	D, for this line. If no Sch	edule D, carry forw	ward to appropria	te line of Summ	ary.

FEC Schedule C ( Form 3X ) (Revised 02/2003)

# SCHEDULE C (FEC Form 3X)

### LOANS

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

PAGE 31/31 UE 13 OF FORM 3X

OAN SOURCE Full Name (Last, First, Mi Cav. Amato L. Berardi	ddle Initial)			Election: X Primary General	E5658AE49426E
Aailing Address 555 East City Line Ave. Suite 770				Other (specif	y) 🔻
City Bala Cynwyd	State PA	ZIP Code 1	9004-1115		
Original Amount of Loan	Cumulative F	Payment To Date	Balano	ce Outstanding at	Close of This Period
7500.00		0.0	0		7500.00
ERMS Date Incurred	Da	ate Due	Interest F	late	Secured:
$ \begin{array}{c} M & M \\ 0 & 0 \\ \end{array} \begin{array}{c} D & D \\ 1 & 5 \\\end{array} \begin{array}{c} Y & Y \\ 2 & 0 & 0 \\\end{array} \begin{array}{c} Y \\ Y \\ \end{array} \begin{array}{c} Y \\ Y \\ Y \\ \end{array} \begin{array}{c} Y \\ Y \\ Y \\ \end{array} \begin{array}{c} Y \\ Y $			None	% (apr)	
ist All Endorsers or Guarantors (if any) to Lo	an Source				
Full Name (Last, First, Middle Initial)		Name	of Employer		
Mailing Address		Occup	ation		
City State	ZIP Code	Amour Guarar Outsta	iteed		
Full Name (Last, First, Middle Initial)		Name	of Employer		
Mailing Address		Occup	ation		
City State	ZIP Code	Amour Guarar Outsta	iteed		
Full Name (Last, First, Middle Initial)		Name	of Employer		
Mailing Address		Occup	ation		
City State	ZIP Code	Amour Guarar Outsta	iteed		
Full Name (Last, First, Middle Initial)		Name	of Employer		
Mailing Address		Occup	ation		
		Amour			
City State	ZIP Code	Guarar Outsta			
<b>BTOTALS</b> This Period This Page (optional)					7500.00
				1 1 1 1 1 1 1	10000.00

FEC Schedule C ( Form 3X ) (Revised 02/2003)