

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
National Italian American Political Action Committee

ADDRESS (number and street) 1205 Locust Street
Suite 100
 Check if different than previously reported. (ACC)
Philadelphia PA 19107

2. **FEC IDENTIFICATION NUMBER** C00355388
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2007 through 03 31 2007

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

Type or Print Name of Treasurer JOSEPH A. AUTERI

Signature of Treasurer Electronically Filed by JOSEPH A. AUTERI Date 12 17 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
National Italian American Political Action Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		45801.03
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	45801.03									
(c) Total Receipts (from Line 19)	92482.60	92482.60								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	138283.63	138283.63								
7. Total Disbursements (from Line 31)	81471.74	81471.74								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	56811.89	56811.89								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	10000.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
National Italian American Political Action Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	78437.60	78437.60
(i) Itemized (use Schedule A)	8520.00	8520.00
(ii) Unitemized	86957.60	86957.60
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	5525.00	5525.00
(c) Other Political Committees (such as PACs)	92482.60	92482.60
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	92482.60	92482.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	92482.60	92482.60

DETAILED SUMMARY PAGE
of Disbursements

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.....	69871.74	69871.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	69871.74	69871.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	8000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	425.00	425.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	425.00	425.00
29. Other Disbursements.....	3175.00	3175.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	81471.74	81471.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	81471.74	81471.74

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	92482.60	92482.60
34. Total Contribution Refunds (from Line 28(d))	425.00	425.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	92057.60	92057.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	69871.74	69871.74
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	69871.74	69871.74

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. L. Jay Agnes		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 9 / 2 0 0 7	
Mailing Address 2101 Penrose Ave.		Transaction ID: SA11A1.7293	
City Philadelphia	State PA	Amount of Each Receipt this Period 650.00	
Zip Code 19145			
FEC ID number of contributing federal political committee. C			
Name of Employer P. Agnes Builders	Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name (Last, First, Middle Initial) B. BARBARA AUGUSTINE		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 9 / 2 0 0 7	
Mailing Address PO BOX 347		Transaction ID: SA11A1.7296	
City SKIPPACK	State PA	Amount of Each Receipt this Period 3500.00	
Zip Code 19474			
FEC ID number of contributing federal political committee. C			
Name of Employer Golf Outing Productions	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00		

Full Name (Last, First, Middle Initial) C. Grace Auteri		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 9 / 2 0 0 7	
Mailing Address 315 Richfield Rd.		Transaction ID: SA11A1.7297	
City Upper Darby	State PA	Amount of Each Receipt this Period 700.00	
Zip Code 19082			
FEC ID number of contributing federal political committee. C			
Name of Employer The Environmental Defense Corp.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

SUBTOTAL of Receipts This Page (optional) ▶	4850.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Gary Barbera		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 7	
Mailing Address 1415 Wesleys Run		Transaction ID: SA11A1.7299	
City State Zip Code Wayne PA 19087	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Gary Barbera Dodge	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Amato Berardi		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7	
Mailing Address 555 City Line Ave, Suite 770		Transaction ID: SA11A1.7300	
City State Zip Code Bala Cynwyd PA 19004	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Berardi, Auteri & Assoc	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Jennifer Berardi		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7	
Mailing Address 256 Joseph Rd.		Transaction ID: SA11A1.7304	
City State Zip Code Oxford PA 19363	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer JC Berardi	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Jennifer Berardi		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 3 / 2 0 0 7
Mailing Address 256 Joseph Rd.		Transaction ID: SA11A1.7305
City Oxford	State PA	Zip Code 19363
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer JC Berardi	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Dr. Joseph Boni		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 133 Eaton Dr.		Transaction ID: SA11A1.7312
City Wayne	State PA	Zip Code 19087
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer Information Requested-Best Efforts	Occupation Information Requested-Best Efforts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Philip L. Borst		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 7
Mailing Address 8029 Pine Rd.		Transaction ID: SA11A1.7314
City Philadelphia	State PA	Zip Code 19111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer Scungio, Borst & Associates	Occupation Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	▶	800.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Sammy A. Braccia

Mailing Address 201 Pine Ave.

City Horsham State PA Zip Code 19044-2422

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

Name of Employer S. Braccia Builders & Developers Occupation Homebuilder

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.7315

Amount of Each Receipt this Period
 700.00

B. Full Name (Last, First, Middle Initial)
Dr. Edwin P. Camiel

Mailing Address 624 Hazelhurst Road

City Merion State PA Zip Code 19066

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

Name of Employer Self Employed Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.7322

Amount of Each Receipt this Period
 1550.00

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

Mailing Address 3320 S. 20th Street

City Philadelphia State PA Zip Code 19145

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

Name of Employer Self Employed Occupation Real Estate/ Insurance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.7323

Amount of Each Receipt this Period
 400.00

SUBTOTAL of Receipts This Page (optional)	▶	2650.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Barbara Capozzi		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7	
Mailing Address 3320 S. 20th Street		Transaction ID: SA11A1.7324	
City Philadelphia	State PA	Amount of Each Receipt this Period 4350.00	
Zip Code 19145			
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed		Occupation Real Estate/ Insurance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4750.00	

Full Name (Last, First, Middle Initial) B. Rita Capozzi		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7	
Mailing Address 1901 Hartranft St. Apt 323		Transaction ID: SA11A1.7327	
City Philadelphia	State PA	Amount of Each Receipt this Period 2825.00	
Zip Code 19145			
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2875.00	

Full Name (Last, First, Middle Initial) C. Peter M. Carlino		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7	
Mailing Address 825 Berkshire Blvd. Suite 200		Transaction ID: SA11A1.7329	
City Wyomissing	State PA	Amount of Each Receipt this Period 1050.00	
Zip Code 19610			
FEC ID number of contributing federal political committee. C			
Name of Employer Penn National Gaming, Inc.		Occupation Chairman/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1050.00	

SUBTOTAL of Receipts This Page (optional) ▶	8225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Michael Carron

Mailing Address 65 Forge Mountain Dr.

City	State	Zip Code
Phoenixville	PA	19460

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

Name of Employer Continental Realty, Inc.	Occupation Real Estate
--	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	0	7

Transaction ID: SA11A1.7330

Amount of Each Receipt this Period
350.00

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

Mailing Address 1039 Newport Mews Dr.

City	State	Zip Code
Bensalem	PA	19020

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

Name of Employer Information Requested-Best Efforts	Occupation Information Requested-Best Efforts
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	0	7

Transaction ID: SA11A1.7334

Amount of Each Receipt this Period
1225.00

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

Mailing Address 325 Wexford Rd.

City	State	Zip Code
Red Hill	PA	18076

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

Name of Employer Chiaro's Inc.	Occupation Owner
-----------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	2	/	2	0	0	7

Transaction ID: SA11A1.7343

Amount of Each Receipt this Period
700.00

SUBTOTAL of Receipts This Page (optional)	▶	2275.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Pietro Chiaro		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2007	
Mailing Address 60 Gravel Pike		Transaction ID: SA11A1.7344	
City State Zip Code Red Hill PA 18076		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Chiaro's Inc. Occupation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Michael Cibik		Date of Receipt M M / D D / Y Y Y Y 01 / 19 / 2007	
Mailing Address 437 Chestnut St. Suite 1000		Transaction ID: SA11A1.7347	
City State Zip Code Philadelphia PA 19106		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Cibik & Cataldo, PC Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Michael Cibik		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2007	
Mailing Address 437 Chestnut St. Suite 1000		Transaction ID: SA11A1.7346	
City State Zip Code Philadelphia PA 19106		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Cibik & Cataldo, PC Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A. Full Name (Last, First, Middle Initial)
Louis Cicalese

Mailing Address 629 Headquarters Rd.

City Ottsville State PA Zip Code 18942

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

Name of Employer Delaware River Development Occupation Developer/Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.7348

Amount of Each Receipt this Period
2100.00

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

Mailing Address 81 Westminster Dr.

City Voorhees State NJ Zip Code 08043

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

Name of Employer O'Donnell & Naccarato Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2275.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.7351

Amount of Each Receipt this Period
2150.00

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

Mailing Address 81 Westminster Dr.

City Voorhees State NJ Zip Code 08043

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

Name of Employer O'Donnell & Naccarato Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2525.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.7350

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	4500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Jessica R. Conley		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7	
Mailing Address 716 Eaton Rd.		Transaction ID: SA11A1.7355	
City State Zip Code Drexel Hill PA 19026-1507	Amount of Each Receipt this Period 375.00		
FEC ID number of contributing federal political committee. C			
Name of Employer District Attorney's Office of Delaware	Occupation Asst. District Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		

Full Name (Last, First, Middle Initial) B. Jessica R. Conley		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 7	
Mailing Address 716 Eaton Rd.		Transaction ID: SA11A1.7354	
City State Zip Code Drexel Hill PA 19026-1507	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer District Attorney's Office of Delaware	Occupation Asst. District Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00		

Full Name (Last, First, Middle Initial) C. Peter J. Cordua		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 7	
Mailing Address 53 Wimbledon Way		Transaction ID: SA11A1.7357	
City State Zip Code Marlton NJ 08053	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Cordua & Company, PC	Occupation CPA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	825.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Peter J. Cordua		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 2 / 2 0 0 7	
Mailing Address 53 Wimbledon Way		Transaction ID: SA11A1.7356	
City State Zip Code Marlton NJ 08053		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Cordua & Company, PC CPA			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) B. Robert L. D'Anjolell		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7	
Mailing Address 2 Gregory Lane		Transaction ID: SA11A1.7363	
City State Zip Code Newtown Square PA 19073		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Vincent D'Annunzio		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 2 / 2 0 0 7	
Mailing Address 106 Spring Valley Way		Transaction ID: SA11A1.7365	
City State Zip Code Aston PA 19014		Amount of Each Receipt this Period 700.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Information Requested-Best Efforts Information Requested-Best Efforts			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional) ▶	1025.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Anthony J. D'Emilio

Mailing Address 485 Summit Ave.

City Philadelphia State PA Zip Code 19128-4025

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

Name of Employer Orders Sons of Italy in America Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3925.00

Date of Receipt
03 / 02 / 2007

Transaction ID: SA11A1.7368

Amount of Each Receipt this Period
3925.00

B. Full Name (Last, First, Middle Initial)
Melinda De Nofa

Mailing Address 3816 Loop Rd.

City Huntingdon Valley State PA Zip Code 19006

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

Name of Employer Molly Construction Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
02 / 05 / 2007

Transaction ID: SA11A1.7366

Amount of Each Receipt this Period
1750.00

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

Mailing Address 1207 S. 11th St.

City Philadelphia State PA Zip Code 19147

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

Name of Employer City of Philadelphia Occupation City Councilman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
01 / 15 / 2007

Transaction ID: SA11A1.7374

Amount of Each Receipt this Period
550.00

SUBTOTAL of Receipts This Page (optional) ▶ **6225.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

Mailing Address 1207 S. 11th St.

City Philadelphia State PA Zip Code 19147

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

Name of Employer City of Philadelphia Occupation City Councilman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	9	/	2	0	0	7

Transaction ID: SA11A1.7375

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Guido DiCicco, Sr.

Mailing Address 37 Summer Place

City Huntingdon Valley State PA Zip Code 19006

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

Name of Employer DiCicco, Inc. Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	0	7

Transaction ID: SA11A1.7376

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
John J. DiLeonardo

Mailing Address 1239 Jeffrey Lane

City Langhorne State PA Zip Code 19047-3764

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

Name of Employer Maximus, Inc. Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	9	/	2	0	0	7

Transaction ID: SA11A1.7379

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)	▶	800.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Lawrence M. DiVietro, Jr.

Mailing Address 5 Shawnee Dr.

City State Zip Code
Wenonah NJ 08090

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

Name of Employer Occupation
Land Dimensions Engineering Planner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
02 / 12 / 2007

Transaction ID: SA11A1.7381

Amount of Each Receipt this Period
400.00

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

Mailing Address 645 Charette Rd.

City State Zip Code
Philadelphia PA 19115-3514

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

Name of Employer Occupation
Information Requested-Best Efforts Information Requested-Best Efforts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
02 / 05 / 2007

Transaction ID: SA11A1.7386

Amount of Each Receipt this Period
375.00

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

Mailing Address 334 S. Front St.

City State Zip Code
Philadelphia PA 19106

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

Name of Employer Occupation
Information Requested-Best Efforts Information Requested-Best Efforts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2007

Transaction ID: SA11A1.7388

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	▶	1075.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 19 / 74
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Sallyann M. Ferullo

Mailing Address 18 Saratoga Springs Dr.

City State Zip Code
Cinnaminson NJ 08077

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

Name of Employer Facility Strategies Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.7394

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Francesco S. Froio

Mailing Address 2917 Juniper Street

City State Zip Code
Philadelphia PA 19148

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

Name of Employer BDO Seidman, LLP Occupation Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 7

Transaction ID: SA11A1.7403

Amount of Each Receipt this Period
350.00

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

Mailing Address 1719 Rittenhouse Square

City State Zip Code
Philadelphia PA 19103

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.7405

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional) ► **725.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Richard F. Furia		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 3 / 2 0 0 7	
Mailing Address 815 Bowman Ave.		Transaction ID: SA11A1.7405.0	
City Wynnewood	State PA	Zip Code 19096	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. C		Partnership Attribution	
Name of Employer Furia & Turner	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Richard F. Furia		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 3 / 2 0 0 7	
Mailing Address 815 Bowman Ave.		Transaction ID: SA11A1.7407	
City Wynnewood	State PA	Zip Code 19096	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Furia & Turner	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Richard F. Furia		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 6 / 2 0 0 7	
Mailing Address 815 Bowman Ave.		Transaction ID: SA11A1.7408	
City Wynnewood	State PA	Zip Code 19096	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Furia & Turner	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00		

SUBTOTAL of Receipts This Page (optional) ▶	325.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Rosemary Gault

Mailing Address 4610 Fidler St.

City Philadelphia State PA Zip Code 19114

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

Name of Employer Information Requested-Best Efforts
Occupation Information Requested-Best Efforts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.7412

Amount of Each Receipt this Period
375.00

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

Mailing Address 2 Tamwood Lane

City Sewell State NJ Zip Code 08080

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

Name of Employer Turner Construction
Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 2 3 / 2 0 0 7

Transaction ID: SA11A1.7415

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Dr. Antonio Giordano

Mailing Address 1230 Gulph Creek Dr.

City Radnor State PA Zip Code 19087

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

Name of Employer Self-Employed
Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.7418

Amount of Each Receipt this Period
3500.00

SUBTOTAL of Receipts This Page (optional)	▶	4875.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 170 E. Main St.

City State Zip Code
Moorestown NJ 08057

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

Name of Employer Atlantic Trailer Leasing Co. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2007

Transaction ID: SA11A1.7420

Amount of Each Receipt this Period
300.00

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

Mailing Address 3230 S. Sydenham St.

City State Zip Code
Philadelphia PA 19145

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

Name of Employer Broad Street Abstract Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2007

Transaction ID: SA11A1.7422

Amount of Each Receipt this Period
650.00

C. Full Name (Last, First, Middle Initial)
John P. Hagan

Mailing Address 2323 Fairway Rd.

City State Zip Code
Huntingdon Valley PA 19006

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

Name of Employer US Financial Mortgage Service Occupation Trustee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1875.00

Date of Receipt
MM / DD / YYYY
02 / 02 / 2007

Transaction ID: SA11A1.7428

Amount of Each Receipt this Period
1850.00

SUBTOTAL of Receipts This Page (optional)	▶	2800.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Shawn R. Jalosinski

Mailing Address 585 Paoli Ave.

City Philadelphia State PA Zip Code 19128

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

Name of Employer Muller, Inc. Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.7430

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
Shawn R. Jalosinski

Mailing Address 585 Paoli Ave.

City Philadelphia State PA Zip Code 19128

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

Name of Employer Muller, Inc. Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.7431

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Shawn R. Jalosinski

Mailing Address 585 Paoli Ave.

City Philadelphia State PA Zip Code 19128

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

Name of Employer Muller, Inc. Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 862.60

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.7432

Amount of Each Receipt this Period
487.60

SUBTOTAL of Receipts This Page (optional)	▶	862.60
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Jeanine Jewell		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7
Mailing Address 1100 Bailey Dr.		Transaction ID: SA11A1.7433
City Phoenixville	State PA	Zip Code 19460
Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C		
Name of Employer Chase Payments	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Jeanine Jewell		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 7
Mailing Address 1100 Bailey Dr.		Transaction ID: SA11A1.7434
City Phoenixville	State PA	Zip Code 19460
Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		
Name of Employer Chase Payments	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. Joe Hand Promotions, Inc.		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 7
Mailing Address 407 E. Pennsylvania Blvd.		Transaction ID: SA11A1.7435
City Feasterville	State PA	Zip Code 19053
Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Klehr, Harrison, Harvey, Branzburg & Ellers LLP

Mailing Address 260 S. Broad St.
Suite 400

City Philadelphia State PA Zip Code 19102-5003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 19 / 2007

Transaction ID: SA11A1.7442

Amount of Each Receipt this Period
1050.00

Attribution Info Requested

B. Full Name (Last, First, Middle Initial)
Nicholas J. Maiale

Mailing Address 1420 Walnut St.
Suite 1107

City Philadelphia State PA Zip Code 19102

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 23 / 2007

Transaction ID: SA11A1.7447

Amount of Each Receipt this Period
250.00

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

Mailing Address 173 Dam View Road

City Media State PA Zip Code 19063

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

Name of Employer Self Employed Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 12 / 2007

Transaction ID: SA11A1.7450

Amount of Each Receipt this Period
700.00

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Vincent B. Mancini		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 2 / 2 0 0 7
Mailing Address 173 Dam View Road		Transaction ID: SA11A1.7452
City State Zip Code Media PA 19063	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Vincent B. Mancini		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 3 / 2 0 0 7
Mailing Address 173 Dam View Road		Transaction ID: SA11A1.7451
City State Zip Code Media PA 19063	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) C. Vincent B. Mancini		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 9 / 2 0 0 7
Mailing Address 173 Dam View Road		Transaction ID: SA11A1.7449
City State Zip Code Media PA 19063	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 1140.00	

SUBTOTAL of Receipts This Page (optional) ▶	440.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Donna Massanova		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7	
Mailing Address 2022 Shunk St.		Transaction ID: SA11A1.7457	
City Philadelphia	State PA	Zip Code 19145	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00	
Name of Employer Parente Randolph, LLC		Occupation CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Dr. Francesca Mattone-Volpe		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7	
Mailing Address 109 Inverness Dr.		Transaction ID: SA11A1.7462	
City Blue Bell	State PA	Zip Code 19422	Amount of Each Receipt this Period 375.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00	
Name of Employer Self-Employed		Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) C. Louis J. McCormick, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 7	
Mailing Address 518 Applewood Dr.		Transaction ID: SA11A1.7466	
City Ft. Washington	State PA	Zip Code 19034	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer ADCO Associates		Occupation Owner/Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	1025.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Alfred J. Monte, Jr.

Mailing Address 6 Tiffany Dr.

City State Zip Code
Perkasie PA 19446

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

Name of Employer Occupation
Fox Rothschild, LLP Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1850.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.7474

Amount of Each Receipt this Period
1850.00

B. Full Name (Last, First, Middle Initial)
Alfred J. Monte, Jr.

Mailing Address 6 Tiffany Dr.

City State Zip Code
Perkasie PA 19446

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

Name of Employer Occupation
Fox Rothschild, LLP Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1950.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: SA11A1.7475

Amount of Each Receipt this Period
100.00

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

Mailing Address 508 E. Lackawanna Ave.

City State Zip Code
Olyphant PA 18447

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

Name of Employer Occupation
Lackawanna County Government Director of Buildings & Grounds

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.7477

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)	▶	2300.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Alfredo Nuzzolese		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 7	
Mailing Address 2752 Gail Dr.		Transaction ID: SA11A1.7480	
City State Zip Code Gilbertsville PA 19525	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested-Best Efforts Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested-Best Efforts Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. Sandra Palermo		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7	
Mailing Address 1443 Revelation Rd.		Transaction ID: SA11A1.7485	
City State Zip Code Meadowbrook PA 19046	Amount of Each Receipt this Period 1850.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Muller Inc. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 1950.00		

Full Name (Last, First, Middle Initial) C. Sandra Palermo		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7	
Mailing Address 1443 Revelation Rd.		Transaction ID: SA11A1.7487	
City State Zip Code Meadowbrook PA 19046	Amount of Each Receipt this Period 750.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Muller Inc. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 2700.00		

SUBTOTAL of Receipts This Page (optional) ▶	2950.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Sandra Palermo		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 7	
Mailing Address 1443 Revelation Rd.		Transaction ID: SA11A1.7484	
City State Zip Code Meadowbrook PA 19046	Amount of Each Receipt this Period 185.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Muller Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2885.00		

Full Name (Last, First, Middle Initial) B. Sandra Palermo		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 7	
Mailing Address 1443 Revelation Rd.		Transaction ID: SA11A1.7486	
City State Zip Code Meadowbrook PA 19046	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Muller Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2985.00		

Full Name (Last, First, Middle Initial) C. Sandra Palermo		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 7	
Mailing Address 1443 Revelation Rd.		Transaction ID: SA11A1.7488	
City State Zip Code Meadowbrook PA 19046	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Muller Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3235.00		

SUBTOTAL of Receipts This Page (optional) ▶	535.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Salvatore J. Patti

Mailing Address 2535 S. 21st St.

City Philadelphia State PA Zip Code 19145

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

Name of Employer PNC Advisors Occupation PAC Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 2 3 / 2 0 0 7

Transaction ID: SA11A1.7491

Amount of Each Receipt this Period
 350.00

B. Full Name (Last, First, Middle Initial)
Anne E. Protesto

Mailing Address 215 Bryn Mawr Ave.

City Newtown Square State PA Zip Code 19073

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

Name of Employer Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.7496

Amount of Each Receipt this Period
 350.00

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

Mailing Address 310 Sycamore Mills Rd.

City Media State PA Zip Code 19063

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

Name of Employer Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.7498

Amount of Each Receipt this Period
 350.00

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Vincent R. Protesto

Mailing Address 213 Bryn Mawr Ave.

City State Zip Code
Newtown Square PA 19073

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

Name of Employer Occupation
Pro Signs Inc. Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
02 / 12 / 2007

Transaction ID: SA11A1.7500

Amount of Each Receipt this Period
350.00

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

Mailing Address 5040 Grant Ave.

City State Zip Code
Philadelphia PA 19114

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

Name of Employer Occupation
Information Requested-Best Efforts Information Requested-Best Efforts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
02 / 02 / 2007

Transaction ID: SA11A1.7501

Amount of Each Receipt this Period
350.00

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

Mailing Address 2533-35 S. Broad St.

City State Zip Code
Philadelphia PA 19148

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
01 / 18 / 2007

Transaction ID: SA11A1.7503

Amount of Each Receipt this Period
1200.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 748 Sedgewick Ct.

City State Zip Code
Sewell NJ 08080

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

Name of Employer DuPont/Providence Real Estate, LLC Occupation Engineer/Owner

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
02 / 02 / 2007

Transaction ID: SA11A1.7506

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
Gina F. Rubel

Mailing Address 2 Hidden Lane

City State Zip Code
Doylestown PA 18901

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

Name of Employer Furia Rubel Occupation Public Relations

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 875.00

Date of Receipt
MM / DD / YYYY
01 / 19 / 2007

Transaction ID: SA11A1.7510

Amount of Each Receipt this Period
875.00

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

Mailing Address 2707 Raintree Court

City State Zip Code
Columbia MO 65201

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

Name of Employer University of Missouri Occupation Professor

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 875.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2007

Transaction ID: SA11A1.7512

Amount of Each Receipt this Period
875.00

SUBTOTAL of Receipts This Page (optional)	▶	2100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Maria Santoro		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7	
Mailing Address 991 N. Grange Ave.		Transaction ID: SA11A1.7515	
City State Zip Code Collegeville PA 19426-3147		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Santoro Tile & Marble Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Joseph A. Scandone		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7	
Mailing Address 1297 Sumner Way		Transaction ID: SA11A1.7519	
City State Zip Code West Chester PA 19382		Amount of Each Receipt this Period 375.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Malvern School			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) C. Frank Scaramuzza		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7	
Mailing Address 100 Turnbridge Circle		Transaction ID: SA11A1.7521	
City State Zip Code Haverford PA 19041		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self-Employed Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	5725.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

A. Full Name (Last, First, Middle Initial)
Jennifer Schalleur

Mailing Address 201 Summerwind Lane

City State Zip Code
Harleysville PA 19438

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

Name of Employer Occupation
Christo Consulting, LLC IT Consulting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 9 / 2 0 0 7

Transaction ID: SA11A1.7522

Amount of Each Receipt this Period
350.00

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

Mailing Address 207 W. 6th Ave.

City State Zip Code
Conshohocken PA 19428

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

Name of Employer Occupation
Pizzaland Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.7524

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
Andrew J. Scutti

Mailing Address 1348 Arthur Rd.

City State Zip Code
Maple Glen PA 19002

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

Name of Employer Occupation
Dale Corporation Director Safety & Health

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.7527

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Andrew J. Scutti		Date of Receipt MM / DD / YYYY 02 / 23 / 2007
Mailing Address 1348 Arthur Rd.		Transaction ID: SA11A1.7526
City Maple Glen	State PA	Zip Code 19002
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Dale Corporation	Occupation Director Safety & Health	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Nina Sposato		Date of Receipt MM / DD / YYYY 03 / 23 / 2007
Mailing Address 16 R Shawmont Ave.		Transaction ID: SA11A1.7528
City Philadelphia	State PA	Zip Code 19128
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 525.00	
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) C. Frederick A. Stampone		Date of Receipt MM / DD / YYYY 02 / 09 / 2007
Mailing Address 1017 Herkness Dr.		Transaction ID: SA11A1.7531
City Meadowbrook	State PA	Zip Code 19046
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1400.00	
Name of Employer Pep Boys	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	

SUBTOTAL of Receipts This Page (optional)	▶	2025.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Joseph P. Stampone		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 1390 Tanglewood Drive		Transaction ID: SA11A1.7532
City North Wales	State PA	Zip Code 19454
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 3700.00
Name of Employer Stampone, D'Angelo & Renzi	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3825.00	

Full Name (Last, First, Middle Initial) B. Sharon Suleta		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 214 Martrory Lane		Transaction ID: SA11A1.7535
City Wallingford	State PA	Zip Code 19086
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 350.00
Name of Employer Klehr Harrison LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Carol Tamburino		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 6 / 2 0 0 7
Mailing Address 3 Sea Side Ct.		Transaction ID: SA11A1.7536
City Margate	State NJ	Zip Code 08402
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer Turner Construction	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	4300.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 700 W. Germantown Pike

City East Norriton State PA Zip Code 19403

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

Name of Employer Continental Realty Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 1 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.7539

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Patricia D. Tobin

Mailing Address 2612 South 11th St.

City Philadelphia State PA Zip Code 19148

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

Name of Employer Information Requested-Best Efforts Occupation Information Requested-Best Efforts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.7543

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
Donald N. Tomasello

Mailing Address 135 Somerset Dr.

City Blue Bell State PA Zip Code 19422

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

Name of Employer Continental Realty Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.7546

Amount of Each Receipt this Period
 700.00

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Donald N. Tomasello		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7
Mailing Address 135 Somerset Dr.		Transaction ID: SA11A1.7544
City State Zip Code Blue Bell PA 19422	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Continental Realty	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Donald N. Tomasello		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7
Mailing Address 135 Somerset Dr.		Transaction ID: SA11A1.7545
City State Zip Code Blue Bell PA 19422	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Continental Realty	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) C. Stanton L. Triester		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 111 Presidential Blvd. Suite 230		Transaction ID: SA11A1.7548
City State Zip Code Bala Cynwyd PA 19004	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Paola F. Triforo

Mailing Address 727 McCardle Dr.

City State Zip Code
West Chester PA 19380

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

Name of Employer Information Requested-Best Efforts
Occupation Information Requested-Best Efforts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.7550

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
Marjorie L. Vaccaro

Mailing Address 1645 Waverly Rd.

City State Zip Code
Gladwyne PA 19035

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

Name of Employer
Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.7554

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
Francis A. Venezia

Mailing Address 1213 Bill Smith Blvd.

City State Zip Code
King of Prussia PA 19406-3094

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

Name of Employer Tele Spectrum World
Occupation Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.7557

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	950.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Kenneth R. Vennera		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 7	
Mailing Address 133 Discovery Court		Transaction ID: SA11A1.7561	
City State Zip Code Norristown PA 19401	Amount of Each Receipt this Period 1950.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Edentify Inc.	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1950.00		

Full Name (Last, First, Middle Initial) B. Kenneth R. Vennera		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 7	
Mailing Address 133 Discovery Court		Transaction ID: SA11A1.7560	
City State Zip Code Norristown PA 19401	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Edentify Inc.	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2050.00		

Full Name (Last, First, Middle Initial) C. Thomas A. Vento		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7	
Mailing Address 1121 Belfield Ave.		Transaction ID: SA11A1.7564	
City State Zip Code Drexel Hill PA 19026	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Prudential Savings Bank	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

SUBTOTAL of Receipts This Page (optional) ▶	2400.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 42 / 74	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
David A. Volpe

Mailing Address 2316 Holly Lane

City State Zip Code
Lafayette Hill PA 19444

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

Name of Employer Occupation
Emerald Asset Management, Inc. Managing Director

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
02 / 12 / 2007

Transaction ID: SA11A1.7570

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)	▶	350.00
TOTAL This Period (last page this line number only)	▶	78437.60

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 / 74
	(check only one)	
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. BOB BRADY FOR CONGRESS		Date of Receipt M M / D D / Y Y Y Y Y 03 / 23 / 2007	
Mailing Address 1827 South Broad Street		Transaction ID: SA11C.7579	
City State Zip Code PHILADELPHIA PA 19148		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C C00333740			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Cement Masons Local #592 PAC		Date of Receipt M M / D D / Y Y Y Y Y 01 / 12 / 2007	
Mailing Address 2511 Snyder Avenue		Transaction ID: SA11C.7341	
City State Zip Code Philadelphia PA 19145		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Committee to Elect Mayor Joseph DiGirolamo		Date of Receipt M M / D D / Y Y Y Y Y 01 / 19 / 2007	
Mailing Address 3982 Grace Ave.		Transaction ID: SA11C.7352	
City State Zip Code Bensalem PA 19020		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Bensalem Township Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 44 / 74
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Committee to Elect Mayor Joseph DiGirolamo

Mailing Address 3982 Grace Ave.

City Bensalem State PA Zip Code 19020

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

Name of Employer Bensalem Township Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 1 9 / 2 0 0 7

Transaction ID: SA11C.7353

Amount of Each Receipt this Period
 150.00

B. Full Name (Last, First, Middle Initial)
Friends of Mario Civera

Mailing Address PO Box 682

City Pilgrim Gardens State PA Zip Code 19026

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 1 9 / 2 0 0 7

Transaction ID: SA11C.7399

Amount of Each Receipt this Period
 300.00

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

Mailing Address 1407 Vankirk St.

City Philadelphia State PA Zip Code 19149-3327

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 1 2 / 2 0 0 7

Transaction ID: SA11C.7400

Amount of Each Receipt this Period
 350.00

SUBTOTAL of Receipts This Page (optional) ► 800.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 74
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Mailing Address 1407 Vankirk St.

City Philadelphia State PA Zip Code 19149-3327

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 1 / 1 2 / 2 0 0 7

Transaction ID: SA11C.7401

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Miller Alfano & Raspanti PAC

Mailing Address 1818 Market St.
Suite 3402

City Philadelphia State PA Zip Code 19103

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 1 2 / 2 0 0 7

Transaction ID: SA11C.7468

Amount of Each Receipt this Period
 350.00

C00388769

C. Full Name (Last, First, Middle Initial)
Penn National Gaming PAC

Mailing Address 825 Berkshire Blvd.
Suite 200

City Wyomissing State PA Zip Code 19610

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 0 2 / 2 0 0 7

Transaction ID: SA11C.7493

Amount of Each Receipt this Period
 400.00

C00423814

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 74
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. WESTRUM PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 2 / 2 0 0 7	
Mailing Address 370 Commerce Dr.		Transaction ID: SA11C.7573	
City State Zip Code Ft. Washington PA 19034	Amount of Each Receipt this Period 1850.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Westrum Development Co.	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1850.00		

Full Name (Last, First, Middle Initial) B. WESTRUM PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 3 / 2 0 0 7	
Mailing Address 370 Commerce Dr.		Transaction ID: SA11C.7572	
City State Zip Code Ft. Washington PA 19034	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Westrum Development Co.	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2150.00		

SUBTOTAL of Receipts This Page (optional) ▶	2150.00
TOTAL This Period (last page this line number only) ▶	5350.00

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

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Transaction ID: SB21B.7257 Date of Disbursement
Mailing Address P.O. BOX 53452		<input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City PHOENIX	State AZ	Zip Code 85072-3852
Purpose of Disbursement CREDIT CARD FEE	<input type="text" value="163.75"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. AUDIO VISUAL COMMUNICATIONS		Transaction ID: SB21B.7250 Date of Disbursement
Mailing Address 435 CROOKED LANE		<input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City KING OF PRUSSIA	State PA	Zip Code 19406
Purpose of Disbursement PAC FUNDRAISING EVENT COSTS	<input type="text" value="1192.50"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7185 Date of Disbursement
Mailing Address 1835 MARKET ST		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City PHILADELPHIA	State PA	Zip Code 19103
Purpose of Disbursement Credit Card Fee	<input type="text" value="104.24"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1460.49"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7188 Date of Disbursement
Mailing Address 1835 MARKET ST		<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2007"/>
City PHILADELPHIA	State PA	Zip Code 19103
Purpose of Disbursement Credit Card Fee	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="0.26"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7189 Date of Disbursement
Mailing Address 1835 MARKET ST		<input type="text" value="01"/> / <input type="text" value="09"/> / <input type="text" value="2007"/>
City PHILADELPHIA	State PA	Zip Code 19103
Purpose of Disbursement Credit Card Fee	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="3.07"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7190 Date of Disbursement
Mailing Address 1835 MARKET ST		<input type="text" value="01"/> / <input type="text" value="10"/> / <input type="text" value="2007"/>
City PHILADELPHIA	State PA	Zip Code 19103
Purpose of Disbursement Credit Card Fee	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="46.68"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="50.01"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7193 Date of Disbursement
Mailing Address 1835 MARKET ST		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>
City PHILADELPHIA	State PA	Zip Code 19103
Purpose of Disbursement Credit Card Fee	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="12.90"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7205 Date of Disbursement
Mailing Address 1835 MARKET ST		<input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2007"/>
City PHILADELPHIA	State PA	Zip Code 19103
Purpose of Disbursement CREDIT CARD FEE	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="30.33"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7206 Date of Disbursement
Mailing Address 1835 MARKET ST		<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2007"/>
City PHILADELPHIA	State PA	Zip Code 19103
Purpose of Disbursement CREDIT CARD FEE	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="2.77"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="46.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 50 / 74

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

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

Full Name (Last, First, Middle Initial) A. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7209 Date of Disbursement																				
Mailing Address 1835 MARKET ST		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>7</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	5		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		2	5		2	0	7														
City PHILADELPHIA	State PA	Zip Code 19103																				
Purpose of Disbursement CREDIT CARD FEE	Amount of Each Disbursement this Period																					
Candidate Name	<table border="1"><tr><td>8.92</td></tr></table>		8.92																			
8.92																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

Full Name (Last, First, Middle Initial) B. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7210 Date of Disbursement																				
Mailing Address 1835 MARKET ST		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>7</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	9		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		2	9		2	0	7														
City PHILADELPHIA	State PA	Zip Code 19103																				
Purpose of Disbursement CREDIT CARD FEE	Amount of Each Disbursement this Period																					
Candidate Name	<table border="1"><tr><td>4.46</td></tr></table>		4.46																			
4.46																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

Full Name (Last, First, Middle Initial) C. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7211 Date of Disbursement																				
Mailing Address 1835 MARKET ST		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>7</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	0		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		3	0		2	0	7														
City PHILADELPHIA	State PA	Zip Code 19103																				
Purpose of Disbursement CREDIT CARD FEE	Amount of Each Disbursement this Period																					
Candidate Name	<table border="1"><tr><td>0.52</td></tr></table>		0.52																			
0.52																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>13.90</td></tr></table>	13.90
13.90		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7214 Date of Disbursement
Mailing Address 1835 MARKET ST		<input type="text" value="01"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City PHILADELPHIA	State PA	Zip Code 19103
Purpose of Disbursement CREDIT CARD FEE	<input type="text" value="23.40"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7215 Date of Disbursement
Mailing Address 1835 MARKET ST		<input type="text" value="02"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City PHILADELPHIA	State PA	Zip Code 19103
Purpose of Disbursement CREDIT CARD FEE	<input type="text" value="25.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7219 Date of Disbursement
Mailing Address 1835 MARKET ST		<input type="text" value="02"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City PHILADELPHIA	State PA	Zip Code 19103
Purpose of Disbursement CREDIT CARD FEE	<input type="text" value="98.20"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="146.60"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) A. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7221 Date of Disbursement																					
Mailing Address 1835 MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		0	6		2	0	7															
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD FEE		Category/ Type	26.87																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) B. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7222 Date of Disbursement																					
Mailing Address 1835 MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		0	7		2	0	7															
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD FEE		Category/ Type	48.55																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) C. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7231 Date of Disbursement																					
Mailing Address 1835 MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	2		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	2		2	0	7															
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD FEE		Category/ Type	87.09																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	▶	162.51
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) A. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7234 Date of Disbursement																					
Mailing Address 1835 MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	3		2	0	7															
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD FEE		Category/ Type	4.46																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) B. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7235 Date of Disbursement																					
Mailing Address 1835 MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	5		2	0	7															
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD FEE		Category/ Type	98.14																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) C. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7242 Date of Disbursement																					
Mailing Address 1835 MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	1		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		2	1		2	0	7															
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD FEE		Category/ Type	63.82																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	▶	166.42
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)		Transaction ID: SB21B.7243																					
A. BANKCARD/CONESTOGA BANK		Date of Disbursement																					
Mailing Address 1835 MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	3		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		2	3		2	0	7															
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD FEE		Category/ Type	112.76																				
Candidate Name																							
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

Full Name (Last, First, Middle Initial)		Transaction ID: SB21B.7244																					
B. BANKCARD/CONESTOGA BANK		Date of Disbursement																					
Mailing Address 1835 MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		2	8		2	0	7															
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD FEE		Category/ Type	15.00																				
Candidate Name																							
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

Full Name (Last, First, Middle Initial)		Transaction ID: SB21B.7245																					
C. BANKCARD/CONESTOGA BANK		Date of Disbursement																					
Mailing Address 1835 MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		0	1		2	0	7															
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD FEE		Category/ Type	25.00																				
Candidate Name																							
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

SUBTOTAL of Disbursements This Page (optional)	▶	152.76
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7248 Date of Disbursement																				
Mailing Address 1835 MARKET ST		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	2		2	0	0	7													
City PHILADELPHIA	State PA	Zip Code 19103																				
Purpose of Disbursement CREDIT CARD FEE	<table border="1"><tr><td>Amount of Each Disbursement this Period</td></tr><tr><td>118.50</td></tr></table>		Amount of Each Disbursement this Period	118.50																		
Amount of Each Disbursement this Period																						
118.50																						
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:																						

Full Name (Last, First, Middle Initial) B. BANKCARD/CONESTOGA BANK		Transaction ID: SB21B.7258 Date of Disbursement																				
Mailing Address 1835 MARKET ST		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	2		2	0	0	7													
City PHILADELPHIA	State PA	Zip Code 19103																				
Purpose of Disbursement CREDIT CARD FEE	<table border="1"><tr><td>Amount of Each Disbursement this Period</td></tr><tr><td>35.03</td></tr></table>		Amount of Each Disbursement this Period	35.03																		
Amount of Each Disbursement this Period																						
35.03																						
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:																						

Full Name (Last, First, Middle Initial) C. Barna Advisory Services, PC		Transaction ID: SB21B.7237 Date of Disbursement																				
Mailing Address 270 S. Woodmont Dr.		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	6		2	0	0	7													
City Downingtown	State PA	Zip Code 19335																				
Purpose of Disbursement ACCOUNTING FEES	<table border="1"><tr><td>Amount of Each Disbursement this Period</td></tr><tr><td>3750.00</td></tr></table>		Amount of Each Disbursement this Period	3750.00																		
Amount of Each Disbursement this Period																						
3750.00																						
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:																						

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>3903.53</td></tr></table>	3903.53
3903.53		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Barna Advisory Services, PC		Transaction ID: SB21B.7274 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address 270 S. Woodmont Dr.		Amount of Each Disbursement this Period 28.41
City Downingtown State PA Zip Code 19335	Category/ Type	
Purpose of Disbursement EXPENSE REIMBURSEMENT- POSTAGE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CENTER CITY ENGRAVING		Transaction ID: SB21B.7233 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 7
Mailing Address 1206 WALNUT ST.		Amount of Each Disbursement this Period 669.19
City PHILADELPHIA State PA Zip Code 19107	Category/ Type	
Purpose of Disbursement PAC FUNDRAISING EVENT COSTS		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CHARITABLE & EDUCATON TRUST		Transaction ID: SB21B.7255 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address 601 WALNUT STREET STE L-45		Amount of Each Disbursement this Period 300.00
City PHILADELPHIA State PA Zip Code 19106	Category/ Type	
Purpose of Disbursement PAC ADVERTISING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	997.60
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. DAVE PASCAL		Transaction ID: SB21B.7230 Date of Disbursement 02 / 10 / 2007	
Mailing Address 7 MADISON DR.		Amount of Each Disbursement this Period 320.00	
City WILLOW GROVE	State PA	Zip Code 19090	Category/ Type
Purpose of Disbursement PAC FUNDRAISING EVENT-ENTERTAINMENT			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. FRANK MARCO		Transaction ID: SB21B.7225 Date of Disbursement 02 / 10 / 2007	
Mailing Address 7 MADISON RD.		Amount of Each Disbursement this Period 320.00	
City WILLOW GROVE	State PA	Zip Code 19090	Category/ Type
Purpose of Disbursement PAC FUNDRAISING EVENT-ENTERTAINMENT			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. LA COLLINA		Transaction ID: SB21B.7192 Date of Disbursement 01 / 17 / 2007	
Mailing Address 37-41 ASHLAND AVE.		Amount of Each Disbursement this Period 771.00	
City BELMONT HILLS	State PA	Zip Code 19004	Category/ Type
Purpose of Disbursement Board Meeting Expense			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	1411.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Linke Printing		Transaction ID: SB21B.7249 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address 2926 Richmond St.		Amount of Each Disbursement this Period 1322.40
City Philadelphia State PA Zip Code 19134		
Purpose of Disbursement PRINTING & REPRODUCTION	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. LUIGI & GIOVANNI CATERERS		Transaction ID: SB21B.7232 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address 3601 CHAPEL ROAD		Amount of Each Disbursement this Period 5565.00
City NEWTOWN SQUARE State PA Zip Code 19073		
Purpose of Disbursement PAC FUNDRAISING EVENT-CATERING	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. MAGNIFIQUE BALLOONS & FLOWERS		Transaction ID: SB21B.7223 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 7
Mailing Address 4134 MANAYUNK AVE.		Amount of Each Disbursement this Period 3777.75
City PHILADELPHIA State PA Zip Code 19128		
Purpose of Disbursement PAC FUNDRAISING EVENT COSTS	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10665.15
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. MARTIN BENEDETTI		Transaction ID: SB21B.7229 Date of Disbursement MM / DD / YYYY 02 / 10 / 2007	
Mailing Address 7 MADISON RD.		Amount of Each Disbursement this Period 320.00	
City WILLOW GROVE	State PA	Zip Code 19090	Category/ Type
Purpose of Disbursement PAC FUNDRAISING EVENT-ENTERTAINMENT			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. MIKE ELIA		Transaction ID: SB21B.7227 Date of Disbursement MM / DD / YYYY 02 / 10 / 2007	
Mailing Address 7 MADISON RD.		Amount of Each Disbursement this Period 320.00	
City WILLOW GROVE	State PA	Zip Code 19090	Category/ Type
Purpose of Disbursement PAC FUNDRAISING EVENT-ENTERTAINMENT			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. MIKE MOUNTAIN PHOTOGRAPHY		Transaction ID: SB21B.7254 Date of Disbursement MM / DD / YYYY 03 / 05 / 2007	
Mailing Address 737 N. EASTON RD.		Amount of Each Disbursement this Period 563.00	
City GLENSIDE	State PA	Zip Code 19038	Category/ Type
Purpose of Disbursement PAC FUNDRAISING EVENT-PHOTOGRAPHY			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	1203.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. PRIESTLY PRINTERS		Transaction ID: SB21B.7196 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7
Mailing Address 233-45 N. JUNIPER ST		Amount of Each Disbursement this Period 1979.50
City PHILADELPHIA State PA Zip Code 19107	Category/ Type	
Purpose of Disbursement PRINTING COSTS		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. PRIESTLY PRINTERS		Transaction ID: SB21B.7251 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address 233-45 N. JUNIPER ST		Amount of Each Disbursement this Period 4130.00
City PHILADELPHIA State PA Zip Code 19107	Category/ Type	
Purpose of Disbursement PAC FUNDRAISING EVENT COSTS-INVITATIONS		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. ROBERT TAYLOR		Transaction ID: SB21B.7228 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 7
Mailing Address 2456 ELDON AVE.		Amount of Each Disbursement this Period 320.00
City DREXEL HILL State PA Zip Code 19026	Category/ Type	
Purpose of Disbursement PAC FUNDRAISING EVENT-ENTERTAINMENT		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6429.50
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. SHERATON SOCIETY HILL		Transaction ID: SB21B.7240 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address ONE DOCK ST.		Amount of Each Disbursement this Period 27241.00
City PHILADELPHIA	State PA Zip Code 19106	
Purpose of Disbursement PAC FUNDRAISING EVENT COSTS		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. THE PARTY CENTER		Transaction ID: SB21B.7252 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address 480 POTHOUSE RD		Amount of Each Disbursement this Period 1842.81
City PHOENIXVILLE	State PA Zip Code 19460	
Purpose of Disbursement PAC FUNDRAISING EVENT-EQUIPMENT RENTAL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TINA KATSOS		Transaction ID: SB21B.7226 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 7
Mailing Address 7 MADISON RD.		Amount of Each Disbursement this Period 320.00
City WILLOW GROVE	State PA Zip Code 19090	
Purpose of Disbursement PAC FUNDRAISING EVENT-ENTERTAINEMENT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	29403.81
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. UTA ASSOCIATES		Transaction ID: SB21B.7272 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 1205 LOCUST ST SUITE 100		Amount of Each Disbursement this Period 493.48
City PHILADELPHIA State PA Zip Code 19107		
Purpose of Disbursement EXPENSE REIMBURSEMENT-PHONE & POSTAGE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: SB21B.7272.0 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 74.34
City Baltimore State MD Zip Code 21297		
Purpose of Disbursement TELEPHONE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. THE PARTY CENTER		Transaction ID: SB21B.7272.3 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 480 POTHOUSE RD		Amount of Each Disbursement this Period 255.19
City PHOENIXVILLE State PA Zip Code 19460		
Purpose of Disbursement PAC FUNDRAISING EVENT-SUPPLIES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	493.48
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) A. UNITED STATES POSTAL SERVICE		Transaction ID: SB21B.7272.4 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 30TH & MARKET STS		Amount of Each Disbursement this Period 18.62 [MEMO ITEM]
City PHILADELPHIA State PA Zip Code 19103		
Purpose of Disbursement POSTAGE & DELIVERY Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. UTA ASSOCIATES		Transaction ID: SB21B.7273 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 1205 LOCUST ST SUITE 100		Amount of Each Disbursement this Period 203.30 [MEMO ITEM]
City PHILADELPHIA State PA Zip Code 19107		
Purpose of Disbursement EXPENSE REIMBURSEMENT-PHONE & POSTAGE Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: SB21B.7273.1 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 81.30 [MEMO ITEM]
City Baltimore State MD Zip Code 21297		
Purpose of Disbursement TELEPHONE Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	203.30
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Italian American Political Action Committee

Full Name (Last, First, Middle Initial)

A. UNITED STATES POSTAL SERVICE

Mailing Address 30TH & MARKET STS

City PHILADELPHIA State PA Zip Code 19103

Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.7273.3

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15.60

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

69196.21

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. DOYLE FOR CONGRESS		Transaction ID: SB23.7268 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7
Mailing Address 205 HAWTHORNE COURT		Amount of Each Disbursement this Period 1000.00
City PITTSBURGH State PA Zip Code 15221	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. LOBIONDO FOR CONGRESS		Transaction ID: SB23.7291 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7
Mailing Address PO BOX 775		Amount of Each Disbursement this Period 1000.00
City MARMORA State NJ Zip Code 08223	Category/ Type	
Purpose of Disbursement FEDERAL COMMITTEE CONTRIBUTION		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. PASCRELL FOR CONGRESS		Transaction ID: SB23.7289 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7
Mailing Address PO BOX 640		Amount of Each Disbursement this Period 1000.00
City TOTOWA State NJ Zip Code 07571	Category/ Type	
Purpose of Disbursement FEDERAL COMMITTEE CONTRIBUTION		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Italian American Political Action Committee

Full Name (Last, First, Middle Initial)

A. RUDY GIULIANI PRESIDENTIAL COMMITTEE

Mailing Address 1585 BROADWAY

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.7266

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2007

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

8000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Cibik & Cataldo, PC		Transaction ID: SB28A.7239 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7	
Mailing Address 437 Chestnut St. Suite 1000		Amount of Each Disbursement this Period 300.00	
City Philadelphia State PA Zip Code 19106	Purpose of Disbursement REFUNDED CONTRIBUTION	Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional)	300.00
TOTAL This Period (last page this line number only)	300.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. BOYS TOWNS OF ITALY		Transaction ID: SB29.7264 Date of Disbursement
Mailing Address 250 E 63RD ST.		<input type="text" value="03"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City NEW YORK	State NY	Zip Code 10021
Purpose of Disbursement CHARITABLE CONTRIBUTION	<input type="text" value="1000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CHARITABLE & EDUCATON TRUST		Transaction ID: SB29.7256 Date of Disbursement
Mailing Address 601 WALNUT STREET STE L-45		<input type="text" value="03"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City PHILADELPHIA	State PA	Zip Code 19106
Purpose of Disbursement CHARITABLE CONTRIBUTION	<input type="text" value="1925.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. FRIENDS OF FARNESE		Transaction ID: SB29.7288 Date of Disbursement
Mailing Address 1420 LOCUST STREET SUITE 20R		<input type="text" value="02"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City PHILADELPHIA	State PA	Zip Code 19102
Purpose of Disbursement CAMPAIGN CONTRIBUTION	<input type="text" value="250.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3175.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="3175.00"/>

SCHEDULE C (FEC Form 3X)

LOANS

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

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

Transaction ID: SC/10.4284

LOAN SOURCE Full Name (Last, First, Middle Initial)

AMATO BERARDI

Election:

- Primary
- General
- Other (specify) ▼

Mailing Address 555 E. CITY LINA AVE.

City BALA CYNWYD State PA ZIP Code 19004

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7500.00	0.00	7500.00

TERMS

Date Incurred: MM/06 DD/15 YY/2001
Date Due: _____ Interest Rate: _____ % (apr)
Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional) ► 7500.00

TOTALS This Period (last page in this line only) ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

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

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

Transaction ID: SC/10.4271

LOAN SOURCE Full Name (Last, First, Middle Initial)

Amato Berardi

Election:

- Primary
- General
- Other (specify) ▼

Mailing Address 555 City Line Ave, Suite 770

City Bala Cynwyd State PA ZIP Code 19004

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close 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
03 17 2001

% (apr)

Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	2500.00
TOTALS This Period (last page in this line only)	10000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Form/Schedule: **F3XA**

Transaction ID:

WE ARE FILING THIS AMENDED REPORT IN RESPONSE TO YOUR REQUEST FOR ADDITIONAL INFORMATION DATED NOVEMBER 14, 2007. PLEASE NOTE THAT ALL EXPENDITURES LISTED ON SCHEDULE B, LINE 21 WERE MADE ON BEHALF OF THE NATIONAL ITALIAN AMERICAN POLITICAL ACTION COMMITTEE (NIAPAC), AND THAT NONE OF THESE EXPENDITURES WERE MADE ON BEHALF OF A SPECIFICALLY IDENTIFIED FEDERAL CANDIDATE THAT WOULD CONSTITUTE AN IN-KIND EXPENDITURE, OR AN INDEPENDENT EXPENDITURE. ALL EXPENDITURES LISTED ON SCHEDULE B, LINE 21 MADE FOR 'COMPENSATION FOR FUNDRAISING SVCS' WERE EXPENDITURES FOR FUNDRAISING SERVICES SPECIFICALLY PROVIDED TO NIAPAC. ALL EXPENDITURES LISTED ON SCHEDULE B, LINE 21 MADE FOR 'PRINTING & REPRODUCTION' AND 'PRINTING COSTS' WERE EXPENDITURES MADE ON BEHALF OF NIAPAC AND THE PRINTED MATERIALS DID NOT CONTAIN ANY EXPRESS ADVOCACY OR REFER TO A CLEARLY IDENTIFIED FEDERAL CANDIDATE.